

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date Of Report	31/07/2018 09:21
Date Of Accident	30/07/2018 17:30
Exact Location Of Accident	B/217 PASIR RIS STREET 21
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FX9487Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YEOH LIN FONG, MARCUS (YANG LIN FONG)
NRIC No	S8905524E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87674699
Alternative Phone No	OTHERS-87674699

### Vehicle Particulars

Manufacturer	HONDA
Model	CB400 M
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5096924805 TP
Cover Note Number	

### Driver

Name of Driver	YEOH LIN FONG, MARCUS (YANG LIN FONG)
NRIC No	S8905524E
Date Of Birth	23/02/1989
Occupation	OUTDOOR
Date Of Driving Pass	28/05/2014
Driving Experience	4 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87674699
Fax Number	
Contact Number	OTHERS-87674699
Email Address	NOEMAIL

Address BLK 228 #05-749 JURONG EAST STREET 21  
 Postcode 600228  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured OWNER  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

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#### General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED  
 Weather Conditions CLEAR  
 Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles involved in the accident 2  
 Was any body injured in the Accident? NO  
 Was any injured conveyed to hospital by ambulance? NO  
 Was any other material or property damaged? YES  
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
 Number of Passengers (Including Driver) 0

#### Details of Police Action

Was the accident reported to the police? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

MY BIKE WAS PARKED NEAR TO THE RUBBISH CHUTE. WHEN I CAME BACK TO MY BIKE, I SAW A NOTE LEFT ON MY BIKE(REFER TO ATTACHED). WHEN I CONTACTED THE MOBILE NUMBER STATED ON THE NOTE, HE SAID THAT HIS FATHER-IN-LAW WHICH IS THE DRIVER OF THE CAR(SJG7710H) MADE A REVERSE AND COLLIDED INTO MY BIKE.

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? NO  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJG7710H  
 Vehicle Make/Model/Colour TOYOTA COROLLA ALTIS 1.6 AUTO  
 Details Of Properties  
 Vehicle Category PRIVATE CAR  
 Name of Driver  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

SKETCH PLANIMPORTANT NOTICE

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

31 JUL 2018

Driver's Signature

(If driver is not the policyholder)

Date & Time:

**IDAC KAKI BUKIT (VAC)**  
23 Kaki Bukit Ave 4  
Singapore 415933

Tel: 67416697 Fax: 67492305

Email: [vac@idac.com.sg](mailto:vac@idac.com.sg)

Name:

NRIC/FIN No.:

SKETCH PLAN

UNKNOWN  
(FX0487Y)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer

e-file

DECLARATION

I/We declare the foregoing particulars are true in every respect.

*Muz*  
Policyholder's Signature  
Date & Time: 31 JUL 2018

*Muz*  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

**IDAC KAKI BUKIT (VAC)**  
23 Kaki Bukit Ave 4  
Singapore 415933  
Tel: 67416697 Fax: 67492305  
Email: [vackb@singnet.com.sg](mailto:vackb@singnet.com.sg)  
Reporting Centre Personnel's Signature  
Name:  
NRIC/ID No:

Hi owner of  
FX 9487,

my Father-in-law

accidentally bumped  
into your bike and

it fell to the  
ground. You can

Contact me at

93633789.



**SINGAPORE  
POLICE FORCE**



G/20180731/2131

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**POLICE REPORT (NP299)**

Report No. G/20180731/2131

Police Station Of Origin  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

Date/Time Report Made 31/07/2018 17:01	Vide Report No.	Station Diary No. 81		
Name Of Informant YEOH LIN FONG, MARCUS	Address APT BLK 228 JURONG EAST STREET 21 #05-749 SINGAPORE 600228			
ID Type / ID No. NRIC NO / S8905524E	Contact No. Home/Office	Mobile 87674699		
Nationality SINGAPORE CITIZEN	Email Address			
Occupation Motorcycle delivery man	Sex Male	Age 29	Date of Birth 23/02/1989	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 28/07/2018 17:00 - 28/07/2018 18:00	Location Of Incident 217 PASIR RIS STREET 21 HDB-PASIR RIS SINGAPORE 510217 Loading/Unloading Area			

**Brief details.**

On 28/07/2018 at around 1700hrs to 1800hrs, I was doing delivery with my motorcycle FX9487Y at Blk 217 Pasir Ris Street 21. I parked my motorcycle along the road at the loading/unloading bay. After I completed the delivery, I went back home to rest as I happened to be staying at the same block.

About 30 minutes later, I went back down and realized that my motorcycle was in a different position.

Signature Of Officer Recording The Report: G / Staff Sgt MOHAMAD ADHA BIN MOHAMAD ADAM <i>Adha</i>	Signature Of Informant: <i>Wang</i>
Signature Of Interpreter: Not applicable	Date/Time: 31/07/2018 17:01
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Staff Sgt MOHAMAD RAFEEQ BIN HAJI MOHAMAD RASHID Contact No.: 62447200	Classification Of Case:

**Authentication Stamp**

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POLICE FORCE

*Adha*

SINGAPORE



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G/20180731/2131

1 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20180731/2131

There was a note placed on my motorcycle stating "Hi owner of FX9487, my father-in-law accidentally bumped into your bike and it fell to the ground. You can contact me at 93633789". I contacted the person and agreed to settle the matter privately with the driver.

I had already went to the bike workshop to check on the damages to my motorcycle and the bike workshop advised me to lodge a police report to facilitate the process to claim for the damages to my motorcycle. I am lodging the report for my own follow up actions.

Signature Of Officer Recording The Report:

G / Staff Sgt MOHAMAD ADHA BIN MOHAMAD  
ADAM

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
G / Bedok Police Divisional Investigation Branch /  
Staff Sgt MOHAMAD RAFEEQ BIN HAJI MOHAMAD  
RASHID  
Contact No.: 62447200

Signature Of Informant:

Date/Time:  
31/07/2018 17:01

Classification Of Case:

Authentication Stamp

