

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 liability.
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 Submission 03/11/2021 14:52 (SGT)
Date of Accident 02/11/2021 14:40 (SGT)
Exact Location of Accident Near Kallang Stn, Singapore
Additional Location Information BESIDE THE BUS STOP OF KALLANG MRT ON THE SECOND LANE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBC3697E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner XINZHONG AUTOPARTS LLP
Company Reg No T08LL0804C
Email Address tan@xinzhongautoparts.com
Mobile Phone No (Phone) +65-81222225
Alternative Phone No +65-81222225

VEHICLE PARTICULARS

Manufacturer Honda
Model Wave
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Motorcycle
Transmission Manual
CC 125

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage ThirdParty
Fleet Policy No
Policy Number MSD/VMT/21-421616-CA
Cover Note Number -

DRIVER

Name of Driver FOONG HONG YIN

Passport No/FIN	F8233777Q
Date Of Birth	27/10/1967
Occupation	Indoor
Date Of Driving Pass	17/12/1999
Driving experience	21 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92341180
Alt. Phone Number	-
Email Address	xiaobao8270@gmail.com
Address	BLK 224B BISHAN ST 23 #08-129
Address complement	-
Postcode	570224
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bishan Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005529999
Alt. Police Station Phone No	(Fax) +65-65561905
Police Station Address	20 Bishan Street 23 Singapore 579757
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT .

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	SHC153G
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Taxi
Name of Driver	NG PENG SENG
-	S0812354C
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	FOONG HONG YIN
Gender	Male
Phone No	-
Address	BLK 224 BISHAN ST 23 #08-129
Address Complement	-
Post Code	570224
Approximate Age Years Old	-
Injuries Sustained	BRUISES ON RH LEG , RH ARM INJURED
Injured person in which vehicle?	FBC3697E
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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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.
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.

新中汽配有限公司

XINZHONG AUTOPARTS LLP

33 Tyrwhitt Road

Singapore 207535

Tel: (65) 6291 6051 Fax: 6291 6052

Email: xzautoparts@xzhong.com.sg

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VOLKSWAGEN

AUDI

SKODA

SEAT

PORSCHE

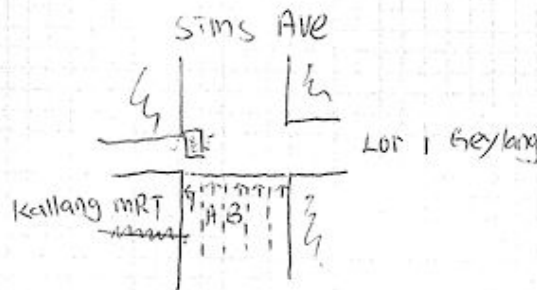
Hong

[Signature]

Policyholder's Signature / Date & Time / Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



A: FBC3691E

B: SHC153G

Describe Circumstances of the Accident

Police Report

Report No T/2021102/2100

Declaration

We declare the foregoing particulars are true in every respect.

新中汽配有限公司

XINZHONG AUTOPARTS LLP

33 Tyrwhitt Road

Singapore 207535

Tel: (65) 6291 6051 Fax: 6291 6052

Email: xzauto@singnet.com.sg

(13)

VOLKSWAGEN

AUDI

SKODA

SEAT

BORGSE

VOLVO & Time

Hong

Policyholder's Signature / Date Driver's Signature (If driver is not the policyholder) / Date


Witnessed by Reporting Centre
Personnel



**SINGAPORE
POLICE FORCE**



T/20211102/2100

1 of 4

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No: T/20211102/2100

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/11/2021 20:20	Vide Report No.:	Station Diary No.: 78
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Informant's Particulars

Name of Informant: FOONG HONG YIN	Address: APT BLK 224 Bishan St 23 #08-129 SINGAPORE 570224		
ID Type / ID No.: FIN NO / F8233777Q	Contact No.: Home/Office: Mobile: 92341180		
Nationality: MALAYSIAN	Email:		
Sex: Male	Age: 54	Date of Birth: 27/10/1967	Type of Informant: Rider
Race: Chinese	Language: Chinese		Institution / School Name:
Occupation: Motorcycle delivery man	Driving Licence Information: Class: 2B,3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 02/11/2021 14:40	Type of Location: Straight Road
Location: SIMS AVENUE				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBC3697E	Motorcycle	HONDA	WAVE 125X A	Blue	Slightly Damaged	0
SHC153G	Car	HYUNDAI	AE IONIQ HEV 1.6 DCT	Yellow	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



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2 of 4

Report No. T/20211102/2100

CONTINUATION OF REPORT

Rider			
Name	FOONG HONG YIN	ID No.	F8233777Q
Related Vehicle	FBC3697E (Motorcycle)	Contact No.	92341180
Hospital/Clinic	RAFFLES HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	02/11/2021	Date Discharge	02/11/2021
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	NG PENG SENG	ID No.	S0812354C
Related Vehicle	SHC153G (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 02/11/2021 at about 1440hrs, I was riding my motorcycle (FBC3697E) along Sims Avenue directly beside the bus stop of Kallang MRT on the second lane from the left of Sims Avenue. It was raining heavily thus when I saw the traffic light about 100metres away from me had turned red, I started to slow down to ensure that there is sufficient stopping distance. Suddenly, as I was still in the midst of slowing down, I suddenly felt a gust of wind from my back then from my right. From the right corner of my eye, I saw a yellow taxi (SHC153G) attempting to cut to my front from behind me via my right side. When the yellow taxi was attempting to pass me, the left mirror of the taxi side-swiped (brushed) my motorcycle causing me to fall down onto the road with my motorcycle pinning me to the road. Some passer-bys I do not know assisted to help me lift my motorcycle off of me and supported me and my motorcycle to the side of the road. The taxi also stopped at the side of the road where we exchanged particulars. Subsequently, the ambulance arrived and I was conveyed to Raffles Hospital where I was given 5 days of MC from 02/11/2021 to 06/11/2021. Before being conveyed, I handed my motorcycle to my colleague who happened to be around the area where the accident occurred.

I wish to state that I am unsure of the extent of damage to my motorcycle. Only the left side-mirror of the taxi collided(side-swiped) my motorcycle thus only the left side mirror of the taxi was damaged. I am unsure of the cost of repair for both vehicles. The taxi driver did not appear to have any visible injuries thus he left after I was conveyed. My motorcycle does not have any cameras however I am not aware if the taxi has any in-car camera.



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3 of 4

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Tel No: 1800-5529999



T/20211102/2100

4 of 4

Report No. T/20211102/2100

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report

E /

Sgt 2 TAN YI XIN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

02/11/2021 20:20

Officer In Charge Of Case:

TP / GIT /

SI CHONG GUAN FATT

Contact No.: 65476083

Classification Of Case:



SINGAPORE
POLICE FORCE

SN 061

Authentication Stamp

NP168

SIGNATURE



CA 550551
 MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
 Tel +65 6827 7888, Fax +65 6827 7800
 msig.com.sg

CERTIFICATE OF INSURANCE

Road Transport Act 1987 (Malaysia), Road Transport (Amendment) Act 2019 (Malaysia)
 The Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)
 The Motor Vehicles (Third Party Risks and Compensation) Act (CAP. 189 of the Revised Edition) (Republic of Singapore)
 The Motor Vehicles (Third Party Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)
 Or any Amendment, Act or Acts passed in substitution thereof.

CERTIFICATE NO : MSD/VMT/21-421616-CA A0074-001/1000

SUM INSURED : TPL
 EXCESS : NIL

1. Index mark and Registration Number of Vehicle F8C369TE
HONDA 125 c.c.
2. Name of Policyholder XINZHONG AUTOPARTS LLP
3. Effective date of the Commencement of Insurance
for the purposes of the Act 1201AM 22/02/2021
4. Date of Expiry of Insurance 21/02/2022
5. Persons or Classes of Persons entitled to drive
a. Any person who is driving on the Policyholder's order
or with their permission.
Provided that the person driving is permitted in accordance with the licensing
or other laws or regulations to drive the Motor Vehicle or has been so permitted
and is not disqualified by order of a Court of Law or by reason of any enactment
or regulation in that behalf from driving the Motor Vehicle. And provided further that
the Motor Vehicle is registered and licensed under the Road Traffic Act and its
registration and licensing under the Road Traffic Act has not been cancelled at the
time of the accident loss or damage.
6. Limitation as to Use
Use for social domestic and pleasure purposes and in
connection with the Policyholder's business or profession.
7. The Policy does not cover
 1. Use for hire or reward.
 2. Use for racing, pace-making, reliability trial or speed-testing.
 3. Use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter. 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof."

28/01/2021 (KP)
 CA/CI-03 (05/13)


COMMERCIAL AGENCY PTE. LTD.
 Underwriting Agent
 For MSIG Insurance (Singapore) Pte. Ltd.

XINZHONG AUTOPARTS LLP
33 Tyrwhitt Road Singapore 207535
Tel : (65) 6291 6051 (5 lines)
Fax: (65) 6291 6052
E-mail: <http://www.xinzhongautoparts.com>

To Whom It May Concern,

We hereby authorize Foong Hong Yin F8233777Q on behalf on our vehicle FBC3697E to launch an Accident report.

Yours Sincerely



XINZHONG AUTOPARTS LLP

新中汽配有限公司
XINZHONG AUTOPARTS LLP
33 Tyrwhitt Road
Singapore 207535
Tel: (65) 6291 6051 Fax: 6291 6052
Email: xzauto@singnet.com.sg

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VOLKSWAGEN
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VOLVO





















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Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 54	Date of Birth: 27/10/1967	Type of Informant: Rider		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: Motorcycle delivery man			Driving Licence Information: Class: 2B,3,4 Date of Expiry:		

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Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 02/11/2021 14:40	Type of Location: Straight Road
Location: SIMS AVENUE				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBC3697E	Motorcycle	HONDA	WAVE 125X A	Blue	Slightly Damaged	0
SHC153G	Car	HYUNDAI	AE IONIQ HEV 1.6 DCT	Yellow	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



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Date Treatment	02/11/2021	Date Discharge	02/11/2021
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	NG PENG SENG	ID No.	S0812354C
Related Vehicle	SHC153G (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
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Signature of Officer Recording The Report E / Sgt 2 TAN YI XIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 02/11/2021 20:20
Officer In Charge Of Case: TP / GIT / SI CHONG GUAN FATT Contact No.: 65476083	Classification Of Case:
Authentication Stamp NP168	SN 061
SIGNATURE	