

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	14/04/2022 13:02 (SGT)
Date of Accident	25/03/2022 03:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Junction of Paterson road /Orchard boulevard
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP3186U
-----------------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHAI MIN FONG
NRIC No	S7271196C
Email Address	CHAIMINFONG814@GMAIL.COM
Mobile Phone No	(Phone) +65-83448119
Alternative Phone No	+65-83448119

VEHICLE PARTICULARS

Manufacturer	Sym
Model	VF3I
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Motorcycle
Transmission	Manual
CC	190

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	5108231433-03
Cover Note Number	-

DRIVER

Name of Driver	CHAI MIN FONG
NRIC No	S7271196C

Date Of Birth	21/03/1972
Occupation	Outdoor
Date Of Driving Pass	21/06/1995
Driving experience	26 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83448119
Alt. Phone Number	+65-83448119
Email Address	CHAIMINFONG814@GMAIL.COM
Address	BLK 12 MARSILING LANE #11-39
Address complement	-
Postcode	730012
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Collision - Head on collision
Weather Conditions	Clear
Road Surface	Dry

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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	Yes
If yes, against whom?	SMZ6021J

CIRCUMSTANCES OF ACCIDENT

I WAS RIDING MY MOTORCYCLE ALONG THE JUNCTION OF PATERSON ROAD (FBP3186U) GOING STRAIGHT WHEN (SMZ6021J) TURN RIGHT FROM THE OPPOSITE DIRECTION AND HIT ONTO ME. ADDITIONAL 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	SMZ6021J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
Name of Driver	UNKNOWN
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	CHAI MIN FONG
Gender	Male
Phone No	(Phone) +65-83448119
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBP3186U
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**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. The 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 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: 14/4/2022 1230

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name: HONG DA

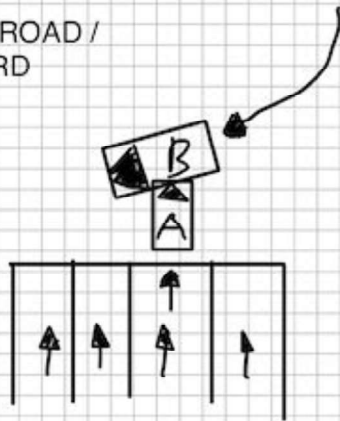
NRIC/FIN No.: S992334

SKETCH PLAN

JUNCTION OF PATERSON ROAD /
ORCHARD BOULEVARD

A:FBP3186U

B:SMZ7021J



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT

DECLARATION

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

Policyholder's Signature
Date & Time: 14/4/2022 1230

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

Reporting Centre Personnel's Signature
Name: HONG DA
NRIC/FIN No.: S992334











**SINGAPORE
POLICE FORCE**



T/20220401/7033

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20220401/7033

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/04/2022 16:30	Vide Report No.:	Station Diary No.:
--	------------------	--------------------

Informant's Particulars

Name of Informant: CHAI MIN FONG			Address: 12 MARSILING LANE #11-39 SINGAPORE 730012		
ID Type / ID No.: NRIC NO / S7271196C			Contact No.: Home/Office: Mobile: 83448119		
Nationality: MALAYSIAN			Email: CHAIMINFONG814@GMAIL.COM		
Sex: Male	Age: 50	Date of Birth: 21/03/1972	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: GRAB FOOD DELIVERY			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

General Information: On the Road				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/03/2022 03:40	Type of Location: T-Junction
Location: PATERSON ROAD JUNCTION WITH ORCHARD BOULEVARD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBP3186U	Motorcycle	SYM	VF3I	Black		0
SMZ6021J	Car					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
-------------	-------------------	---------------	-----------	-------------



**SINGAPORE
POLICE FORCE**



T/20220401/7033

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20220401/7033

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBP3186U	NTUC Income Insurance Co-Operative Limited	5108231433-03	15/03/2022	14/03/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	CHAI MIN FONG		ID No. S7271196C
Related Vehicle	FBP3186U (Motorcycle)		Contact No. 83448119
Hospital/Clinic	TAN TOCK SENG HOSPITAL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	25/03/2022		Date 30/03/2022
No. of Days granted Medical Leave		15	Degree of Serious

Brief Details.

I refer to my previous report T/20220330/7024.

I have established the third party vehicle number SMZ6021J that was provided by the Investigating Officer.



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 6246
www.police.gov.sg

Our Ref : TP 11P / 06779 / 2022
Date : 01042022

NAME: NHA MIN DON
NRIC / FIN: S 72711960

{ 12.30pm }

Dear Sir / Madam,

CASE OF DRINK DRIVING ALONG PROHIBITED ROAD.

NOTICE FOR VEHICLE FBP 31364 COLLECTION

Please collect the above vehicle which is registered under your name at **Traffic Police Vehicle Pound** located at 517 Airport Road, Singapore 539942 within 30 working days from the date of this notice. The Duty Officer at **Traffic Police Vehicle Pound** can be contacted at 6280 7841. The collection hours are:

Day of week	Operational hours
Monday	2.00 pm to 4.00 pm
Tuesday to Friday	9.00 am to 12.00pm 2.00 pm to 4.00 pm

2 You have to make your own arrangements to remove your vehicle at your own cost. If you are authorising someone else to collect the vehicle on your behalf, please ensure that he / she produces his / her NRIC / Passport for verification. Please fill up the letter of authorization at Annex 'A'. **IF YOU ARE COLLECTING THE CAR BY YOURSELF, YOU MAY ONLY DO SO AFTER 12 HRS FROM THE TIME OF YOUR RELEASE.**

3 Take note that the vehicle must be collected within 30 working days from the date of this notice or storage fee will be levied as follows:

Type of vehicle	Storage fee per day
Motorcycle/Scooter	\$20/-
Motorcar	\$40/-
Others	\$80/-

4 Traffic Police will proceed to dispose the vehicle if it remains unclaimed after 30 working days from the date of this notice. Should you require further clarification, please contact the undersigned at telephone number 6547 6198 or via email at Nor_Faizal_YAHYA@spf.gov.sg.

Yours faithfully,

**NOR FAIZAL BIN YAHYA
SENIOR INVESTIGATION OFFICER
TRAFFIC POLICE**

A FORCE FOR THE NATION



SINGAPORE POLICE FORCE

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20220401/7033

3 of 3

Report No. T/20220401/7033

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

DATE OF DRINK DRIVING ALONG: 01/04/2022

NOTICE FOR VEHICLE: 2017 3-15LW COLLECTION

Please return the above vehicle which is impounded under your name at Traffic Police Station located at 57 Airport Road, Singapore 436245 within 24 hours from the date of the notice. The Day Office at Traffic Police Vehicle Parking Centre located at 10 Ubi Avenue 3, Singapore 408865.

Day of issue

Current date

Monday

01/04/2022

Tuesday to Friday

02/04/2022 to 04/04/2022

2. You have to make your own arrangements to collect your vehicle at your own cost. If you are collecting, someone else is called the vehicle, your details, please advise that to the person who is collecting the vehicle. Please bring the vehicle to the collection at 10 Ubi Avenue 3. If you are collecting the car by yourself, you may only do so after 12 noon on the day of your release.

3. Take note that the vehicle which is impounded under your name, you have to bring the vehicle to the collection at 10 Ubi Avenue 3.

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
GOH WEI LI
Contact No.: 65476394

NP168

Signature Of Informant:
The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
01/04/2022 16:30

Classification Of Case: