

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 19/04/2022 15:42 (SGT)
Date of Accident 14/04/2022 20:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information TOWARDS CHOA CHU KANG DRIVE (BEHIND NORTHVALE CONDO)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLA2910M

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner AMY SPA & FOOT REFLEX
Company Reg No 5XXXX234W
Email Address kwangseng2387@gmail.com
Mobile Phone No (Phone) +65-98592387
Alternative Phone No +65-98592387

VEHICLE PARTICULARS

Manufacturer Toyota
Model WISH 1.8 CVT
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1798

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00079522100
Cover Note Number 18/04/21 - 25/08/22

DRIVER

Name of Driver BEK KWANG SENG

NRIC No	SXXXX590H
Date Of Birth	29/11/1963
Occupation	Indoor
Date Of Driving Pass	31/10/1984
Driving experience	37 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98592387
Alt. Phone Number	-
Email Address	kwangseng2387@gmail.com
Address	BLK 106A CANBERRA STREET #12-409
Address complement	-
Postcode	751106
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	SOLE PROPRIETOR
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	Collided into Motorcyclist
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	BEAUTICIAN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER ATTACHED (CONSENT BY SO CHOW CHINA TAIPING TO ACCEPT REPORT WITHOUT VEHICLE & 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	BICYCLE
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Mobile equipment
Name of Driver	-
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	CYCLIST
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	REFER STATEMENT
Injured person in which vehicle?	BICYCLE
Were seat belts worn?	-
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.

1. VEHICLE NO.: SLA2910M
2. INSURER CO.: China Taiping
3. ACCIDENT
DATE & TIME: 19/4/22 3:30pm

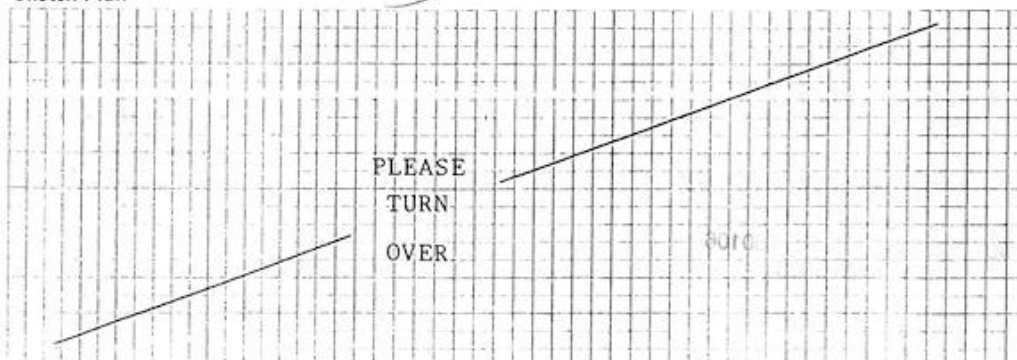
AMY SPA & FOOT REFLEX
BLK 106 YISHUN RING ROAD
#01-163 SINGAPORE 760106
TEL: 6265 8006

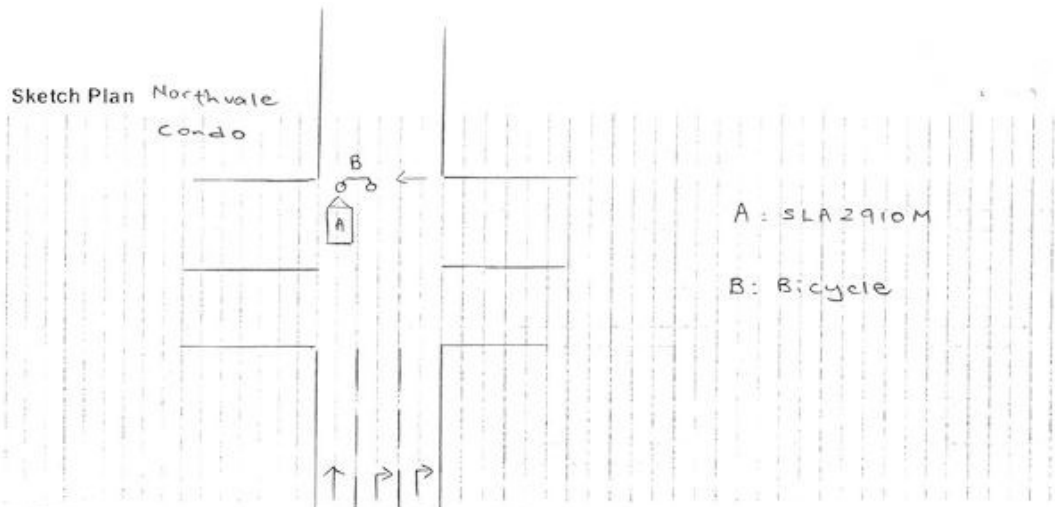
Policyholder's Signature / Date & Time

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

(YS) og 19/4/22
Witnessed by Reporting Centre Personnel

Sketch Plan





DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DoA: 14/4/22 8:30pm
(Towards Choa Cha Kang Drive)
(Behind Northvale Condo)

Traffic light was green in my direction so I proceed to cross.

A bicycle dashed out from my right & hit my right headlamp then slide towards my front windscreen. Cyclist was conveyed to hospital by ambulance. Police send me to Traffic Police to record statement. * I will submit Police Report to my insurance *

So chaw accept report without vehicle & police report.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

AMPSAN FOOT REFLEX

BLK 105 PISHAN ROAD
#01-163 SINGAPORE 760106
TEL: 6265 8006

Policyholder's Signature
Date & Time:

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

(75) 09 19/4/22
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

() Claim Own Policy () Claim Third Party (/) Reporting Only
() Claim OD/TP at other workshop ()

BOND AND BAIL BOND

NO. PB/TP/22/00571

(Section 99 of the Criminal Procedure Code 2010)
(TO BE EXECUTED WHEN PERSONS ARE TO BE PRODUCED IN COURT/ INVESTIGATIONS ARE NOT COMPLETED)Report Number: T/20220414/2114 S/Diry: 33361 Station Number: 631 Time: 01:29
Name of Investigation Officer: Yeo Kia Hui Department / Agency: TP / IB / DDIT Contact No: 65476162I (name and NRIC No.) BEK KWANG SENG S1596590H
Must be completed in all cases (of address) 106A CANBERRA STREET #12-409 SINGAPORE 751106 Tel No: 98592187
(having been charged with (state offence/s charged) Sec 67(1)(b) Road Traffic Act 1961and on my release on bail, do hereby bind myself.
* To attend Court No. on (date) at (time) and thereafter to attend as may be directed by the Court until all proceedings relating to the abovementioned charge/s shall have been finally disposed of;

* To attend at Others Police Station, CID or Traffic Police (age on (date) 28/04/2022 at (time) 10:00 and shall continue so to attend until otherwise directed by investigating officer;

* To attend at Police Station, CID on (date) at (time) for the purposes of fingerprinting, photographing and taking of body samples of myself and any other related matters or to be conveyed to the Criminal Rec Office, CID for the purposes of fingerprinting and photographing and taking of body samples of myself and any other related matters and then attend at C No. on (date) at (time) and thereafter to attend as may be directed by the Court until proceedings related to the abovementioned charge/s shall have been finally disposed of;

* To surrender any travel document in my possession; *(delete if not applicable)

* To surrender to custody or to make myself available for investigations or to attend court at the date, time and place appointed for me to do so;

* Not to commit any offence while released on bail or on personal bond; and

* Not to interfere with any witness or otherwise obstruct the course of justice whether in relation to myself or any other person.

* The surety offered by me must not be a co-accused in my current arrest case

Note to released person:

Breach of bail conditions - Section 103(5) of the Criminal Procedure Code 2010 states that a released person shall be guilty of an offence and shall be liable on conviction to a fine or to imprisonment for a term not exceeding 3 years or to both, if the released person knowingly, and without reasonable excuse, fails to comply with any duty imposed on the released person.

a. To surrender to custody;

b. To be available for investigations; or

c. To attend court on the day and at the time and place appointed for the released person to do so

As long as the bond remains in force, I will not leave Singapore without the permission* of the police officer or the court. *Such permission must be evidenced by an endorsement on the bond specifying for how long and the place to which the permission applies. Such permission may be granted only if a personal application made in the presence of the surety or sureties.

And in case of my making default herein I bind myself to forfeit to the Government of the Republic of Singapore the sum

To be completed only when released on a personal bond or when security is deposited (of (* which I have deposited at (* which has been deposited on my behalf by (name of person depositing security) (at (and which the said (name of person depositing the security) (has acknowledged shall be forfeited in case of my making default herein.

*Delete the part that is not applicable

+ Delete if person is released on a personal bond

Signature/ Right Thumb Impression

To be Completed by person who deposits security (I (name and NRIC No.) (of (address) (Tel No: (hereby acknowledge that (describe security deposited) (deposited by me at (on behalf of the abovenamed (name of released person) (shall be forfeited to the Government of the Republic of Singapore in the case of (Name of released person) making default herein.

Signature/ Right Thumb Impression

Must be completed by interpreter when person does not understand English (I (name and NRIC / PP No of person acting as interpreter) (of (address) (read and explained the abovementioned term to the said (name of released person) (in the (language/ dialect and I confirm he understood the terms.

Signature of Interpreter for released person

Must be completed by interpreter when person depositing security does not understand English (I (name and NRIC / PP No of person acting as interpreter) (of (address) (read and explained the abovementioned term to the said (name of person depositing security) (in the (language/ dialect and I confirm he understood the terms.

Signature of Interpreter for Surety

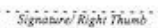
3rd Copy – To be given to First Surety

I/We (name and NRIC No. of first Surety) Argent Charlene Julie T0015707J
 of (address) 107 Yishun Ring Road #03-219 SINGAPORE 760107 Tel No: 90935944
 and (name and NRIC No. of second Surety) Tel No:
 of (address)
 declare myself/ourselves surety/sureties of the abovenamed (name of released person) BEK KWANG SENG
 that he shall abide by the conditions he has bound himself until all proceedings, relating to the said charge/s shall have been finally
 disposed of and in case of his making default therein I/We hereby bind myself/ourselves jointly and severally to forfeit to the Government of the Republic of Singapore
 (describe security) S\$15,000/- W.O.S. (Singapore Dollar Fifteen Thousand With One Surety)

Date this 15 day of April 2022

Acknowledged before me,


 Signature/ Right Thumb
 Impression of first Surety


 Signature/ Right Thumb
 Impression of second Surety

SSS Poh Seng Pew
 Name, Rank, Designation & Signature of
 Police Officer releasing the person on bail

Note to Sureties

a) Duties of surety – The duties of surety as prescribed under Section 104 (1) of the Criminal Procedure Code 2010 apply to this bond.

They read: A surety must

1. ensure that the released person surrenders to custody, or makes himself available for investigations or attends court at the date, time and place appointed for him to do so;
2. keep in daily communication with the released person and lodge a police report within 24 hours of losing contact with him; and
3. ensure that the released person is within Singapore unless the released person has been permitted by the court to leave Singapore

b) Prohibition against agreements to indemnify surety – Section 106A of Criminal Procedure Code 2010 states that:


1. Any agreement indemnifying or purporting to indemnify any person against any liability which that person may incur as a surety to a bail bond is void.
2. Any person who knowingly enters into such an agreement in (1) shall be guilty of an offence and shall be liable on conviction to a fine or imprisonment for a term not exceeding 3 years or to both.

Must be (I (name and NRIC / PP No of person acting as interpreter)
 completed (of (address) read over and explained the terms of this
 by interpreter (bond to the first surety on (date) in the language/ dialect and I confirm he understood the terms.
 when first (.....
 surety (.....
 does not (.....
 understand (.....
 English (.....
 Signature of interpreter of first surety

Must be (I (name and NRIC / PP No of person acting as interpreter)
 completed (of (address) read over and explained the terms of this
 by interpreter (bond to the second surety on (date) in the language/ dialect and I confirm he understood the terms.
 when second (.....
 surety (.....
 does not (.....
 understand (.....
 English (.....
 Signature of interpreter of second Surety

ACKNOWLEDGEMENT OF RECEIPT

I acknowledge receipt of a copy of this document.


 Signature/ Right Thumb Impression of released person


 Signature/ Right Thumb Impression of first Surety


 Signature/ Right Thumb Impression of second Surety


 Signature of Witness

ENDORSEMENT

(To be used when permission is granted to person released to leave the Republic under Sections 99 (4) and (5) of the Criminal Procedure Code 2010

The abovenamed (name of released person)
 is hereby given permission to go to (name/s places)
 from (specify date/ time) to I confirm that this application
 was made personally and in the presence of the abovenamed surety/ sureties.

.....
 Name, Rank, Designation & Signature of Officer
 granting the permission

.....
 Signature/ Right Thumb Impression of person released

.....
 Signature/ Right Thumb Impression of first surety

.....
 Signature/ Right Thumb Impression of second surety

ROAD TRAFFIC ACT
CHAPTER 276

SINGAPORE POLICE FORCE

DRÄGER ALCOTEST 9510 SG

SERIAL NO. ARJN-0002

TEST NO. 2145

CALIBR. NO. 36

LAST CAL. 8326736 1.1

SW-VERS. 14/04/2022

DATE: 22:36:19

START: 22:44:01

END: SELFTEST OK

LOCATION OF ANALYSIS:

TRAFFIC POLICE

10 UBI AVENUE 3

SINGAPORE 408865

NAME: BEK KWANG SENG

DATE OF BIRTH: 29/11/1963

AGE: 58


GENDER: Male

NRIC: S1596590H

ADDRESS: BLK 105A CANBERRA STREET #12-409

POSTAL CODE: 751106

VEHICLE NUMBER: SLA2910M

SIGNATURE SUBJECT: 

SUBJECT MEASUREMENT

FAILED BLOWINGS: 0

ATTEMPT BLOWING 1 1.5 L

BLOWING VOLUME: 9.1 L


BLOWING TIME: 1.5

RESULT: SUBJECT'S SPECIMEN

5 µg/100ml

I CERTIFY THAT IN THIS
STATEMENT, READING
SUBJECT'S SPECIMEN
RELATES TO SPECIMEN
OF BREATH PROVIDED BY
THE SUBJECT NAMED ABOVE
AT THE DATE AND TIME
SHOWN HEREIN

FAMILY NAME OPERATOR: POH SENG PEW

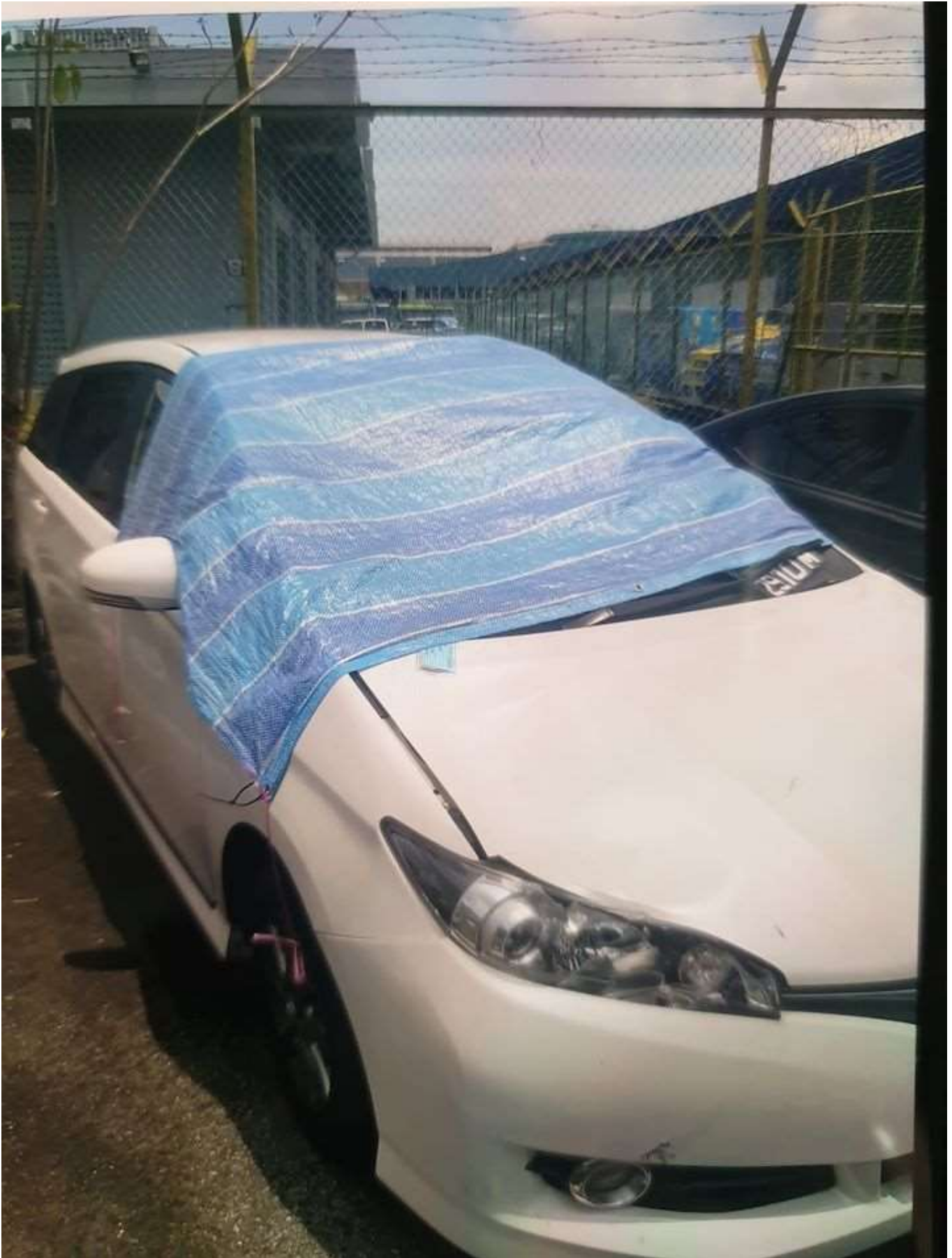
FIRST NAME OPERATOR: 

SIGNATURE OPERATOR:



◎ 実況







IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SC1G224J0004 Vehicle Registration No: SLA 2910M
 Name (as shown in NRIC): Amy Spa & Foot Reflex NRIC/FIN/Passport No: 53352234W
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: Blk 106 Yishun Ring Rd #01-163 Singapore (760106)
 Contact (Tel): 62658006 Mobile No.: 98592387
 Email Address: kwang.seng2387@gmail.com
 Date of Accident: 14/4/22 Time of Accident: 20:30
 Place of Accident: Towards CCK Dr (Behind Northvale Condo)
 Insurance Company: China Taiping

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Convert to own damage claim -

AMY SPA & FOOT REFLEX
 BLK 106 YISHUN RING ROAD
 #01-163 SINGAPORE 760106
 TEL: 6265 8006

Policyholder / Driver's Signature
 Date: 22/4/22

Reporting Centre Personnel's Signature

Name: Steeley
 NRIC/FIN No.: _____
 Date: 22/4/22