SB0F228V0001 / Ban Hock Hin Co Pte Ltd ENTRY DATE & TIME: 01/09/2022 13:48 (SGT) SUBMITTED BY: Tan Chok Lok VERSION: 1 (01/09/2022 13:48 (SGT))

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 Actual Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.

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 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 01/09/2022 13:48 (SGT) Reported by Date of Accident 23/08/2022 09:02 (SGT) Exact Location of Accident Singapore Additional Location Information ALONG T-JUNCTION OF CHATWORTH ROAD & NATHAN ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

150

Vehicle Registration Number FBJ2992Y

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN JOCK SENG NRIC No S1845556J Email Address jstan298@live.com Mobile Phone No (Phone) +65-96663773 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model **ADV150** Variant Exact purpose for which vehicle was being used at time of Private use

accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Vehicle Category Motorcycle Transmission Manual

CC

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited. Policy Number / Cover Note Number P20776768R00

DRIVER

Name of Driver TAN JOCK SENG NRIC No S1845556J Date Of Birth 07/10/1956 Occupation Outdoor

Date Of Driving Pass 26/08/1986 Driving experience 36 YEARS Gender Male Mobile Number (Phone) +65-96663773 Alt. Phone Number Email Address jstan298@live.com Address **BLK 10 VERDUN ROAD** Address complement #02-10A Postcode 207277 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 - Major/Minor Rd Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Rochor Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002949999 Alt. Police Station Phone No (Fax) +65-63918583 Police Station Address 11 Kampong Kapor Road Singapore 208678 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO THE ACCIDENT STATEMENT IN THE SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SHF610M

Vehicle Manufacturer
Vehicle Model
Vehicle Variant

Vehicle Colour Vehicle Category Taxi Name of Driver WONG CHONG POH @NG HOCK CHUA NRIC No S1155729E Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver) 2 PASSENGER 1 Name SEAN (EEE KLAN MOON) Gender Male

INJURED PERSONS DETAILS

INJURED 1

Name of injured person TAN JOCK SENG Gender Male Phone No (Phone) +65-96663773 Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? FBJ2992Y Were seat belts worn? Was this injured conveyed to hospital by ambulance? Yes

WITNESS DETAILS

WITNESS 1

 Name
 SEAN (EEE KLAN MOON)

 Phone
 (Phone) +65-96306282

 Email

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 Actual Driver.
- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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.
- 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.

Policyholder's Signature / Date & Time
30 (P/7012
Sketch Plan

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

Norme as in NRIC/ID card)

Thu Chark Lew

Mitnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Thu Chark Lew

Mitnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

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(Name as in NRIC/ID card)

Mitnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Mitnessed by Reporting Centre Personne

Describe Circumstance of the Accident the 25.8.2022 hit into the taxi of the junction (ws) FBJ 299 Chattwarth

Declaration

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

@1217 Hn

Driver's Signature (if driver is not the policyholder) / Date 8 Time

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) (Lu Char Les)













































1 of

Report No. T/20220826/2038

Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678

Tel No: 1800-2949999

Date/Time Report Made: 26/08/2022 12:35		and the same of th	Vide Report No.:	Station Diary No.: 42	
Name of	nt's Partic		Address: APT BLK 10 VERDUN ROAD	#02-10A SINGAPORE 207277	
TAN JOCK SENG ID Type / ID No.: NRIC NO / S1845556J		56J	Contact No.: Home/Office:	Mobile: 96663773	
National		ZEN	Email:		
Sex: Male	Age: 65	Date of Birth: 07/10/1956	Type of Informant: Rider		
Race: Chinese			Language:	Institution / School Name:	
Occupat			Driving Licence Information: Class:	Date of Expiry:	

General Inform	mation of the Accident		CALL PARTINES		
Type of Accident:	Injury Conveyed By Ambular	Drink nce Drive: No	Date/Time Accident: 23/08/202		Type of Location T-Junction
Location: CHATSWOR Weather:		Road Surface	:	Ros	d Speed Limit:
Clear Traffic Flow: Dual Carriage		Fraffic Controlle		Tra: Ligh	ffic Volume: nt
Type of Collis					rone conveyed by bulance:

Vehicle No.	ehicle Involve		Model	Color	Condition	No of Passenge
	Туре	Make	7110			0
FBJ2992Y	Motorcycle	HONDA	ADV 150 ABS CVT	White		0
SHF610M	Car	TOYOTA	PRIUS 5DR HATCHBAC			0

Details of V	ehicle Insurance				
CHORDON SALES FOR THE SALES FOR THE	Insurance Company	Insurance No	19/07/2022	18/07/2023	
FBJ2992Y	AUTO & GENERAL INSURANCE	P20776768R00			
, DULUUL 1	(SINGAPORE) PTE LIMITED	1 20//0/00/10			





T/20220826/2038

Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678 Tel No: 1800-2949999

2 of 3 Report No. T/20220826/2038

CONTINUATION OF REPORT

Details of Person	n Involved					
Any Pedestrian Ir	ivolved: No					
No. of Pedestrian	s Injured: NIL	Hen	of Dodostics	0		
Rider		036	of Pedestrian	Cross	ing: NA	
Name	TAN JOCK SENG		ID No.	-	0404655	
			ID NO.		S1845556J	
Related Vehicle	FBJ2992Y (Motorcycle)		Conta	ct No.	96663773	
Hospital/Clinic	SINGAPORE GENERAL HOS	PORE CENERAL MOSRIEM				
ONE GENERAL HOSP		PITAL	Class of Driving Licence &		Class: 2,3,4 Date of Expiry: NIL	
Date Treatment	23/08/2022			Date		
No. of Days granted Medical Leave 07					3/2022	
		De			Serious	

Brief Details.

On 23/08/2022 at about 0850hrs, I was riding my motorcycle on Chatsworth road towards Tanglin road direction. At the junction of Chatsworth road and Nathan Road, I saw this taxi (SHF610M) stop at the junction and wanting to turn into Chatsworth Road. After I pass by the junction, I felt an impact from the rear and felt to the ground. The taxi had knocked my down and his passenger and carried to the side of the road. The taxi driver claimed that I was the one who had knock him down.

I was later convoyed to SGH by AB125, traffic police were also at scene that day. I was given 7 days of MC from 23/08/2022 to 29/08/2022 for injury on knee cap, shoulder, back, neck and head

I wish to state that the passenger of taxi, Sean is willing to be my witness. He can be contacted at HP:96306282





T-20220926/2038

Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678 Tel No: 1800-2949999

3 of 3 Report No. T/20220826/2038

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:

SGT 2 WANG CHAOFAN

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / GIT /

STAFF SGT NUR ADELINA BINTE MOHAMMAD FUAT

-7Contact No.: 65476066

NP168

Signature Of Informant:

Date/Time:

Classification Of Case:

26/08/2022 12:35

CamScanner