

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 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	31/10/2022 19:35 (SGT)
Reported by	Both
Date of Accident	29/10/2022 16:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 226 PENDING ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBS6791L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WEE YIFAN
NRIC No	S9707775D
Email Address	YIFANWEE@GMAIL.COM
Mobile Phone No	(Phone) +65-96535640
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	NMAX155
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 - Claiming third party
Vehicle Category	Motorcycle
Transmission	Auto
CC	160

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5122758977-01

DRIVER

Name of Driver	WEE YIFAN
NRIC No	S9707775D
Date Of Birth	05/03/1997
Occupation	Indoor

Date Of Driving Pass	20/03/2018
Driving experience	4 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96535640
Alt. Phone Number	-
Email Address	YIFANWEE@GMAIL.COM
Address	BLK 226 PENDING ROAD #07-191
Address complement	-
Postcode	670226
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?	No
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
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	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?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

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	SJQ9813D
Vehicle Manufacturer	Honda
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	TAN CHOON HONG
NRIC No	S8703737A
Contact Number	(Phone) +65-92265800
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1


Name of injured person	WEE YIFAN
Gender	Male
Phone No	(Phone) +65-96535640
Address	BLK 226 PENDING ROAD #07-191
Address Complement	-
Post Code	670226
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBS6791L
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

Describe Circumstance of the Accident

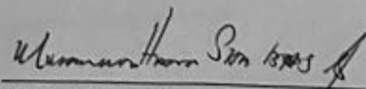
REFR TO REPORT NUM 1/20221029/1037

Declaration

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


31/10/2022
Policyholder's Signature / Date & Time

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


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























**SINGAPORE
POLICE FORCE**



T/20221029/7037

1 of 3

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

Report No. T/20221029/7037

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/10/2022 18:54	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: WEE YI FAN		Address: 226 PENDING ROAD #07-191 SINGAPORE 670226	
ID Type / ID No.: NRIC NO / S9707775D		Contact No.: Home/Office: Mobile: 96535640	
Nationality: SINGAPORE CITIZEN		Email: yifanwee@gmail.com	
Sex: Male	Age: 25	Date of Birth: 05/03/1997	Type of Informant: Rider
Race: Chinese		Language: English	Institution / School Name:
Occupation:		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 29/10/2022 16:15	Type of Location: Car Park
Location: PENDING ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 25 Km/h	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
FBS6791L	Motorcycle	YAMAHA	NMAX 155 ABS CVT	Black		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBS6791L	NTUC Income Insurance Co-Operative Limited	5122758977-01	29/06/2022	28/06/2023



**SINGAPORE
POLICE FORCE**



T/20221029/7037

2 of 3

Report No. T/20221029/7037

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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	WEE YI FAN	ID No.	S9707775D
Related Vehicle	FBS6791L (Motorcycle)	Contact No.	96535640
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	03	Degree of	Serious

Brief Details.

ON 29/10/2022 AT AROUND 415PM, I WAS RIDING MY MOTORCYCLE BEARING VEHICLE REGISTRATION NUMBER FBS6791L INSIDE 226 PENDING ROAD CARPARK WHERE I NOTICE A CAR BEARING VEHICLE REGISTRATION NUMBER SJQ9813D COMING FROM THE OPPOSITE LANE. WHEN I WAS PASSING THE CAR, THE CAR SUDDENLY SWERVE OUT OF HIS LANE INTO MY LANE AND HIT MY MOTORCYCLE ON THE RIGHT SIDE CAUSING ME AND MY MOTORCYCLE TO FALL ONTO THE LEFT SIDE. AT THAT MOMENT I FELT PAIN IN MY RIGHT KNEE. THE DRIVER PROCEEDED TO SHIFT HIS VEHICLE OUT OF THE WAY AS IT WAS BLOCKING THE TRAFFIC THEN HE CAME OUT OF HIS VEHICLE TO CHECK ON ME. WE EXCHANGED DETAILS AND PARTED WAYS. THEN I MADE MY WAY TO PROHEALTH 24-HOUR MEDICAL CLINIC AND WAS GIVEN 3 DAYS MEDICAL LEAVE FOR MY INJURIES. I'M MAKING THIS REPORT TO FILE FOR THIRD PARTY CLAIM



**SINGAPORE
POLICE FORCE**



T/20221029/7037

3 of 3

Report No. T/20221029/7037

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

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
FAHKRUL RAZI BIN SUHAIME
Contact No.: 65470000

NP168

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

Date/Time:
29/10/2022 18:54

Classification Of Case: