

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	25/01/2023 16:12 (SGT)
Reported by	Driver
Date of Accident	20/01/2023 16:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	HOUGANG AVENUE 5 TOWARDS UPPER SERANGOON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJN3045J

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CARQUOTES SG LLP
Company Reg No	
Email Address	
Mobile Phone No	
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Stream
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	Private car
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5132811463

DRIVER

Name of Driver	LEE SEOW PENG
NRIC No	
Date Of Birth	
Occupation	

Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
No
Hirer
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Chain Collision
DRIZZLING
Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?
Translator's name
Translator's ID
Translator's phone number
Translator's email
Original language used in the statement

No
4
Yes
Yes
Yes
2
No
-
-
-
-
-

PASSENGER 1

Name
Gender

TAN KIM HUAT
Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address
Was notice of intended Prosecution given?
If yes, against whom?

Yes
Hougang Neighbourhood Police Centre
(Phone) +65-18004890999
(Fax) +65-63128989
60 Hougang Ave 9 Singapore 538775
No
-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Reasons for not uploading a video of the accident

Yes
Yes
ADVICE OI TO SUBMIT TO MOTORVIDEO@INCOME.COM.SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBJ5639Z
Vehicle Manufacturer	Honda
Vehicle Model	Cb400
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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)	2

PASSENGER 1

Name	UNKNOWN
Gender	Female

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	FBU762A
Vehicle Manufacturer	Yamaha
Vehicle Model	NMAX
Vehicle Variant	-
Vehicle Colour	Green
Vehicle Category	Motorcycle
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)	1

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	GBK2406T
Vehicle Manufacturer	Nissan
Vehicle Model	Nv200
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	TAN BON TENG
NRIC No	S0196642A
Contact Number	(Phone) +65-97837692
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	UNKNOWN
Gender	Male
Phone No	-

Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	UNKNOWN INJURIES
Injured person in which vehicle?	FBJ5639Z
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	UNKNOWN
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	UNKNOWN INJURIES
Injured person in which vehicle?	-
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 3

Name of injured person	UNKNOWN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	UNKNOWN INJURIES
Injured person in which vehicle?	FBU762A
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

WITNESS DETAILS

WITNESS 1

Name	LUQMAN
Phone	(Phone) [REDACTED]
Email	-

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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

23/11/2023

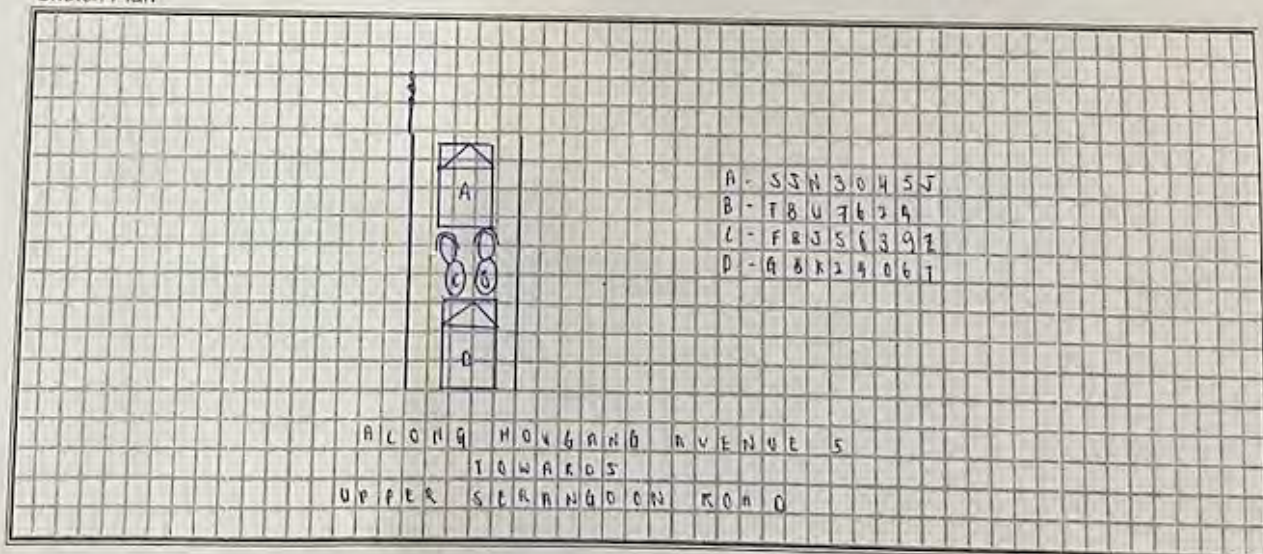
11/10/2023

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

MUHAMMAD HACEFI BIN HAKEEM

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


Sketch Plan

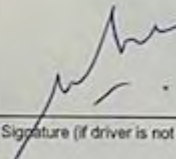


Describe Circumstance of the Accident

REFER TO GEAR

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


25/01/2023
 Policyholder's Signature / Date & Time
 K. H. H. K.


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

THANANTHA GABORAH AND MARZUKI
 Witnessed by Reporting Centre Personnel
 (Name as in NRIC/ID card)

2







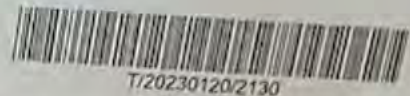






SINGAPORE POLICE FORCE

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999



T/20230120/2130

1 of 1

Report No: T/20230120/2130

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/01/2023 19:51
Vide Report No.: F/20230120/0111
Station Diary No.: 156

Informant's Particulars

Name of Informant: LEE SEOW PENG			Address: [REDACTED]		
ID Type / ID No.: NRIC NO / [REDACTED]			Contact No.: Home/Office: [REDACTED] Mobile: [REDACTED]		
Nationality: SINGAPORE CITIZEN			Email: [REDACTED]		
Sex: Male	Age: [REDACTED]	Date of Birth: [REDACTED]	Type of Informant: Driver		
Race: Chinese			Institution / School Name: [REDACTED]		
Occupation: Chauffeur			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry: [REDACTED]		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/01/2023 16:00	Type of Location: Straight Road
Location: HOUGANG AVENUE 5				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Van hit a motorcycle and hit complainant				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBJ5639Z	Motorcycle	HONDA	CB400	Red	Slightly Damaged	1
FBU762A	Motorcycle	YAMAHA	NMAX 155 ABS CONNECT	Green	Slightly Damaged	0
GBK2406T	Van	NISSAN	NNV200 1.6 (A) PETROL	Silver	Slightly Damaged	0
SJN3045J	Car	HONDA	STREAM SUNROOF 1.8L A	Black	Slightly Damaged	1

**SINGAPORE
POLICE FORCE**

T/20230120/2130

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Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20230120/2130

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJN3045J	NTUC Income Insurance Co-Operative Limited			

Brief Details.

On 20/01/2023 at about 1600hrs, I was involved in an accident along Hougang Ave 5 towards Upper Serangoon Road. I was in my car (SJN3405J) with my boss, stopped at a red traffic light. While waiting I had felt a bang at the back of my car, I went out to see what happened and saw a motorcycle (FBU762A) on the ground and the rider on the road. The rider informed me that a van (GBK2406T) had banged him from behind which caused the rider to hit the back of my car. While talking to the motorcyclist, another motorcycle (FBJ5639A) with a pillion had tried to squeeze into the gap to see what happened and to assist if possible. The van suddenly moved forward and collided into the second motorcycle and I had jumped out of the way to avoid being hit myself.

To my knowledge both motorcyclist had sustained injuries and were conveyed by ambulance. My boss and I are unharmed. The damage sustained to my car is on the left brake lights as well as dents to my rear bumper.

**SINGAPORE
POLICE FORCE**

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Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999



T/20230120/2130

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Report No. T/20230120/2130

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:

F /

SGT 1 Ahmed Ramzy Abdul
Rashid Mordiffi

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
20/01/2023 19:51

Officer In Charge Of Case:
TP / GIT /
STAFF SGT SITI NORHAFIDAH BINTE HANAFI
Contact No.: 65476202

Classification Of Case:

NP168