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SN07231G000H / Income Insurance Limited ENTRY DATE & TIME: 16/01/2023 12:52 (SGT) SUBMITTED BY: Kek Chong Chiang Eugene VERSION: 1 (16/01/2023 12:52 (SGT))

# Your NCD will be affected due to late reporting



# SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
  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.

  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.

ACCIDE	NT STATEMENT	
Date of Submission Reported by Date of Accident Exact Location of Accident	16/01/2023 12:52 (SGT) Driver 24/11/2022 15:30 (SGT) Singapore	
Additional Location Information Country/State of Loss	Along Serangoon North Avenue 5 Singapore	
DETAILS O	OF OWN VEHICLE	
Vehicle Registration Number	FBG7783S	
INSURED/POLICYHOLDER		
Is company? Name Of Registered Owner Company Reg No	Yes KK MOTOR PTE. LTD.	
Email Address Mobile Phone No Alternative Phone No	201835910M jwkuah@yahoo.com (Phone) +65-90699526	
VEHICLE PARTICULARS		
Manufacturer	Honda Pcx125	
Variant  Exact purpose for which vehicle was being used at time of		
accident Are you claiming under your own insurance policy for repair to your vehicle?	Private use  No - Reporting only	
Vehicle Category  Transmission  CC	Motorcycle Auto 125	
INSURANCE COMPANY		
Name of Insurance Company Policy Number / Cover Note Number	Income Insurance Limited 5111003452-03	
DRIVER		

ONG CHIN KUONG S7756213C

14/09/1977 Outdoor

Name of Driver

Date Of Birth

Date Of Driving Pass	05/09/2008
Driving experience	14 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89332011
Alt. Phone Number	
Email Address	jwkuah@yahoo.com
Address	50 SERANGOON NORTH AVENUE 4
Address complement	#05-15
Postcode	S555856
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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)	2
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	7.0
PASSENGER 1	
Name	CANDIDA NG WEN JIE
Gender	Female
DETAILS OF POLICE ACTION	
Mantha and day to the allege	
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 sketch plan	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	File size exceeding limit
Total In the appearing a made of the addition in minimum.	The size exceeding little

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	GBB1685H
Vehicle Manufacturer	<b>3</b>
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	¥
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	. <del>.</del>
Address	7
Address complement	) <del>-</del>
-Postcode	1 <del>-</del>
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	ONG CHIN KUONG
Gender	Male
Phone No	(Phone) +65-89332011
Address	(1.110110) 100 0,0002011
Address Complement	
Post Code	· -
Approximate Age Years Old	-
	-
Injuries Sustained	-
Injured person in which vehicle?	FBG7783S
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes
INJURED 2	
Name of injured person	CANDIDA NG WEN JIE
Gender	Female
Phone No	(Phone) +65-88933249
Address	-
Address Complement	
Post Code	-
Approximate Age Years Old	-
	-
Injuries Sustained	
Injured person in which vehicle?	FBG7783S
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

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Report No. T/20221226/7009

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

DEDODT	OF.	Λ'	TDAFFIC	ACCIDENT

Date/Time 26/12/202	Report Ma 2 13:08	ade:	Vide Report No.:	Station Diary No.:	
Informan	t's Particu	lars			
Name of I ONG CHI	nformant: N KUONG		Address:	8	
ID Type / ID No.: NRIC NO / S7756213C			Contact No.: Home/Office: Mobile: 89332011		
Nationality MALAYSI			Email: KIMONG1415@GMAIL.COM	9	
Sex: Age: Date of Birth: 14/09/1977			Type of Informant: Rider		
Race: Chinese			Language: Institution / School Name: English		
Occupation:		8	Driving Licence Information: Class:	Date of Expiry:	

General Inform	nation of the Accident					
Type of Accident:	Injury Attended by Police	Drink Drive: No	.,	Date/Time of Accident: 24/11/2022 15:30		Type of Location: Straight Road
Location:						
SERANGOOM	N NORTH AVENUE 5	=				
Weather:		Road Surface:				d Speed Limit:
Sunny		Dry		Al .	60 K	m/h
Traffic Flow:		Traffic Control:			Traff	ic Volume:
Two Way		Not Controlled			Light	
Type of Collis	ion: ing Vehicles - Head To Si	de		920		one conveyed by ulance:

Details of V	ehicle Involve	C SECURE CHARLES				
Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBG7783S	Motorcycle					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20221226/7009

#### CONTINUATION OF REPORT

Pillion						
Name	CANDIDA NG WEN JIE					S8801550I
Related Vehicle	FBG7783S (Motorcyc	cle)		Contact No.		88933249
Hospital/Clinic	SENGKANG GENER LTD.			Class: NIL Date of Expiry: NIL		
Date	24/11/2022		02/12	2/2022		
No. of Days granted Medical Leave 77 Deg			Degree of	of Serious		
Rider	an one are broken to a second as a second					
Name	ONG CHIN KUONG			ID No.		S7756213C
Related Vehicle	FBG7783S (Motorcycle)			Contact No.		89332011
Hospital/Clinic	NIL AND THE STATE OF THE STATE			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	To the state of th
No. of Days grant	ted Medical Leave	NIL	Degree of		NIL	

# Brief Details.

On 24/11/2022 at about 1530hrs, I was riding my motorbike FBG7783S with my partner behind me as a pillion travelling from Toa Payoh towards First Center at Serangoon North.

It was a 2 way traffic road and I was travelling on the left lane along Serangoon North Ave 5 and a lorry from the opposite direction suddenly turned right into my lane, I could not stop and react in time as my motorbike was very near the lorry and we collided head to side. It happened so suddenly and I was thrown forward and fell off the bike.

I was then conveyed to TTSH and was in critical condition. Currently, I am still warded in the hospital.





3 of 3

Report No. T/20221226/7009

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

CONTINUATION OF REPORT

Sket	tch	Plan	ĺ
ONG		I Idii	

Informant is not able to provide sketch

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 26/12/2022 13:08
Classification Of Case: