

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 Report	13/10/2018 11:18
Date Of Accident	12/10/2018 18:00
Exact Location Of Accident	BET LRG 6 & LRG 4 TOA PAYOH SLIP ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR2377M
Insured/Policyholder	
Name Of Registered Owner	BENEFIT AUTO
Co Reg No	53121670E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90000000

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL 1.5X CVT
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5082417995-02
Cover Note Number	

Driver

Name of Driver	TAN HEANG KHOON, RONALD (CHEN XIANKUN)
NRIC No	S7914487H
Date Of Birth	18/05/1979
Occupation	OUTDOOR
Date Of Driving Pass	27/06/2002
Driving Experience	16 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92715511
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	61 UBI AVENUE 2 #05-04 AUTOMOBILE MEGAMART
Postcode	408898
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : TEO TECK KEE GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO BELOW STATEMENT/SKETCH PLAN

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	FN9068B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

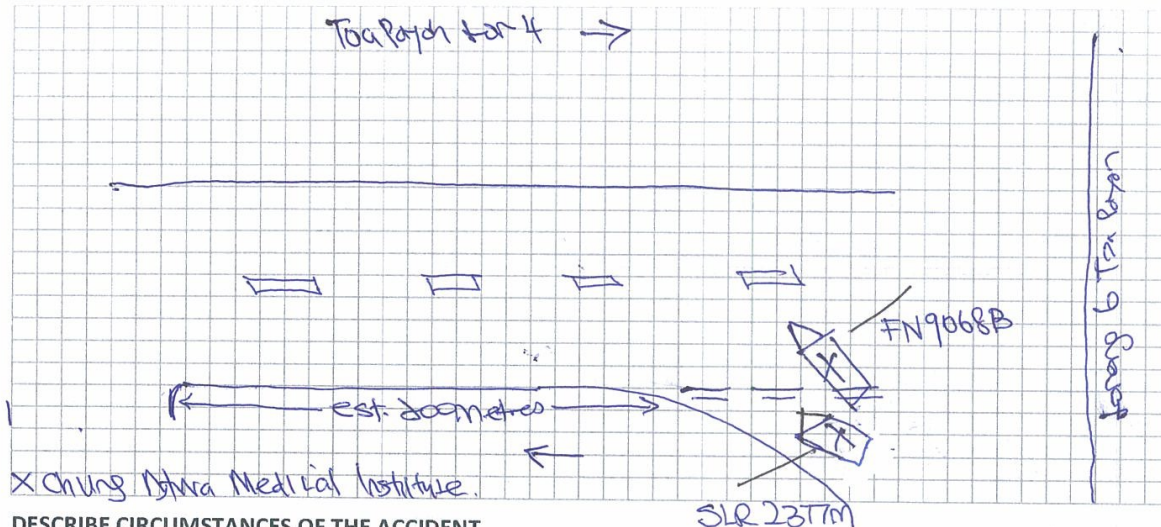


Policyholder's Signature
Date & Time:

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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Reporting Centre
Name: **Singapore 415933**
NRIC/ID No: **67416697** Fax: **67492305**
Email: **vackb@singnet.com.sg**

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- 1) I was travelling along for 4 Toa Payoh, filtering to a slip road leading to Toa Payoh for 4, to my destination, Chung Hua Medical Institute.
- 2) I stopped my vehicle, SLR 237M, to a complete stop. The vehicle is stopped completely behind the stop line, for on-going vehicles to travel by.
- 3) At this point of time, I have checked my front, my right and left side of my vehicle and confirmed that there is no vehicles at all mentioned areas.
- 4) After the traffic has cleared, I proceeded to check on my right side to reconfirm if it safe to move off.
- 5) Suddenly, I saw a motorcycle, FN 9068B, ~~ride~~ ^{hit} rode past my vehicle, hit my vehicle on the front right side.
- 6) The motorcyclist then loses his balance and fell on the left lane. I went to check my vehicle and realised there is ~~it~~ ^{is} scratches marks on the right rear side of my vehicle.
- 7) The timing of the accident is 1800hrs. The weather condition is light rain and the road was wet as it has been raining on and off the whole day.
- 8) After the fall, an ambulance was called. However, it proved that there is no need for the biker to be sent to hospital for further treatment. (13 Oct 2018)
- 9) At 1900hrs, the Traffic Police arrived. With both parties confirming to an insurance settlement, the Traffic Police left after 15mins.
- 10) I wish to emphasise the vehicle, SLR 237M, was in stationary state when the motorcycle, FN 9068B, crashed into the car.

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

13 Oct 2018
@ 1145am

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Reporting Centre Personnel's Signature

Name:

NRIC/ID NO.:

Tel: 67416697 Fax: 67492305

Email: vackb@singnet.com.sg

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/12/2018 17:09	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: TAN HEANG KHOON, RONALD			Address: APT BLK 90A TELOK BLANGAH STREET 31 #08-251 SINGAPORE 101090		
ID Type / ID No.: NRIC NO / S7914487H			Contact No.: Home/Office: Mobile: 92715511		
Nationality: SINGAPORE CITIZEN			Email: h_khoon@hotmail.com		
Sex: Male	Age: 39	Date of Birth: 18/05/1979	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Director			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/10/2018 18:00	Type of Location: Slip Road
Location: LORONG 4 TOA PAYOH				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FN9068B	Motorcycle	HONDA	Honda CB400	Blue	Slightly Damaged	0
SLR2377M	Car					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

CONTINUATION OF REPORT

Rider				
Name	SALIM BIN SALLEH		ID No.	S1789252E
Related Vehicle	FN9068B (Motorcycle)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	TAN HEANG KHOON, RONALD		ID No.	S7914487H
Related Vehicle	SLR2377M (Car)		Contact No.	92715511
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

1. I was travelling along Lorong 6 Toa Payoh to a slip road leading to Toa Payoh Lorong 4, to my destination, Chung Hwa Medical Institution.
2. I stopped my vehicle, SLR2377M to a complete stop. The vehicle is stopped completely behind the stop line, for the on-going vehicles to travel by.
3. At this point of time, I have checked my front, my right and left side of my vehicle and confirmed that there is no vehicles at the mentioned areas.
4. After the traffic has cleared, I proceeded to check on my right side to reconfirm if it was safe for me to move off.
5. Suddenly, I saw the motorcycle, FN9068B rode past my vehicle and hit my vehicle on the front right side.
6. The motorcyclist then loses his balance and fell on the left lane. I went to check my vehicle and realised there are scratches marks on the right rear side of my vehicle.
7. The timing of the accident is 1800hrs. The weather condition is light rain and the road was wet as it was been raining on and off the whole day.
8. After the fall, an ambulance was called. However it was proven that there is no need for the biker to be sent to hospital for further treatment.
9. At 1900hrs, the Traffic Police arrived. With both parties confirming to an insurance settlement, the Traffic Police left after 15 mins.
10. I wish to emphasise the vehicle, SLR, 2377M, was in stationery state when the motorcycle, FN9068B, crashed into the car.
11. I wish to state that there is no photos to clearly show the position of the rider's fallen position as the rider is lying on the middle of the road with on-going traffic. Thus the main priority is to assist the rider to a safe position, for the fear on being run over by on-going vehicle.



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

3 of 4

Report No. T/20181218/7018

CONTINUATION OF REPORT

12. I wish to state the damaged area of the bike, which the rider claimed are

- a) the left corner of the number plate which as bended.
- b) the left light at the rear
- c) the right side of the brake (which is physically not broken nor damaged) , but the rider insisted it had malfunction.

13. I wish to state the rider is keeping right side of the slip road to turn right while I am keeping on the left side of the slip road to turn left into the carpark while the accident occurs.

14. I wish to state the rider mentioned the bike is recently bought and might not have been through regular servicing. The malfunction of the right brake, which might be a result of non-serving of the bike, could be the main culprit in the fall of the rider.

15. I wish to state the rider has been asked repeatedly from 1800hrs to 1915hrs to ascertain his wish to consult a doctor.

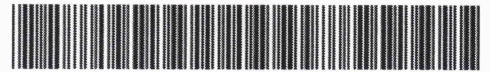
a) the ambulance arrived at 1800hrs and concluded that the rider suffered no injuries nor condition to warrant any medical attention. They rejected to send him to the hospital.

a) the Traffic Police arrived at 1900hrs and re-confirmed the need to go for medical attention. However the rider rejected the need to go for medical attention.

16. I wish to state since the date of accident 12 Oct 2018 at 1900hrs, I did not receive any information about the rider going for any medical treatment which disable me from making the police report at the correct interval.



**SINGAPORE
POLICE FORCE**



T/20181218/7018

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

4 of 4

Report No. T/20181218/7018

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
LIM HONG LEE
Contact No.: 65476438

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

Date/Time:
18/12/2018 17:09

Classification Of Case:

Authentication Stamp

NP168



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 6404
Fax +65 6547 4883
www.police.gov.sg

Our Ref : TP/IP/67965/2018

Date : 28 JANUARY 2018

TAN HEANG KHOON RONALD
BLK 90A TELOK BLANGAH STREET 31
#08-251
SINGAPORE 10190

Dear Sir

**ROAD ACCIDENT INVOLVING SLR2377M AND FN9068B ALONG LORONG 6 TOA PAYOH
TOWARDS LORONG 4 TOA PAYOH ON 12/10/2018**

Please refer to the above traffic accident.

2 Please be informed that our investigation has not produced any substantive results. However, this does not preclude further prosecution should new evidence emerge later

Yours faithfully,

**HEAD INVESTIGATION
TRAFFIC POLICE**

This is a computer-generated letter. No signature is required