# **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.

- 4. The issue and acceptance of this is form by instrained 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 First Submission 05/08/2024 17:01 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 02/08/2024 21:00 (SGT) Exact Location of Accident Edgedale Plains, Singapore Additional Location Information Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Honda

Vehicle Registration Number FBT8296G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner NOR ILLYAS BIN ISMAIL NRIC No S9830834B Fmail Address NORILLYAS.ISMAIL@GMAIL.COM Mobile Phone No (Phone) +65-96284004 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer

Model **CB1000RA** 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 No - Claiming third party your vehicle? Vehicle Category Motorcycle Transmission Manual CC 998 Vehicle Fuel Petrol First Regisration Date 06/06/2022 Chassis no JH2SC80A6KK102943 Effective Date/Time of Ownership 14/11/2023 04:11 (SGT)

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd Policy Number / Cover Note Number DMMPHQ23-001470

DRIVER

Name of Driver NOR ILLYAS BIN ISMAIL NRIC No S9830834B Date Of Birth 24/09/1998 Occupation Indoor Driving Pass Date 16/10/2023 Driving License Pass Class Driving License Validity Valid Driving experience 10 MONTHS Gender Male Mobile Number (Phone) +65-96284004 Alt. Phone Number Email Address NORILLYAS.ISMAIL@GMAIL.COM Address BLK 133 EDGEDALE PLAINS 01-50 SINGAPORE 820133 Address complement Postcode Is the driver the policyholder? 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) 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 PLS REFER TO THE POLICE REPORT & SKETCH PLAN BY DRIVER ATTACHMENT(S) Are accident photos available for attachment? Yes

No

Was there any video captured by Car Camera?

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SKA4650L
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

# INJURED PERSONS DETAILS

# INJURED 1

Name of injured person	NOR ILLYAS BIN ISMAIL
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	MINOR ABRASION
Injured person in which vehicle?	FBT8296G
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	_

#### 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 fruthful and accurate as possible. Any wiful 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

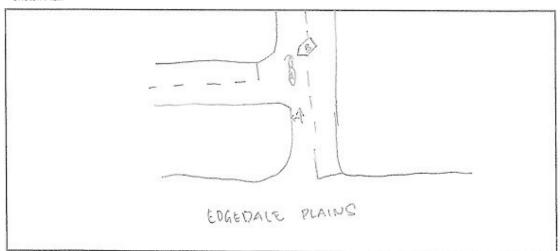
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lay/yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

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

# Sketch Plan



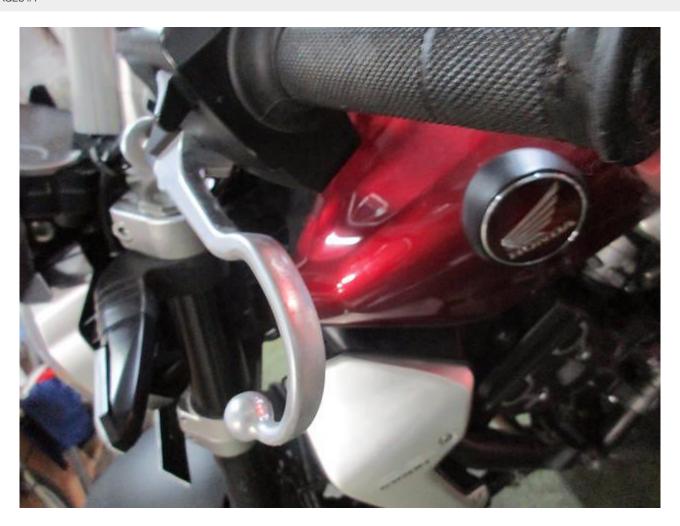
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My Workshop :		
Workshop Email Address :		
Note : Please take note that your insurer	r have a 14 days timeframe for v	you to submit own damage claim under your o
policy. Kindly check with your own	n insurer for more information	Service States of the Grant Grades your Control of the Grant
Declaration		
//We declare the foregoing particulars are true in evo	ery respect.	
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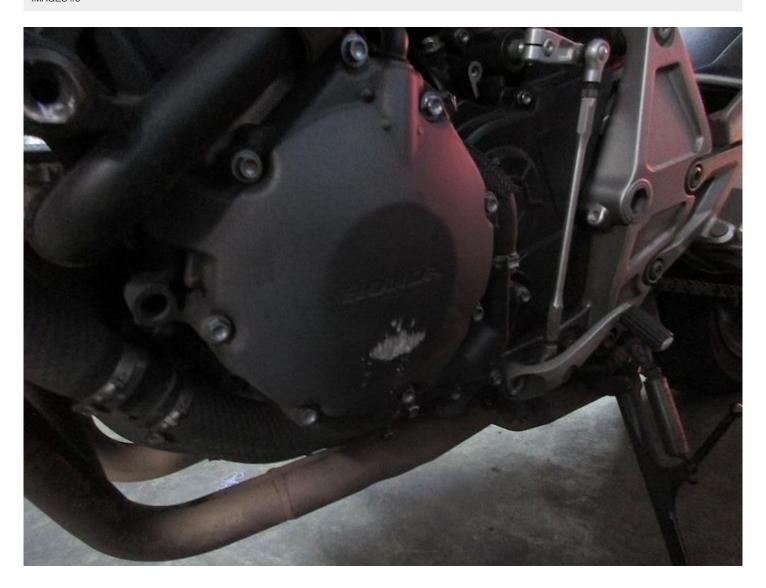
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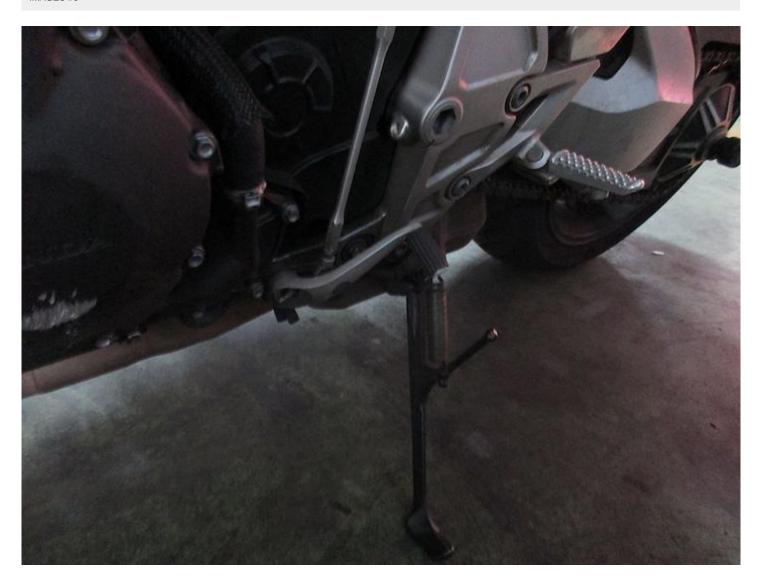






















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240803/7085

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/08/2024 21:24		Vide Report No.:	Station Diary No.:			
Informan	's Particular	S				
Name of Informant: NOR ILLYAS BIN ISMAIL		//AIL	Address: 133 EDGEDALE PLAINS #01-50 SINGAPORE 820133			
ID Type / ID No.: Contact No.: NRIC NO / \$9830834B Contact No.: Home/Office: Mobile: 96284004		Mobile: 96284004				
Nationalit SINGAPO	y: DRE CITIZE	N	Email: NORILLYAS.ISMAIL@GM	1AIL.COM		
Sex: Age: Date of Birth: Male 25 24/09/1998		Type of Informant: Vehicle Owner				
Race: Javanese			Language: English			
Occupation: Exhibition/Conference/Event planner		Driving Licence Information: Class: 2B,2A,2,3A Date of Expiry:				

General Information	of the Accident			
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 02/08/2024 21:00	Type of Location: Car Park
Location: EDGEDALE PLAIN	48			
Weather: Clear		Road Surface: Dry	2310.4 1410 22.735550	***************************************
Traffic Flow: Two Way		Traffic Control: Not Controlled		ffic Volume: Traffic
Type of Collision: Between Moving V	/ehicles - Head On			one conveyed by oulance:

Details of Ve	hicle Involved	199				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBT8296G	Motorcycle		Honda	Red	Slightly Damaged	0
SKA4650L	Motor car	A.E.C.	Toyota Vios	Black	No Damage	0

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBT8296G	EQ Insurance Company Limited	DMMPHQ23-001470	14/11/2023	05/12/2024



T/20240803/7085

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20240803/7085

# CONTINUATION OF REPORT

Any Pedestrian In	volved: No			- 11/2/2	
No. of Pedestrians		Use of Ped	lestrian	Crossin	g: NA
Vehicle Owner	SWA DECEMBER OF		4	137	
Name	NOR ILLYAS BIN ISMAIL		ID No		S9830834B
Related Vehicle	FBT8296G (Motorcycle)		Conta	ct No.	96284004
Hospital/Clinic	NIL		Class Drivin Licens Expiry	g	Class: 2B,2A,2,3A Date of Expiry: NIL
Date Treatment	03/08/2024	Date Disch	harge	NIL	
No. of Days grant	ed Medical Leave (MC) NIL	Degree of	Injury	NIL	

#### Brief Details.

I Nor Illyas was riding a motorcycle (FBT8296G). I was on the way to a nearby street soccer court near 176A. When i entered the carpark next to Greendale Secondary School, next to block 174A, i saw an oncoming car (SKA4650A) was about to make a right turn. I was going straight. When I saw the car making the turn, I sounded my horn and stopped my motorcycle but the car kept going and eventually hit onto my motorcycle and caused me to fall.



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



3 of 3 Report No. T/20240803/7085

CONTINUATION OF REPORT

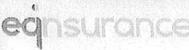
Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 03/08/2024 21:24
Officer In Charge Of Case: TP / AEIT / BOON YEN KIAN Contact No.: 65472079	Classification Of Case:
This report is lodged at Punggol NPC Kiosk 1	

NP168



6. Jun. 2024 8:43 EQ Insurance Company Limited 5 Maxwell Road #17:00 Tower Black NND Compton Shipping 009116 tol 65 (223/01/3 | 5in 05/0221/3993 | www.equidutersco.bom.sg

No. 1957 P. 1/1



## CERTIFICATE OF INSURANCE

FOAD TRANSPORT ACT 1987 (MALAYSIA)

THE NOTOR VEHICLES (THERD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)

THE POTOR VEHICLES (THIRD-PARTY RISKS AND COMPRESATION) ACT (CAP., 189 OF THE NEVISED EDITION)

(REPUBLIC OF SIMMAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPRESATION) RULES, 1996 (DITION/REPUBLIC OF SIMMAPORE)

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

# MOTORCYCLE-PTE USE Comprehensive

Certificate No.: DMMPHQ23-001470

1. Index Mark and Registration Number of Vehicles FBT8296G

Form; MY1 Excess: Named Driver

SGD1,250.00

2. Name of Policyholder NOR ILLYAS BIN ISMAIL

regine, 1079 00400 N

- 3. Effective Date of the Commencement of Insurance for the purpose of the Act 14/11/2024
- 4. Date of Expany of Insurance 05/12/2024
- Person or Classes of Persons entitled to drive\* Restricted to Names Orivers Only
  - 1) NOR ILLYAS BIN ISMAIL
  - 2) NOR ASIQ BIN KAMAL

Porovided that the person driving is pornitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been permitted and is not discussified by order of a Court of Law or by reason of any eractment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic act has not been cancelled at the time of accident loss or damage.

6. Limitations as to use" LIMITATIONS AS TO USE

Use only for social conestic and pleasure purposes and in cornection with the Policyholder's business or profession

(1) Use for nine or remard
(2) Use for racing pace-making reliability trial or speed-testing
(3) Use for the carriage of goods (other than samples) in connection with any made on business

(4) Use for any purpose in connection with the Motor Trade

\*Limitations rendered inoperative by Section 8 of the Motor vehicles (Third-Party Risks and Compossition) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Molaysia), are not to be included under these headings.

THE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malkysia) on and Amendment, Act or Acts passed in substitution thereof.

/HO/A080358/Ban Hock Hin Co. Ptc

A Member of Citystate

Authorised Signatory EQ Insurance Company Limited