

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 First Submission	03/09/2024 11:15 (SGT)
Reported by	Owner
Date of Accident	06/04/2023 05:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JURONG WEST AVE 1 TOWARDS JURONG EAST AVE 1 NEAR LAMPOST 49
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBQ9864B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	AUTO EXCHANGE MOTTO PTE. LTD.
Company Reg No	202377777H
Email Address	SYAWAL@AUTOEXCHANGE.COM.SG
Mobile Phone No	(Phone) +65-80780738
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	OTHERS
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
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5136427789-01

DRIVER

Name of Driver	MUHAMMAD FAIRUZ BIN ROSLAN
NRIC No	T0309651Z
Date Of Birth	14/04/2003
Occupation	Indoor
Driving Pass Date	02/11/2021
Driving License Pass Class	2B
Driving License Validity	Valid
Driving experience	1 YEAR AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-80780738
Alt. Phone Number	-
Email Address	SYAWAL@AUTOEXCHANGE.COM.SG
Address	BLK 191 BOONLAY DRIVE
Address complement	#09-144
Postcode	640191
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 - U-Turn
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)	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	Jurong Division Headquarters
Police Station Phone No	(Phone) +65-18007910000
Alt. Police Station Phone No	(Fax) +65-68965647
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	Yes
If yes, against whom?	SHD4236U

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT J/20240902/7040. RIDER WAS GOING STRAIGHT AND TAXI PLATE NUMBER SHD4236U MAKE AN ILLEGAL UTURN AND MOTORCYCLE COLLIDED ONTO THE LEFT SIDE OF THE TAXI.

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	SHD4236U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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	MUHAMMAD FAIRUZ BIN ROSLAN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	DEATH.
Injured person in which vehicle?	FBQ9864B
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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6. 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 the Insurers' lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



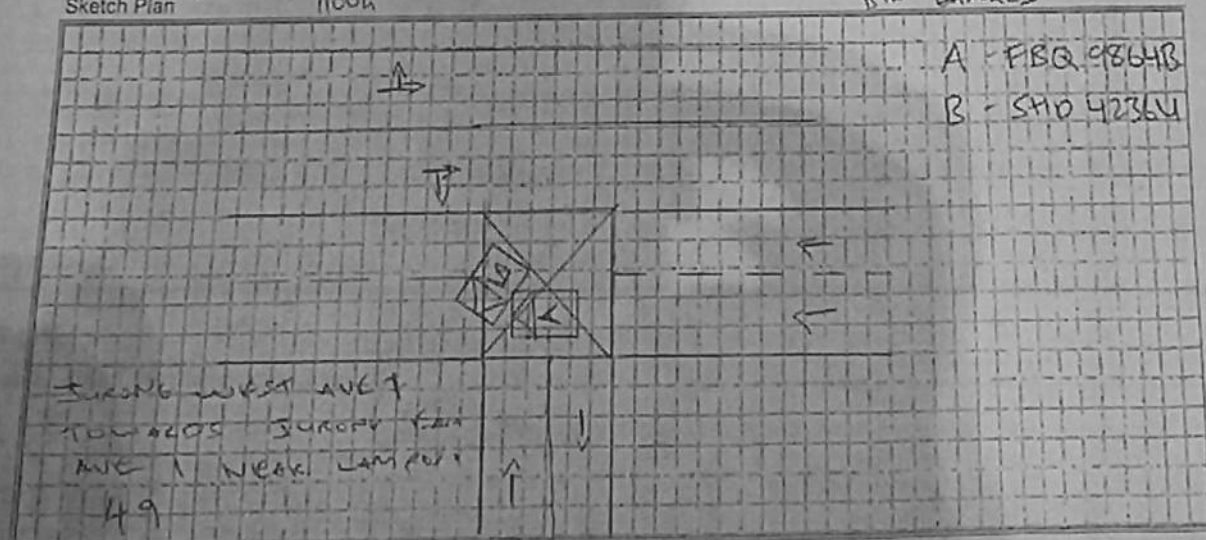
Policyholder's Signature / Date & Time

J Sept 24 1100h
Sketch Plan

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

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

M. H. CHAN *977038*



Describe Circumstance of the Accident

REFER TO GEARS

Declaration

(We declare the foregoing particulars are true in every respect.)



Policyholder's Signature (Date & Time)

3 Sept 21 1100h

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

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

Murugan Kumar
BW 2















**SINGAPORE
POLICE FORCE**



J/20240902/7040

1 of 3

POLICE REPORT (NP299)

Report No. J/20240902/7040

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7910000

Date/Time Report Made 02/09/2024 15:41		Vide Report No.		Station Diary No.	
Name Of Informant Muhammad Hady Bin Abdul Aziz		Address 193 12 #08-07 Pasir Ris SINGAPORE 510193			
ID Type / ID No.		Contact No.			
NRIC NO / S8132108F		Home/Office:		Mobile: 85000420	
Nationality SINGAPORE CITIZEN		Email Address hady@autoexchange.com.sg			
Occupation Administration manager		Sex Male	Age 42	Date of Birth 14/10/1981	Race Maldivian
Institution/School Name		Language English			
Date/Time Of Incident 04/03/2023 10:00 - 06/04/2023 05:15		Location Of Incident JURONG WEST AVENUE 1			
Brief details.					

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

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

Date/Time:
02/09/2024 15:41

Classification Of Case:

**SINGAPORE
POLICE FORCE**

J/20240902/7040

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20240902/7040

Subject: Police Report for Insurance Claim Regarding Fatal Accident

Dear Sir/Madam,

I am Muhammad Hadiy Bin Abdul Aziz, the Operations Manager for Pyro Leasing Pte Ltd (Auto Exchange Moto). I am writing to lodge a police report for the purpose of an insurance claim concerning one of our customers who was unfortunately involved in a fatal accident with our rental motorcycle.

We would appreciate your prompt assistance in this matter to facilitate the necessary insurance procedures.

I have attached the riders

- Death Cert
- Rental Agreement
- Traffic Police Memo

Thank you for your attention and cooperation.

Sincerely,
Muhammad Hadiy Bin Abdul Aziz
Operations Manager
Pyro Leasing Pte Ltd (Auto Exchange Moto)
85000420

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:
02/09/2024 15:41

Classification Of Case:

**SINGAPORE
POLICE FORCE**

J/20240902/7040

3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20240902/7040

Subjects Involved			
Victim			
Person Name	Muhammad Fairuz Bin Roslan		
ID Type	NRIC NO	ID No	T0309651Z
Gender	Male	Age	21
Race	Malay	Language	Malay
Occupation	Motorcycle delivery man	Address	191 Boon Lay Drive #09-144 SINGAPORE 640191
Relation To Informant	customer		

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable



Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:
02/09/2024 15:41

Classification Of Case:

 REPUBLIC OF SINGAPORE CERTIFICATE OF DEATH		CERTIFICATE NO. 3894318		
DECEASED'S PARTICULARS	Name MUHAMMAD FAIRUZ BIN ROSLAN			
	NIC/Identification Document No. T03D96512		Sex MALE	Date of Birth 14/04/2003
	Race MALAY	Nationality/Citizenship SINGAPORE CITIZEN	Time of Death 1508 HOURS	
	Place or Address where Death Occurred NATIONAL UNIVERSITY HOSPITAL			Approximate Interval between Onset and Death
				Years Months Days Hours
CAUSE OF DEATH	Disease or Condition Leading to Death (A) MULTIPLE INJURIES			
	Antecedent Causes (B)			
	(C)			
	Other Significant Conditions			
Name, Official Title and Institution of Certifier DR LEE CHIN THYE, SNR CON FORENSIC PATHOLOGIST FORENSIC MEDICINE DIV, HEALTH SCIENCES AUTHORITY			Date of Issue 08/04/2023	
Note: This certificate is system-generated. No signature is required.			Access Code: 611753  For verification, scan or visit https://go.gov.sg/ica-verify-edc	



**SINGAPORE
POLICE FORCE**

Your Ref : J/20230406/0020
Our Ref : TP/IP/09853/2023
Date : 28 August 2024

PYRO LEASING PTE LTD

(Auto Exchange)

Dear Sir / Madam,

**FATAL ROAD TRAFFIC ACCIDENT ALONG JURONG WEST AVE 1 TOWARDS JURONG
EAST AVE 1 NEAR LAMP POST 49 INVOLVING SHD4236U AND FBQ9864B ON 6 APRIL
2023 AT ABOUT 5.14 A.M.**

I refer to the above accident.

- 2 Please be informed that we have completed our investigation which shows that the driver of **SHD4236U** has committed the offence of **Driving Without Reasonable Consideration for Other Person Using the Road Causing Death under Section 65(1)(b)** punishable under Section 65(2)(a) of the Road Traffic Act 1961. The said driver has been charged and sentenced in the State Court.
- 3 Please be informed that our decision does not preclude you from pursuing insurance / civil claims.
- 4 If you have any clarification, you may contact the Investigation Officer, Pan Jianhong at his office number: 65476435.

Yours faithfully,

PAN JIANHONG
for HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE

A FORCE FOR THE NATION