

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	11/09/2024 16:44 (SGT)
Reported by	Actual Driver
Date of Accident	10/09/2024 16:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SOUTH BRIDEG ROAD JUNCTION OF PICKERING STREET
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FZ68Y

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NUHAMAD SAIDI BIN MUHAMAD ISHAM
NRIC No	SXXXX096E
Email Address	MUHDSAIDI@HOTMAIL.COM.UK
Mobile Phone No	(Phone) +65-84485708
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	NMAX 155
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	155
Vehicle Fuel	Petrol
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Policy Number / Cover Note Number	PNMC2020-00005362-03

DRIVER

Name of Driver	MUHAMAD ISHAM BIN NOORDIN
NRIC No	SXXXX863I
Date Of Birth	27/05/1966
Occupation	Indoor
Driving Pass Date	30/01/1985
Driving License Pass Class	2B
Driving License Validity	Valid
Driving experience	39 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81827039
Alt. Phone Number	-
Email Address	ISHAMNOORDIN66@GMAIL.COM
Address	946 JURONG WEST STREET 91 #02-661
Address complement	-
Postcode	640946
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Parent
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 - Cross Junction
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)	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	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 THE SKETCH PLAN AND POLICE REPORT

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	SLU5044M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
NRIC No	SXXXX341D
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	MUHAMAD ISHAM BIN NOORDIN
Gender	Male
Phone No	(Phone) +65-81827039
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	3 DAYS MC FOR INJURIES TO THE NECK, FOOT AND HEAD AREA
Injured person in which vehicle?	FZ68Y
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

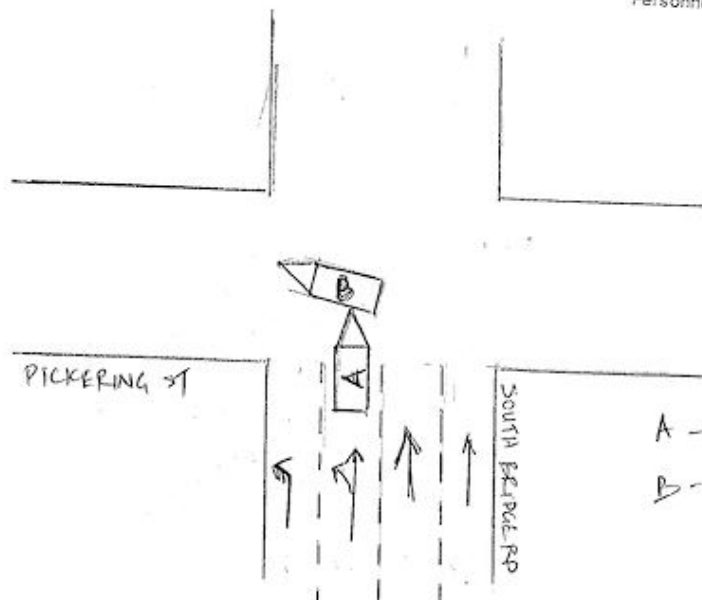
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' law yers/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.
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Sketch Plan

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

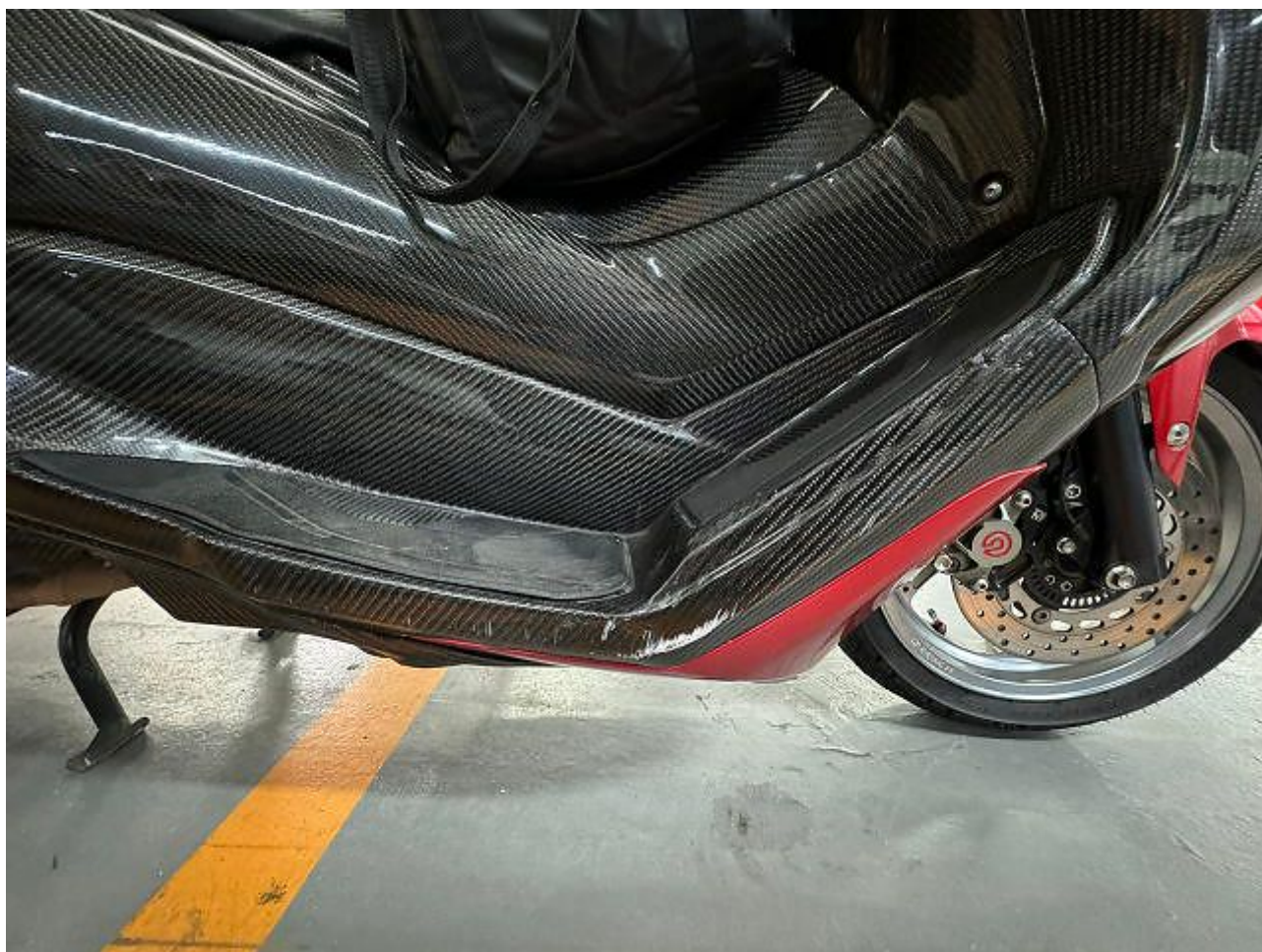
Witnessed by Reporting Centre Personnel



A - FZ68Y

B - SLU 5044M



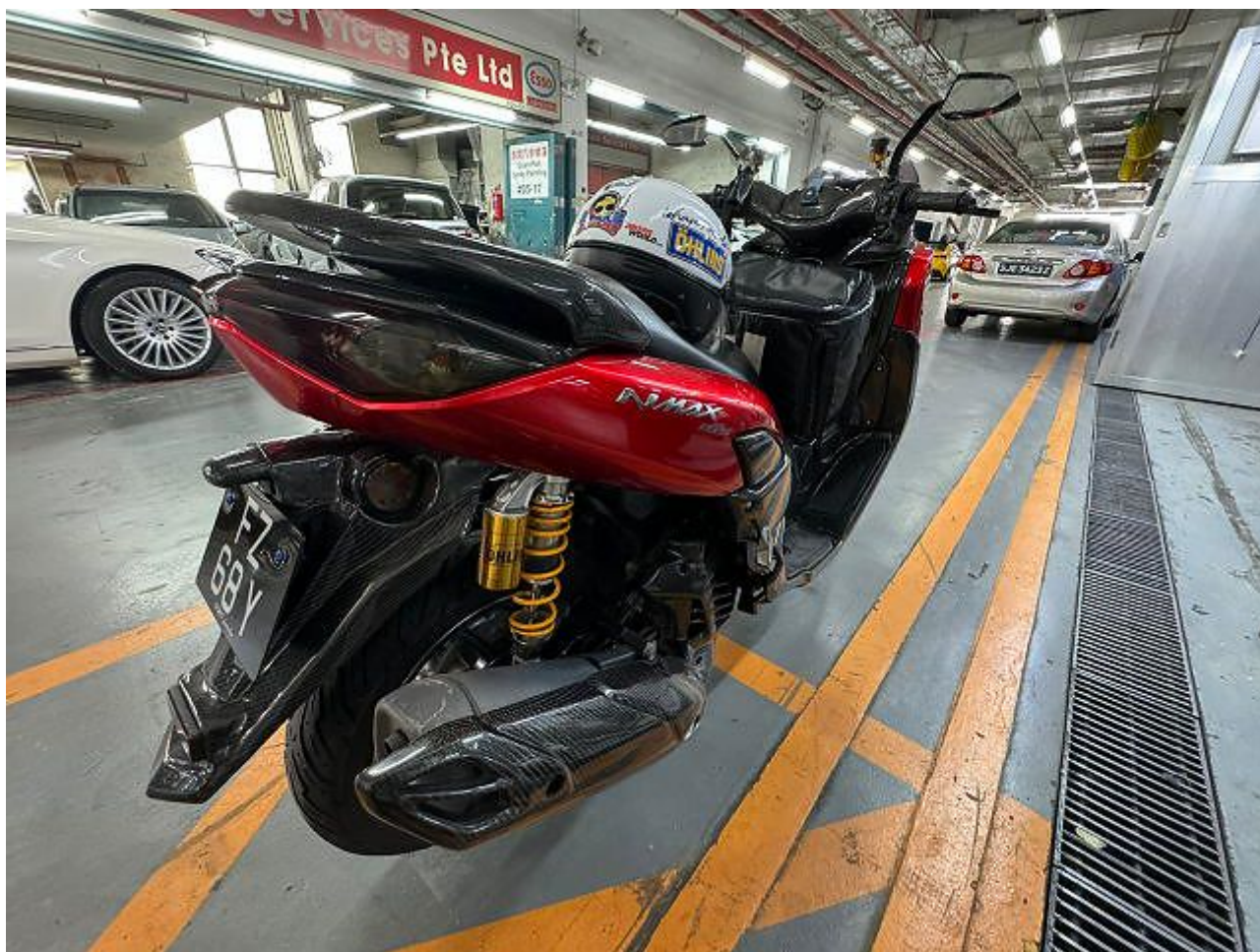








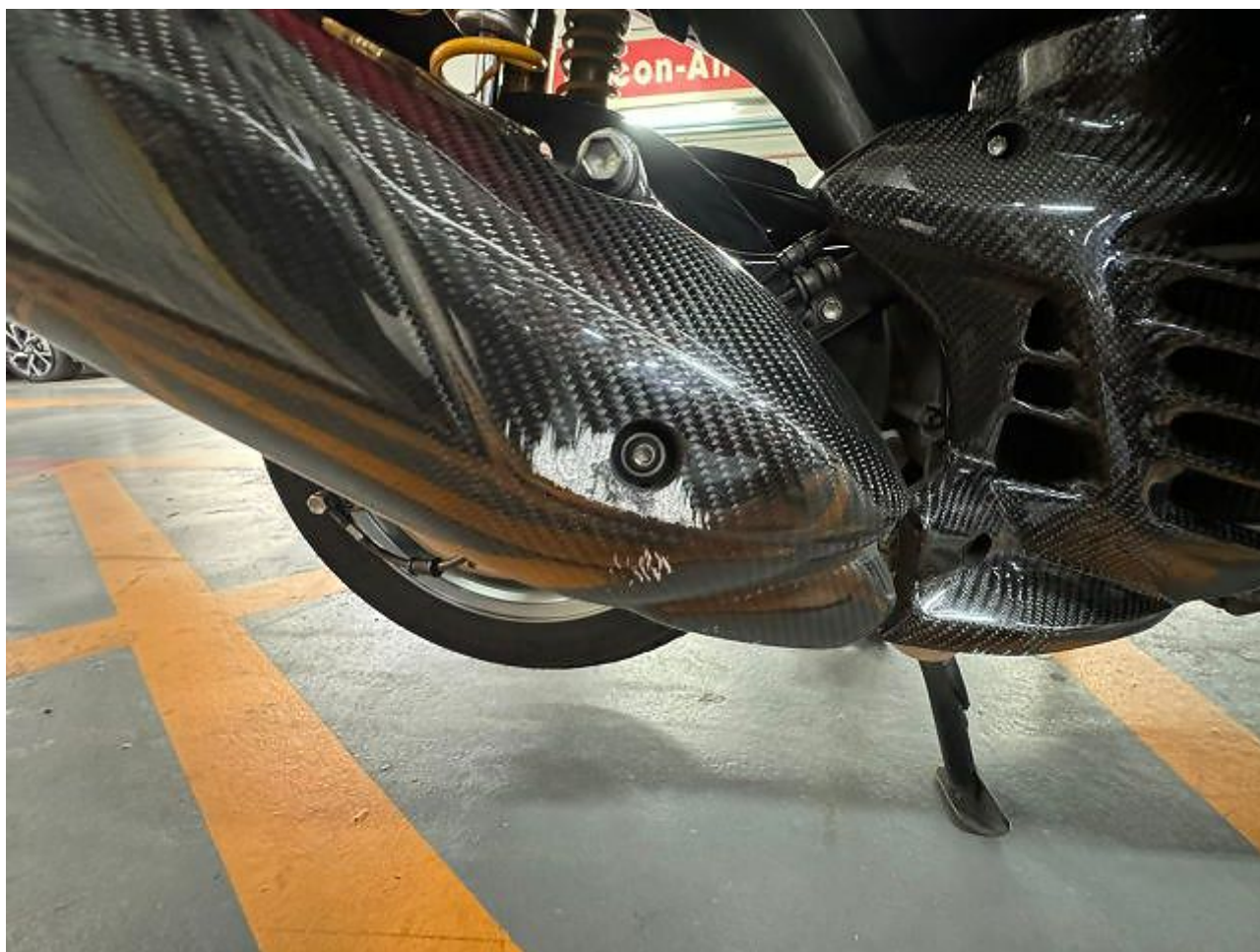


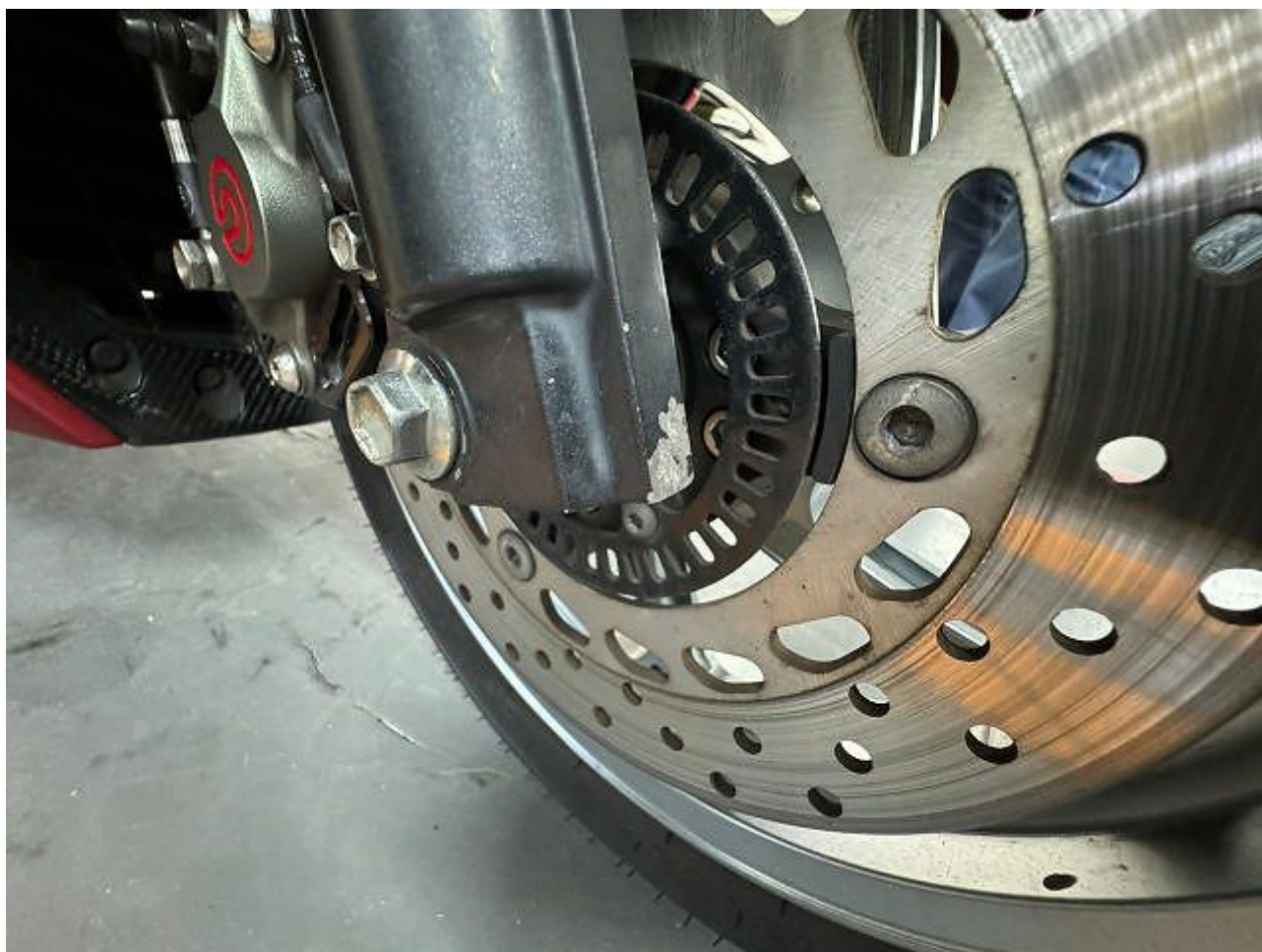














**SINGAPORE
POLICE FORCE**



T/20240911/7044

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

1 of 3

Report No. T/20240911/7044

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/09/2024 12:22		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMAD ISHAM BIN NOORDIN			Address: 946 JURONG WEST STREET 91 #02-661 SINGAPORE 640946		
ID Type / ID No.: NRIC NO / S1745863I			Contact No.: Home/Office: Mobile: 81827039		
Nationality: SINGAPORE CITIZEN			Email: ISHAMNOORDIN66@GMAIL.COM		
Sex: Male	Age: 58	Date of Birth: 27/05/1966	Type of Informant: Rider		
Race: Indonesian			Language: English		
Occupation: Motorcycle delivery man			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 10/09/2024 16:30	Type of Location: T-Junction
Location: SOUTH BRIDGE ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FZ68Y	Motorcycle		n Max	Red	Slightly Damaged	0
SLU5044M	Motor car	HONDA	vesel	Silver	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FZ68Y	FWD SINGAPORE PTE. LTD.	PNMC2020-00005362-03	31/12/2023	31/12/2024



**SINGAPORE
POLICE FORCE**



T/20240911/7044

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

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Report No. T/20240911/7044

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMAD ISHAM BIN NOORDIN	ID No.	S1745863I
Related Vehicle	FZ68Y (Motorcycle)	Contact No.	81827039
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	10/09/2024	Date Discharge	11/09/2024
No. of Days granted Medical Leave (MC)	03	Degree of Injury	Slight
Driver			
Name	Unknown Driver	ID No.	S8232341D
Related Vehicle	SLU5044M (Motor car)	Contact No.	NIL
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 (MC)	NIL	Degree of Injury	Slight

Brief Details.

Referring to my earlier police report no T/20240911/7008, I would like to amend the report.

I was travelling in my motorbike along South Bridge Road towards Tanjong Pagar. I was in the 2nd lane from the left and in this lane, I can move straight or turning left into Pickering Street. While moving straight at the junction, this other vehicle SLU5044M driver made a sudden left from my right side and hit onto me, causing me to fall.

I was not feeling well in my neck, foot and head area, & I went to the A&E in Ng Teng Fong General Hospital and I was given 3 days MC.



**SINGAPORE
POLICE FORCE**

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



T/20240911/7044

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Report No. T/20240911/7044

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
LEE GUANG HUI
Contact No.: 65476414

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

Date/Time:
11/09/2024 12:22

Classification Of Case:

NP168



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fwd.com.sg

Certificate of Insurance

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Motorcycle breaks down or is involved in an accident.
All accidents must be reported within 24 hours or by the next working day of the incident
regardless of whether it will lead to a claim.

Policy number: PNMC2020-00005362-03

Plan name: Third Party Fire & Theft

Motorcycle plate number: FZ68Y

Your name (As the policyholder): Muhamad saidi bin muhamad isham

Coverage start date: 31/12/2023

Coverage end date: 30/12/2024

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to ride: You and Anyone with a valid driving license who You give permission to ride Your Motorcycle

Finance company: Albert Motor Supply Pte Ltd

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Motorcycle Insurance Summary and any Endorsements attached by us. These documents should be read together as one. You must make sure that any person you give permission to ride Your Motorcycle understands your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Motorcycle is being used for personal use in accordance with your contract.

This Policy does not cover use for hire or reward, delivery of goods, and any renting or leasing purposes.

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 04/12/2023

Adrian Vincent
Chief Executive Officer
FWD Singapore Pte Ltd

Please immediately inform us at **+65-6820-8888**
or email us at **contact.sg@fwd.com** if any details in
this Certificate of Insurance needs to be changed.

FWD Singapore Pte. Ltd. 6 Temasek Boulevard, # 18-01 Suntec Tower 4, Singapore 038986 T (65) 6820 8888. Registration No. 200501737H