

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	20/09/2024 15:34 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	15/09/2024 23:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	NEAR GANTRY B/350 CLEMENTI AVENUE 2 CAR PARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBT1435T
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	MOHAMED ALBASA IR MOHAMED SIDDIQ
NRIC No	S7439822G
Email Address	MOHAMEDALBASA5@GMAIL.COM
Mobile Phone No	(Phone) +65-88932952
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	XMAX 300 ABS CVT
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?	No - Reporting only
Vehicle Category	Motorcycle
Transmission	Auto
CC	292
Vehicle Fuel	Petrol
First Registration Date	15/11/2021
Chassis no	MH3SH182111008439
Effective Date/Time of Ownership	16/11/2021 03:11 (SGT)

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5124594962-02

DRIVER

Name of Driver	MOHAMED ALBASA IR MOHAMED SIDDIQ
NRIC No	S7439822G
Date Of Birth	20/12/1974
Occupation	Outdoor
Driving Pass Date	07/08/2003
Driving License Pass Class	2A
Driving License Validity	Valid
Driving experience	21 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-88932952
Alt. Phone Number	-
Email Address	MOHAMEDALBASA5@GMAIL.COM
Address	BLK 746 JURONG WEST STREET 73 08-111 SINGAPORE 640746
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
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	Side Swipe
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	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO 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	SMZ1281H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KENNETH JEE SENG HUAT
NRIC No	S7612723I
Contact Number	(Phone) +65-90118612
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	MOHAMED ALBASA IR MOHAMED SIDDIQ
Gender	Male
Phone No	(Phone) +65-88932952
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBT1435T
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-



SKETCH PLAN




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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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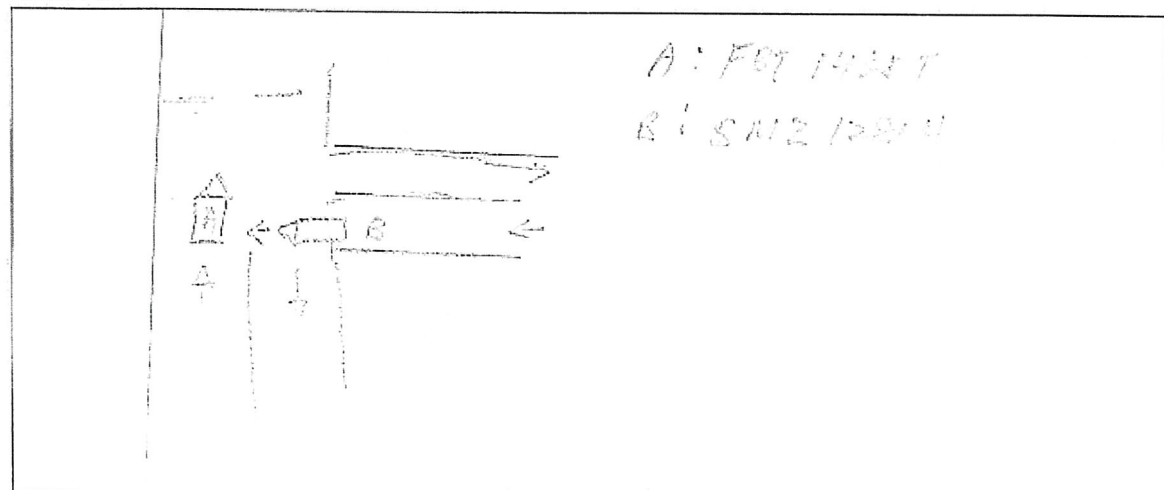
6. Consent under the Personal Data Protection Act (PDPA)

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

 Policyholder's Signature / Date & Time	 1459 HRS 20-09-2024 Driver's Signature (if driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)
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Sketch Plan



Describe Circumstance of the Accident

Refer to Police report -

Note: Please note that your insurer may have 14 days time frame for you to submit an own damage claim under your own policy, please check your policy for more information.

Declaration

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

[Signature]
 Policyholder's Signature - Date & Time

[Signature] 14:59 Hrs
 20-09-2024
 Driver's Signature (If driver is not the policyholder) - Date & Time

[Signature]
 Witnessed by Reporting Centre Personnel
 (Not a valid NRIC/D card)



**SINGAPORE
POLICE FORCE**



T/20240916/2073

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 3

Report No. T/20240916/2073

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/09/2024 18:40		Vide Report No.: D/20240916/0001		Station Diary No.: 155	
Informant's Particulars					
Name of Informant: MOHAMED ALBASA IR MOHAMED SIDDIQ			Address: 746 JURONG WEST STREET 73 #08-111 SINGAPORE 640746		
ID Type / ID No.: NRIC NO / S7439822G			Contact No.: Home/Office: Mobile: 88932952		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 49	Date of Birth: 20/12/1974	Type of Informant: Rider		
Race: Indian			Language:		
Occupation: GRABFOOD DELIVER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 15/09/2024 23:45	Type of Location:
Location: CLEMENTI AVENUE 2				
Weather: Clear		Road Surface: Dry		
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
FBT1435T	Motorcycle				Slightly Damaged	0
SMZ1281H	Motor car					0

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



**SINGAPORE
POLICE FORCE**



T/20240916/2073

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20240916/2073

CONTINUATION OF REPORT

Rider			
Name	MOHAMED ALBASA IR MOHAMED SIDDIQ	ID No.	S7439822G
Related Vehicle	FBT1435T (Motorcycle)	Contact No.	88932952
Hospital/Clinic	PIONEER POLYCLINIC	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	16/09/2024	Date Discharge	16/09/2024
No. of Days granted Medical Leave	03	Degree of	Slight
Driver			
Name	KENNETH JEE SENG HUAT	ID No.	S7612723I
Related Vehicle	SMZ1281H (Motor car)	Contact No.	90118612
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 15/9/2024 at about 11.45pm, I was riding my motorcycle (FBT1435T) and making deliveries at B/354 Clementi Ave 2. I was then riding straight and was headed out of the blocks near the gantry of B/350 Clementi Ave 2 when suddenly, a car (SMZ1281H) hit me from the right side. I did saw the car stopped behind the stop line however I do not know what happened and he suddenly moved. There was no one injured at the point of time. However, I had some abrasions at my right leg due to the accident. On 16/9/2024, I went to the clinic and received 3 days of MC and 7 days of light duty.



**SINGAPORE
POLICE FORCE**



T/20240916/2073

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Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20240916/2073

CONTINUATION OF REPORT

Signature of Officer Recording The
J/
SGT 2 NURAQILAH BINTE
ABDUL HAMID

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
INSP (2) LOW MENG FATT
Contact No.: 97577566

Signature Of Informant:

Date/Time:
16/09/2024 18:40

Classification Of Case:

NP168