SN0724Al000X / Income Insurance Limited ENTRY DATE & TIME: 19/10/2024 08:49 (SGT) SUBMITTED BY: Tan Jie Xiong, Shaun VERSION: 1 (19/10/2024 08:49 (SGT))

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.

 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 19/10/2024 08:49 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 17/10/2024 14:10 (SGT) Exact Location of Accident Singapore Additional Location Information **BRADDELL ROAD** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Yamaha

Vehicle Registration Number FBU2585G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner KHAIRUL NIZAM BIN NOORDIN S9014688B NRIC No. Email Address KHAIRUL.NOORDIN90@GMAIL.COM Mobile Phone No (Phone) +65-92310008 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model **NMAX** 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 Regisration Date Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5130427203-02

DRIVER



Name of Driver KHAIRUL NIZAM BIN NOORDIN NRIC No. S9014688B Date Of Birth 04/05/1990 Occupation Outdoor Driving Pass Date 18/12/2008 Driving License Pass Class 2B Driving License Validity Valid Driving experience 15 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-92310008 Alt. Phone Number Email Address KHAIRUL.NOORDIN90@GMAIL.COM Address BLK 252 #01-482 Address complement **TAMPINES STREET 21** Postcode 520252 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 Side Swipe Weather Conditions Clear Road Surface Wet 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) 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 PASSENGER 1 Name NURULAIN BINTE ISA Gender Female 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 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	SJL1919L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHAN YOONG YUAN
NRIC No	S7070036J
Contact Number	(Phone) +65-92741919
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KHAIRUL NIZAM BIN NOORDIN
Gender	Male
Phone No	(Phone) +65-92310008
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BRUISES ON RIGHT SIDE OF BODY
Injured person in which vehicle?	FBU2585G
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No
INJURED 2	
	NURUI AIN BINTE ISA
Name of injured person Gender	NURULAIN BINTE ISA Female
Name of injured person	
Name of injured person Gender Phone No	Female -
Name of injured person Gender Phone No Address	Female - -
Name of injured person Gender Phone No Address Address Complement	Female - - -
Name of injured person Gender Phone No Address Address Complement Post Code	Female - - -
Name of injured person Gender Phone No Address Address Complement	Female - - -
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old	Female
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained	Female BODILY ABRASION AND BACK INJURY
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle?	Female BODILY ABRASION AND BACK INJURY FBU2585G

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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.

- 6. 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.
- 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.

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
- (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.

ture / Date & Time 19/10/2024 0830HRS Sketch Plan

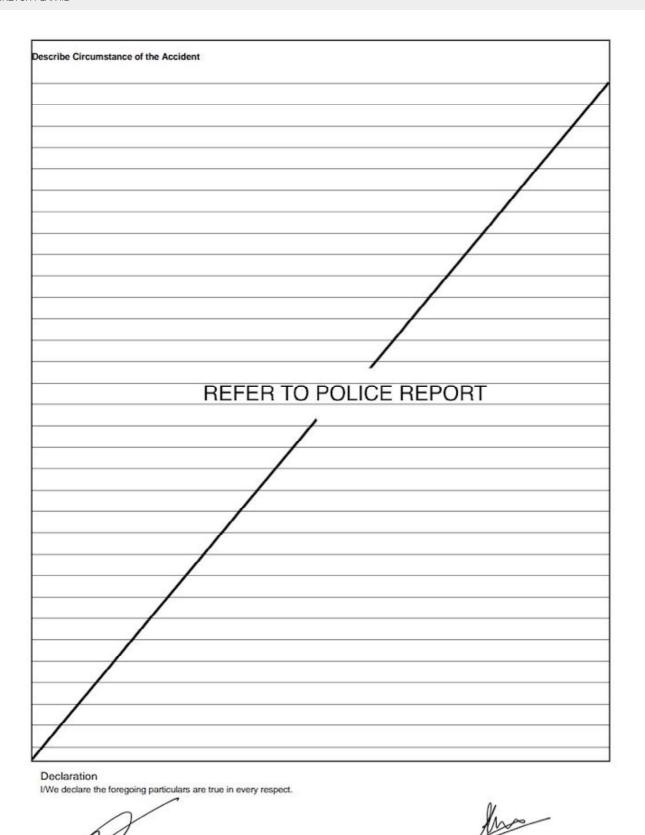
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

(Name as in NRIC/ID card) Tan Jie Xiong, Shaun

S996707

A - FBU2585G B - SJL1919L



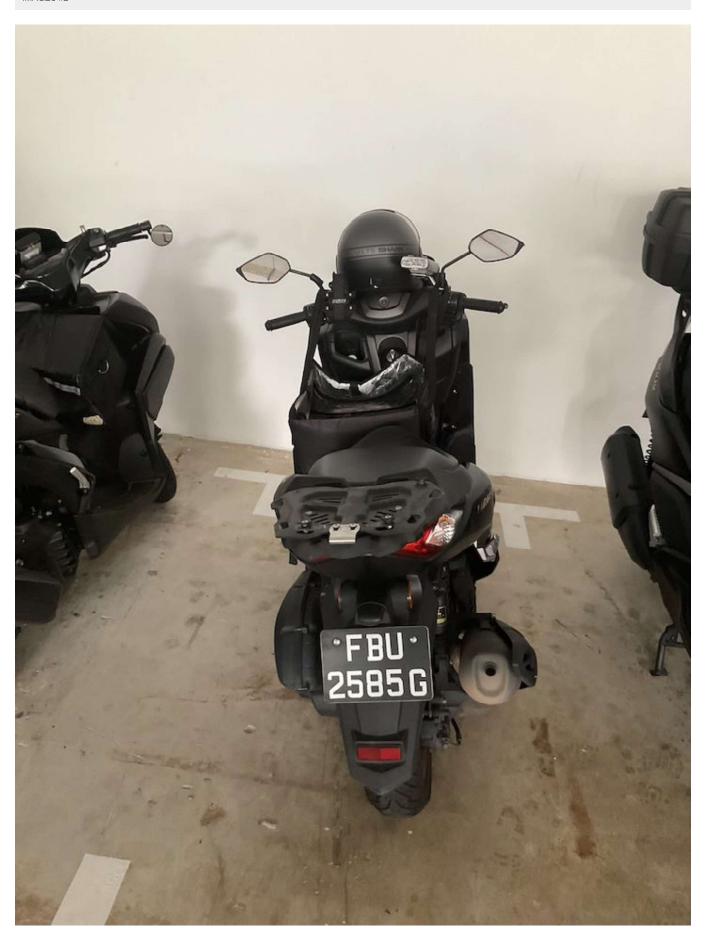
Policyholder's Signature / Date & Time 19/10/2024 0830HRS

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

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

> Tan Jie Xiong, Shaun 2 S996707



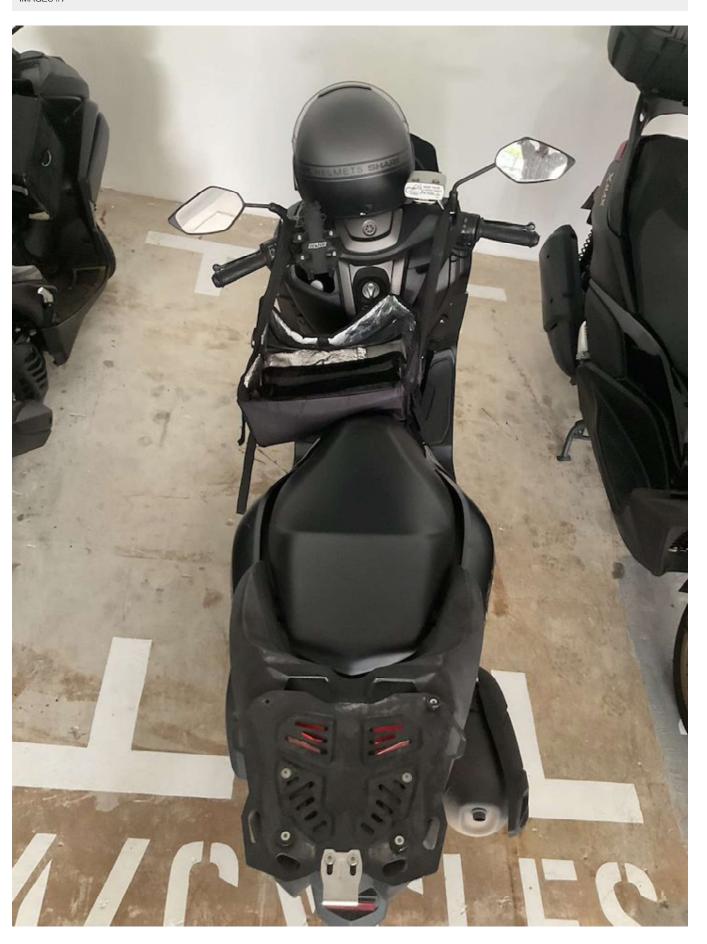


















T/20241018/7019

Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20241018/7019

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
18/10/2024 10:24		

Informan	t's Particular			
Name of	Informant: L NIZAM NO		Address: 3 UBI ROAD #05-210 358D S	SINGAPORE 404358
ID Type	/ ID No.:) / S9014688	BB	Contact No.: Home/Office:	Mobile: 92310008
Nationali SINGAP	ty: ORE CITIZE	N	Email: khairul.noordin90@gmail.com	n
Sex: Age: Date of Birth: Male 34 04/05/1990			Type of Informant: Rider	
Race: Malay			Language: English	
Occupation: Building construction engineer		engineer	Driving Licence Information: Class:	Date of Expiry:

Town of Assident	Injury	Drink	Drive:	Date/Time of Accident:	Type of Location:
Type of Accident:	Attended by Police	No		17/10/2024 14:10	X-Junction
Location:				# 1	
DDADDELL DOAD					
BRADDELL ROAD					
144 41	COLUMN TO SERVICE DE LA COLUMN TO SERVICE DESTRUCCION TO SERVICE DESTRUCCION TO SERVICE DE LA COLUMN T	D 10 1		A STATE OF THE PARTY OF THE PAR	
Weather:		Road Surface);		
		Wet Surface	:		
Cloudy		Wet Traffic Contro	ol:		affic Volume:
Weather: Cloudy Traffic Flow: Dual Carriage Way		Wet	ol:		affic Volume:
Cloudy Traffic Flow:		Wet Traffic Contro	ol:	Li	ght
Cloudy Traffic Flow: Dual Carriage Way Type of Collision:	ehicles - Side Swipe -	Wet Traffic Contro Traffic Light -	ol:	Li A	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBU2585G	Motorcycle	YAMAHA	NMAX 155 ABS CVT	Black		0
SJL1919L	Motor car	BMW	X3	Black		1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBU2585G	NTUC Income Insurance Co-Operative Limited	5130427203-02	20/09/2024	19/09/2025



T/20241018/7019

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

2 of 3 Report No. T/20241018/7019

CONTINUATION OF REPORT

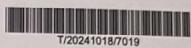
Details of Person					
Any Pedestrian Ir	ivolved: No				
No. of Pedestrian	s Injured: NIL	Use of Ped	estrian	Crossie	or MA
Rider		030 01 1 00	estrian	Crossii	ig: NA
Name	KHAIRUL NIZAM NOORDIN		ID No.		S9014688B
Related Vehicle	FBU2585G (Motorcycle)			ict No.	92310008
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	arge	NIL	
No. of Days grant	ed Medical Leave (MC) NIL	Degree of I		NIL	
Pillion			, ,	100	
Name	NURULAIN BINTE ISA		ID No.		S8847780D
Related Vehicle	FBU2585G (Motorcycle)		Contact No.		93299242
Hospital/Clinic	TAN TOCK SENG HOSPITAL		Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	17/10/2024	Date Disch	arne	17/10	0/2024
No. of Days grante	d Medical Leave (MC) 02	Degree of I	niurv	Slight	Charles and Charle
Driver			injuity .	Oligin	
Name	CHAN YOONG YUAN		ID No.		S7070036J
Related Vehicle	SJL1919L (Motor car)		Contact No.		92741919
Hospital/Clinic	NIL ,		Class Driving Licens Expiry	g 20 &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disch	arge	NIL	
o of Dave grante	d Medical Leave (MC) NIL	Degree of I		NIL	

Brief Details.

Myself, Khairul Nizam (S9014688B) rider of motorcycle, FBU2585G was travelling with my wife, Nurulain (S8847780D) as the pillion at Braddell Road from Bartley, to turn right onto CTE (Woodlands). The road was abit wet due to rain previously and traffic was light. My vehicle was on the left lane. A grey van in front of me wanted to overtake the right lane without signalling and the car, owned by Chan Yoong Yuan, (S7070036L) car no. SJL1919L, swerve to my lane to avoid the grey van and hit my vehicle. I was not able to control my vehicle and fell down with my wife. We landed just before the traffic light. Mr Chan stop to assist me and wife and pushed my motorcycle to the pavement. Ambulance and traffic police was called requiring assistance. My wife was conveyed to TTSH for medical attention.



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



3 of 3 Report No. T/20241018/7019

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: 18/10/2024 10:24
Officer In Charge Of Case: TP / TPIB / AHMAD SYAFIQ BIN HARRIS Contact No.: 65476201	Classification Of Case:
NP168	