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 29/10/2024 14:58 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 28/10/2024 19:40 (SGT) Exact Location of Accident Sembawang Rd, Singapore Additional Location Information SEMBAWANG RD, NEAR 13 MILES FOOD SHOP Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

16/08/2024 00:00 (SGT)

Vehicle Registration Number FBW7361S

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner MOHAMMAD SHAKE ASHIFF BIN SARIPAN NRIC No SXXXX682Z Email Address Cpl151@hotmail.com Mobile Phone No (Phone) +65-98755536 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Adv 750 Variant ADV750 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 Auto CC 750 Vehicle Fuel Petrol First Regisration Date 15/08/2024 Chassis no JH2RH10A6RK308703

INSURANCE COMPANY

Name of Insurance Company Etiqa Insurance Pte Ltd Policy Number / Cover Note Number MX118797

Effective Date/Time of Ownership

DRIVER

Name of Driver MOHAMMAD SHAKE ASHIFF BIN SARIPAN NRIC No SXXXX6827 Date Of Birth 04/11/1987 Occupation Outdoor Driving Pass Date 05/02/2013 Driving License Pass Class Driving License Validity Valid Driving experience 11 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-98755536 Alt. Phone Number Email Address Cpl151@hotmail.com Address APT BLK 120C CANBERRA CRESCENT Address complement #02-393 Postcode 753120 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? 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 Collided into Parked Vehicle Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? 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 PLEASE SEE ATTACHED POLICE POLICE REPORT 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	SKZ9722Z
Vehicle Manufacturer	Nissan
Vehicle Model	Qashqai
Vehicle Variant	-
Vehicle Colour	White
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)	-

WITNESS DETAILS

ABIDAR

(Phone) +65-88344211

WITNESS 1

Name

Phone

Email

Name SHAHEED Phone (Phone) +65-94798232 Email WITNESS 2 **DANIEL** Phone (Phone) +65-84482519 Email WITNESS 3 Name SUHEN Phone (Phone) +65-97871563 Email WITNESS 4

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- The 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.
- 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 "Porsonal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this socident (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;

(ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

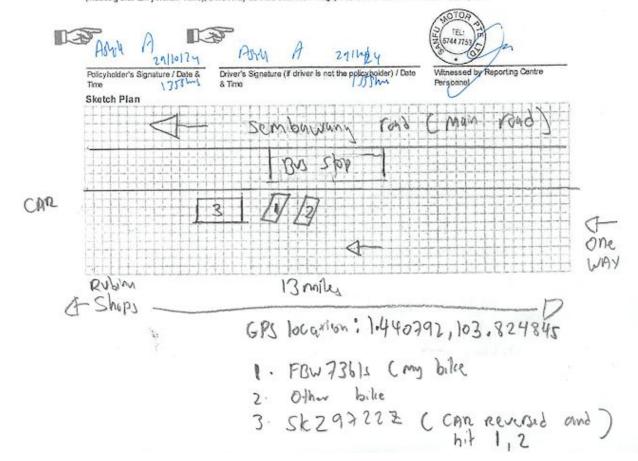
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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 Fersonal Information may/can be disclosed by any of the insurers end/or GM to their third party service providers or agents (including their law yers/law firms), which may be sized outside of Singapore, for one or more of the above Purposes.



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ASWY ASWY IT

Policyholder's Signature / Date & Driver's Signature (# driver is not the policyholder) / Date

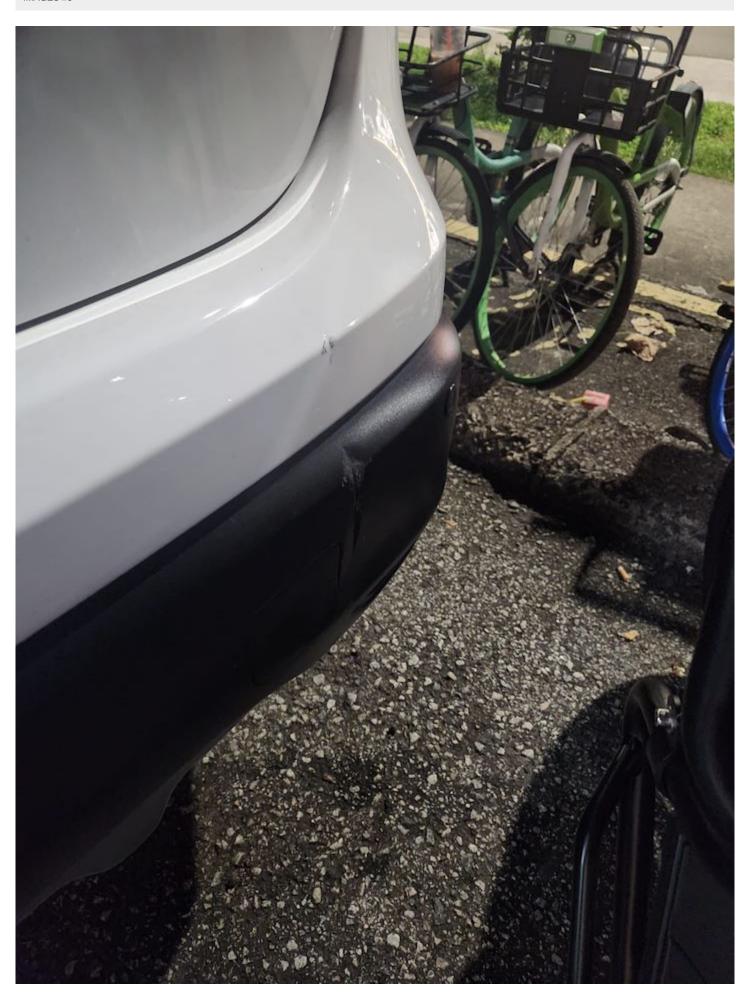
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Witnessed by Reporting Centre Personnel



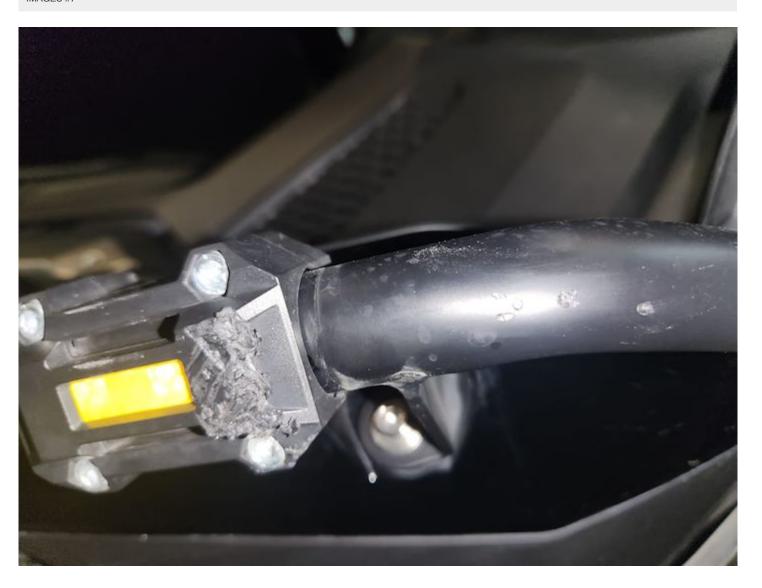






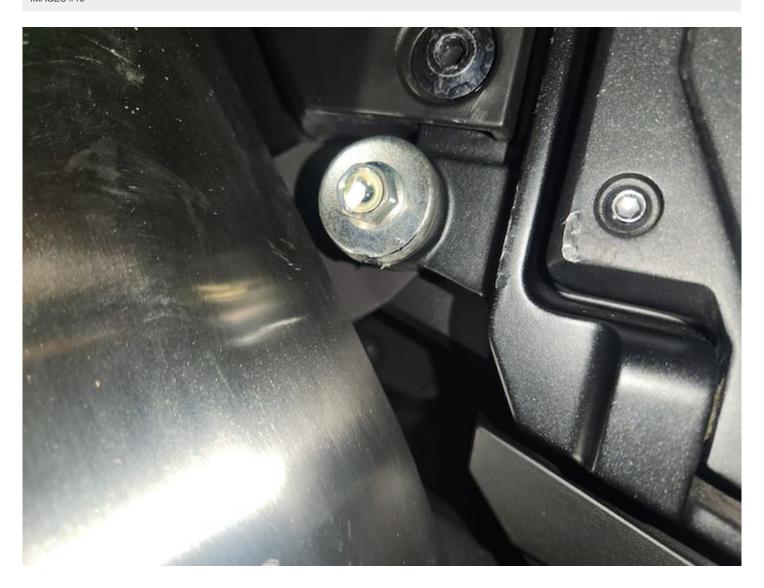




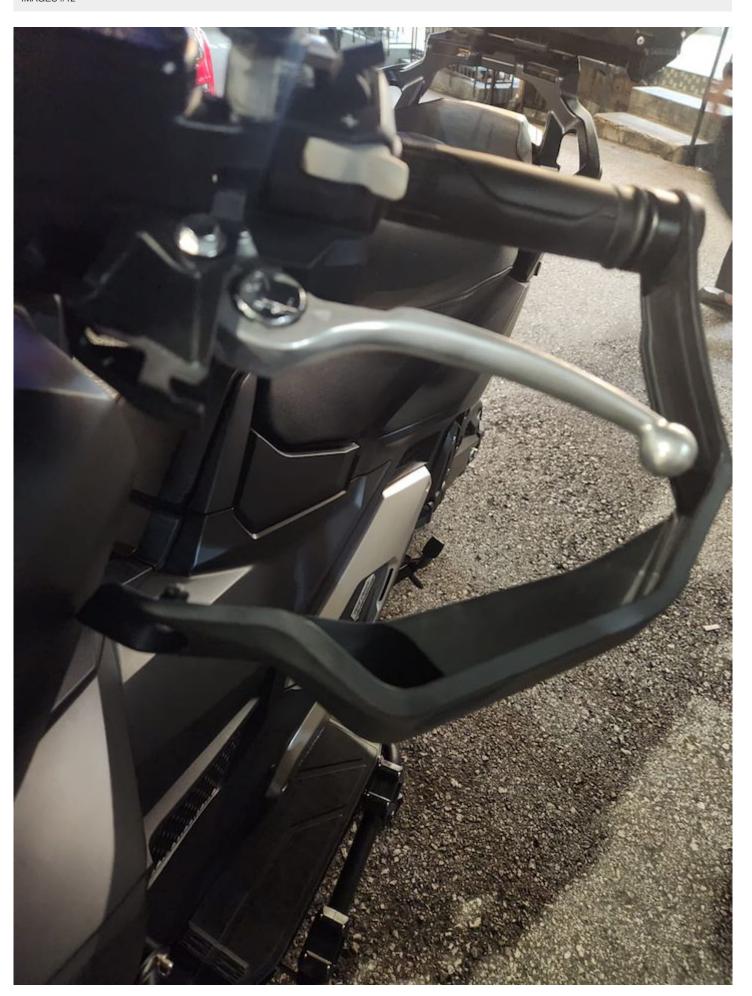


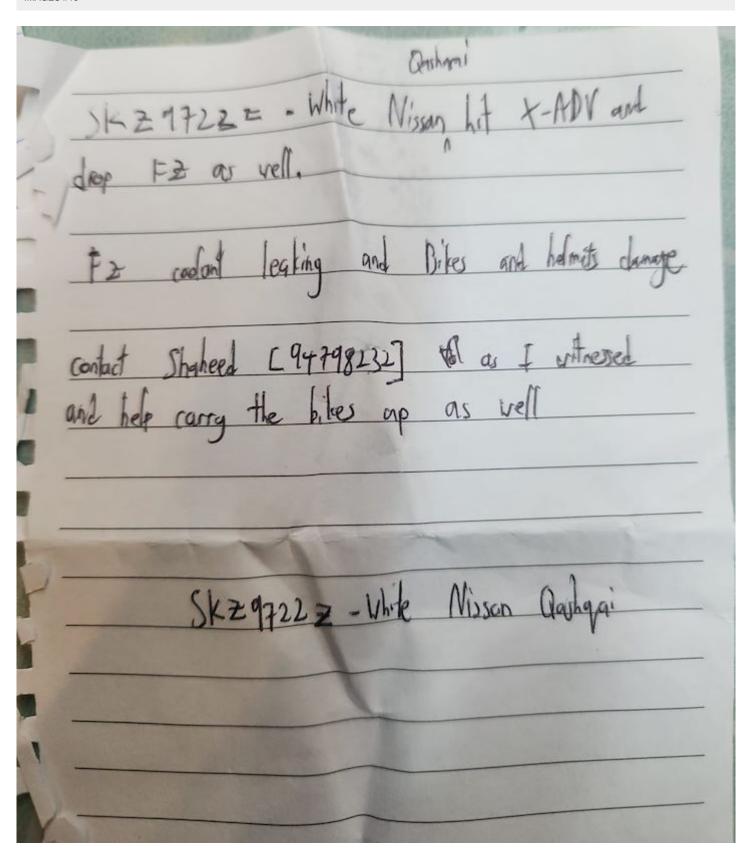








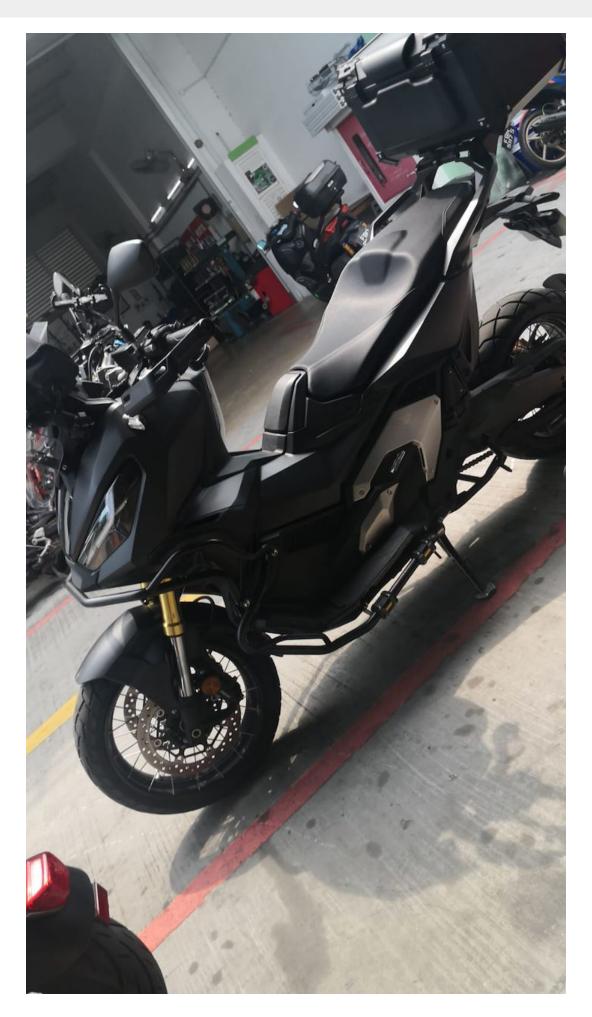




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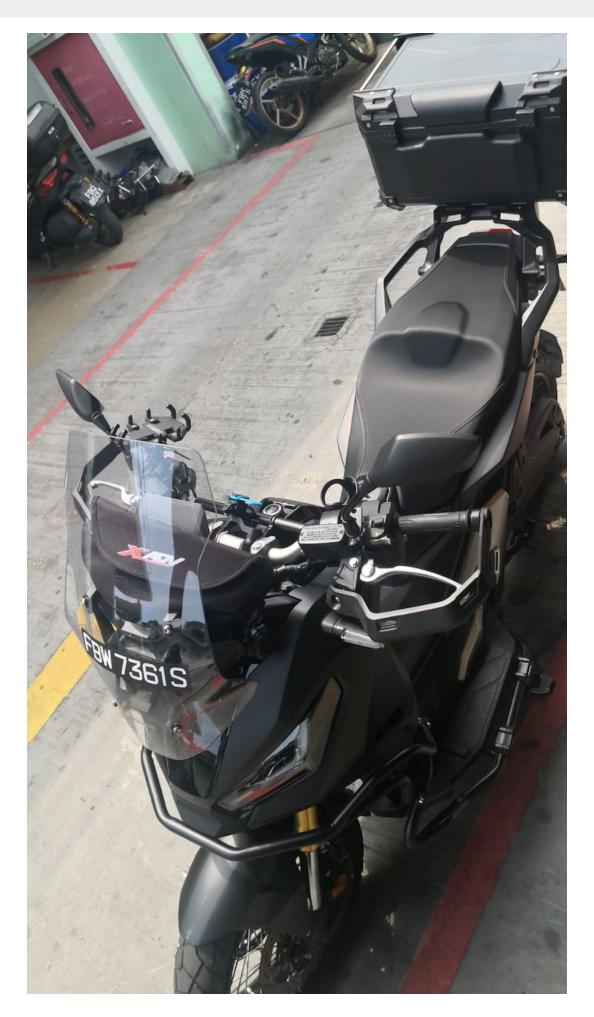














Arranged by: ANDA INSURANCE AGENCIES PTE LTD

1 King George's Avenue #06-00 Rehau Building Singapore 208557 Tel: 6534 2288 Email: motor@anda.com.sg Co. Reg. No.: 197903504K

CERTIFICATE OF INSURANCE

* MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) * MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 * ROAD TRANSPORT ACT, 1987 (MALAYSIA) * MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE No. MX118797

Index Mark and Registration

FBW7361S

Number of Vehicle

2. Name of Policyholder

MOHAMMAD SHAKE ASHIFF BIN SARIPAN

3. Effective Date of Commencement of Insurance for the purposes of the Act

16-08-2024 COMPREHENSIVE

Excess: As Per Policy Excess

4. Date of Expiry of Insurance

15-08-2025

5. Persons or Classes of Persons entitled to drive

Engine Number: RH10E5049787 Chassis No: JH2RH10A6RK308703

Hire Purchase: REVO FINANCIAL PTE LTD

THE POLICYHOLDER

MOHAMMAD SHAKE ASHIFF BIN SARIPAN

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use:

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.

THE POLICY DOES NOT COVER:

(I) USE FOR HIRE OR REWARD.

(III) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.

(III) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
(IV) FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

WITH EFFECT FROM 15-08-2024, THIS POLICY IS EXTENDED TO INCLUDE FOOD AND/OR PARCEL DELIVERY MENVICES. GEOGRAPHICAL AREA. RESTRICTED TO SINGAPORE ONLY

ADDITIONAL ALL CLAIM EXCESS: \$\$140

rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 ansport Act, 1987 (Malaysia), are not to be included under these bindings.

s Protection Scheme

protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation. verage for your policy is automatic and no further action is required from you. For more information on the types of benefits that overed under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC sites (www.gla.org.sg.or.www.ha.org.sg.or.www.sdic.org.sg).

THE PLAN CENTRY that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Thirdand Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

> For and on behalf of Etiqa Insurance Pte. Ltd. Approved insurer

> > **Authorised Signature**





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20241029/7006

REPORT OF A TRAFFIC ACCIDENT

	te/Time Report Made: /10/2024 03:03		Vide Report No.: L/20241028/0139	Station Diary No.:		
Informan	t's Particular	s				
Name of Informant: MOHAMMAD SHAKE ASHIFF BIN SARIPAN			Address: 120C CANBERRA CRESCENT #02-393 SINGAPORE 753120			
ID Type / ID No.: NRIC NO / S8734682Z			Contact No.: Home/Office: Mobile: 98755536			
Nationality: SINGAPORE CITIZEN		N	Email: CPL151@HOTMAIL.COM			
Sex: Age: Date of Birth: Male 36 04/11/1987			Type of Informant: Vehicle Owner			
Race: Javanese			Language: English			
Occupation: Project coordinator			Driving Licence Information: Class:	Date of Expiry:		

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/10/2024 19:40	Type of Location Car Park
Location:	rateflace by Folice	,,,,	20/10/2021 10:10	our run
SEMBAWANG RO)AD			
		Road Surface: Dry		
Clear		Road Surface: Dry Traffic Control:	Traf	fic Volume:
Weather: Clear Traffic Flow: One Way		Dry	Traf Ligh	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBW7361S	Motorcycle	HONDA	Xadv	Black	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBW7361S	ETIQA INSURANCE BERHAD	Mx118797	16/08/2024	15/08/2025





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20241029/7006

CONTINUATION OF REPORT

Details of Person	Involved					
Any Pedestrian In	volved: No					
No. of Pedestrians Injured: NIL Use			Use of Ped	Use of Pedestrian Crossing: NA		
Vehicle Owner						
Name	MOHAMMAD SHAKE ASHIFF BIN SARIPAN		ID No		S8734682Z	
Related Vehicle	NIL		Conta	ict No.	98755536	
Hospital/Clinic	NIL			Class Drivin Licen Expire	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	NOTE:	Date Disc	harge	NIL	
No. of Days grant	ed Medical Leave (MC)	NIL	Degree of	Injury	NIL	

Brief Details.

At 1930hrs i park my motorcycle Fbw7361s at sembawang road near 13 miles food shop and went to dinner. When i came back at around 2000hrs i saw a note on my motorbike. The note was "Skz9722Z white nissan hit xadv and drop fz as well

Fz coolant leaking and bikes helmet damage contact shaheed 94798232 as i witness and help carry the bikes up as well. Then there is two other guys approached me. One was another motorcycle owner FZ name darren 90273644 and the other was also a witness name daniel 84482519. Daniel the witness told me what happen. Apparently the car wanted to park there as well when he reversed his car he hit my bike Fbw7361s. My bike fall and also darrens bike (fz) fell. When the driver came out of the vehicle he acted like nothing happen and just proceed to walk away. Daniel then approached him and told him that he hit two motorbikes. He just said sorry and wanted to leave. Daniel then ask him to help carry the bikes up. Daniel also ask for the driver contact number but the driver declined and hastily walk away. So when I came back at ard 2000hrs we all decided to wait for the driver to come back. But till 2200hrs the driver didnt came back so I decided to call 999 for assistance. As I didnt have the chance to communication with the driver as the driver left hastily. My motor bike recieved some damages due to the driver negligence. I was advised by the traffic police to lodge a report. Im quite disapointed that the driver is not responsible for the action that he had done and treat it as if nothing has happened. I will be reporting to my insurance and will request for claims the damages that he has done to my new bike.



Tel No: 65470000

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865



3 of 3

Report No. T/20241029/7006

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: 29/10/2024 03:03
Officer In Charge Of Case:	Classification Of Case:
NP168	