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.

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 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 07/11/2024 17:40 (SGT) Reported by **Actual Driver** Date of Accident 06/11/2024 12:45 (SGT) Exact Location of Accident Singapore Additional Location Information Yishun Central 1 near Block 926 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Yamaha

Vehicle Registration Number FBN1744H

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner Ban Hock Hin Co Pte. Ltd. Company Reg No 1XXXXX288K Email Address raymond@bhh.com.sg Mobile Phone No (Phone) +65-62816520 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model NMAX155 ABS Variant Exact purpose for which vehicle was being used at time of accident **Employment** Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Motorcycle Transmission Auto CC 155

Vehicle Fuel First Regisration Date

Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number MC/01009120/02

DRIVER

Chassis no

Name of Driver SRIVISNU MAHASWARARAUE Passport No/FIN MXXXX721T Date Of Birth 23/09/1991 Occupation Outdoor Driving Pass Date 24/10/2023 Driving License Pass Class Driving License Validity Valid Driving experience 1 YEAR AND 1 MONTH Gender Mobile Number (Phone) +65-83064460 Alt. Phone Number Email Address raymond@bhh.com.sg Address NA Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured **Employee** 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 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?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

Yes

Traffic Police

(Phone) +65-65470000

(Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

No

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Mention date and time, I'm parking warden from Certis, I was attended case Block 926 Yishun Central 1 (Y56) under HDB. I park the Certis motorcycle (FBN1744H) beside Block 926 unbroken continuous double yellow line, checking any illegal parking for mentioned case. When I returned to the Certis motorcycle, I saw a van (GBK4301Z) reversing his vehicle and it hit into the Certis motorcycle parked along the side. Bike then fell onto the left side and caused damages to its left side bike cover set. I called Certis Duty officer about the incident and informed that I did not sustain any injury. Duty Officer advice to exchange driver particulars and take photos at scene.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	GBK4301Z Nissan Nv350
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Commercial vehicle
Name of Driver	HANG WEI SEK
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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- 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,
- By the lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMMAD AZALY BIN ABDULLAH

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

NRIC/FIN No.:

Policyholder's Signature Date & Time:

07112024

GIABMC SketchPlanForm V3

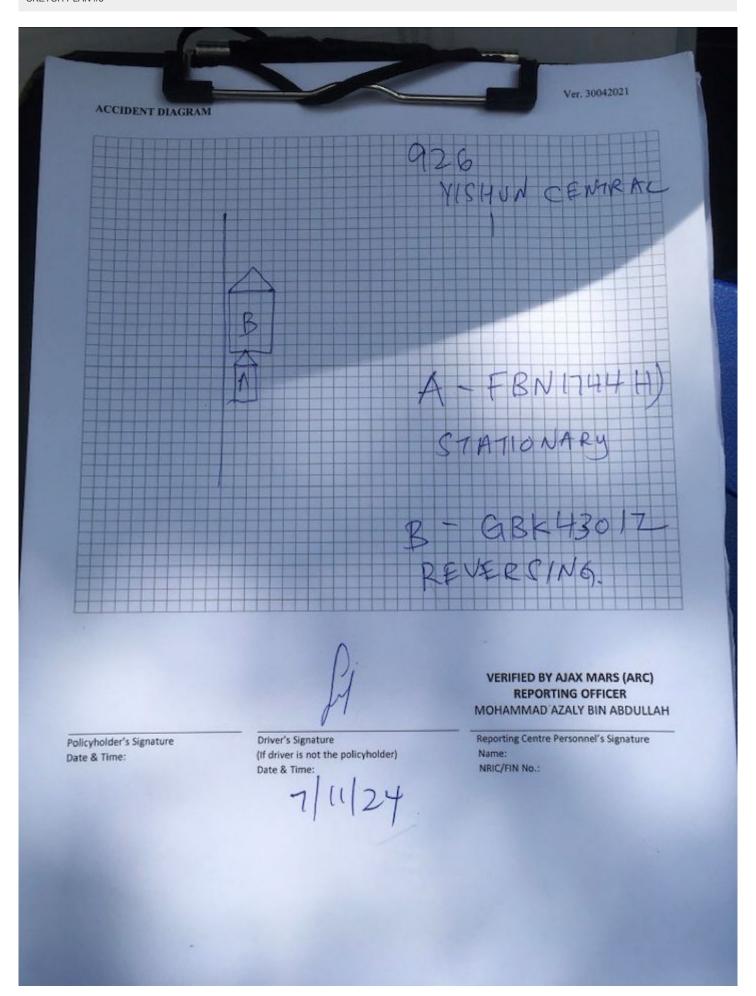
SKETCH PLAN					
REFER TO ATTAC	CHED ACCIDENT DIAGRAM	Л			
					\square
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT				
Refer to police report					
DECLARATION I/We declare the foregoing part	iculars are true in every respect.		REPO	Y AJAX MARS RTING OFFICE) AZALY BIN A	R
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)		Reporting Centre Name:		

Date & Time: 07112024



2

NRIC/FIN No.:













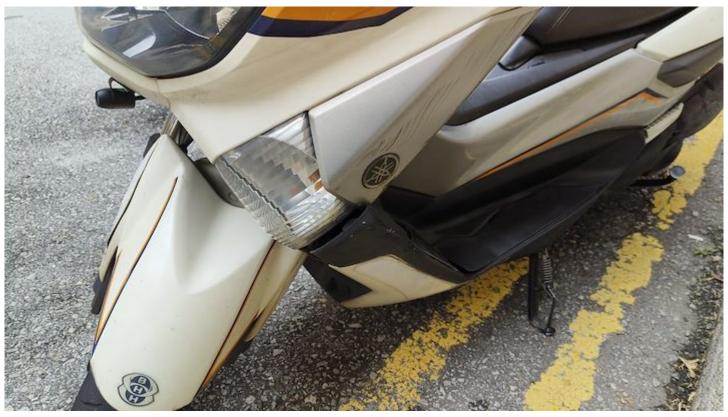


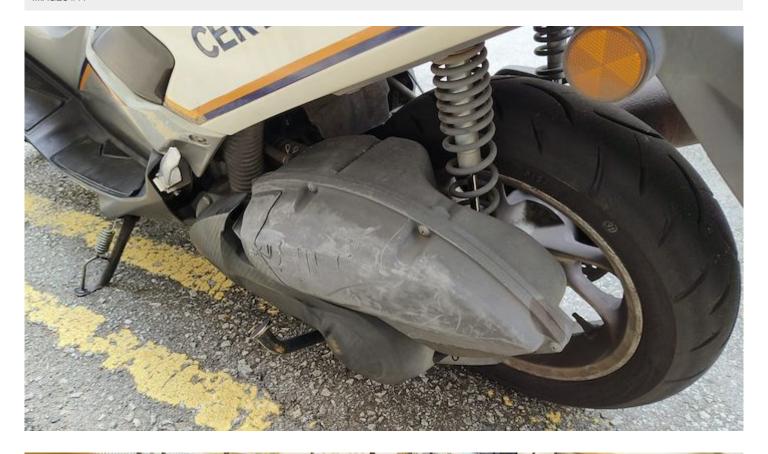






















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20241106/7042

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/11/2024 14:23		ide:	Vide Report No.:	Station Diary No.:		
Informan	t's Particular	S				
Name of Informant: SRIVISNU MAHASWARARAUE		ARARAUE	Address: D 2 Toh Tuck Terrace #01-01 Certis SINGAPORE 596640			
ID Type / ID No.: FIN NO / M3235721T			Contact No.: Home/Office: Mobile: 83064460			
Nationali MALAYS			Email: srivishnu235@yahoo.com			
Sex: Age: Date of Birth: Male 33 23/09/1991			Type of Informant: Rider			
Race: Indian			Language: English			
Occupation: Enforcement officer			Driving Licence Information: Class: Date of Expiry:			

General Information	of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 06/11/2024 12:45	Type of Location Car Park	
Location: YISHUN CENTRA Weather: Clear	L 1	Road Surface:			
Traffic Flow: Two Way	Flow: Traffic Control:		05033	Traffic Volume: No Traffic	
Type of Collision: reversing hit on sta	ationary	Not controlled	Any	one conveyed by oulance:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBN1744H	Motorcycle					0
GBK4301Z	Motor van	NISSAN	NV350	Grey	Slightly	0

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



T/20241106/7042

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20241106/7042

CONTINUATION OF REPORT

Rider							
Name	SRIVISNU MAHASWARARAUE		ID No).	M3235721T		
Related Vehicle	FBN1744H (Motorcycle)		FBN1744H (Motorcycle)		Conta	act No.	83064460
Hospital/Clinic	NIL			Class Drivin Licen Expin	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date D			narge	NIL	.11:	
No. of Days grante	ed Medical Leave (MC)	NIL	Degree of Injury NIL				

Brief Details.

Mention date and time, I'm parking warden from Certis, I was attended case Blk 926 Yishun Central 1 (Y56) under HDB. I park the Certis motorcycle (FBN1744H) beside blk 926 unbroken continuous double yellow line, checking any illegal parking for mentioned case. When I returned to the Certis motorcycle, I saw a van (GBK4301Z) reversing his vehicle and it hit into the Certis motorcycle parked along the side. Bike then fell onto the left side and caused damages to its left side bike cover set. I called Certis Duty officer about the incident and informed that I did not sustain any injury. Duty Officer advice to exchange driver particulars and take photos at scene.



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



3 of 3

Report No. T/20241106/7042

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: 06/11/2024 14:23
Officer In Charge Of Case: TP / AEIT / FAHKRUL RAZI BIN SUHAIME Contact No.: 65476404	Classification Of Case:
NP168	