

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	21/11/2024 11:09 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	10/11/2024 17:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PUNGGOL ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBS2246X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AMIR NURULLAH BIN DOLLAH
NRIC No	S7503330C
Email Address	IMPERIALKOJEK@gmail.com
Mobile Phone No	(Phone) +65-89302246
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	ADV150
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 your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Auto
CC	160
Vehicle Fuel	Petrol
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5121138220-03

DRIVER

Name of Driver	AMIR NURULLAH BIN DOLLAH
NRIC No	S7503330C
Date Of Birth	12/02/1975
Occupation	Outdoor
Driving Pass Date	25/12/1995
Driving License Pass Class	2B
Driving License Validity	Valid
Driving experience	28 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89302246
Alt. Phone Number	-
Email Address	IMPERIALKOJEK@gmail.com
Address	BLK 879A TAMPINES AVENUE 8
Address complement	05-29
Postcode	521879
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	Yes
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 POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	SENT TO MOTORVIDEO@INCOME.COM.SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFW172U
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NG SEOW WAH
NRIC No	S7439272E
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLQ4318B
Vehicle Manufacturer	Mazda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Private car
Name of Driver	CORNELIUS
NRIC No	S9137417Z
Contact Number	-
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	AMIR NURULLAH BIN DOLLAH
Gender	Male
Phone No	(Phone) +65-89302246
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBS2246X
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

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' 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.

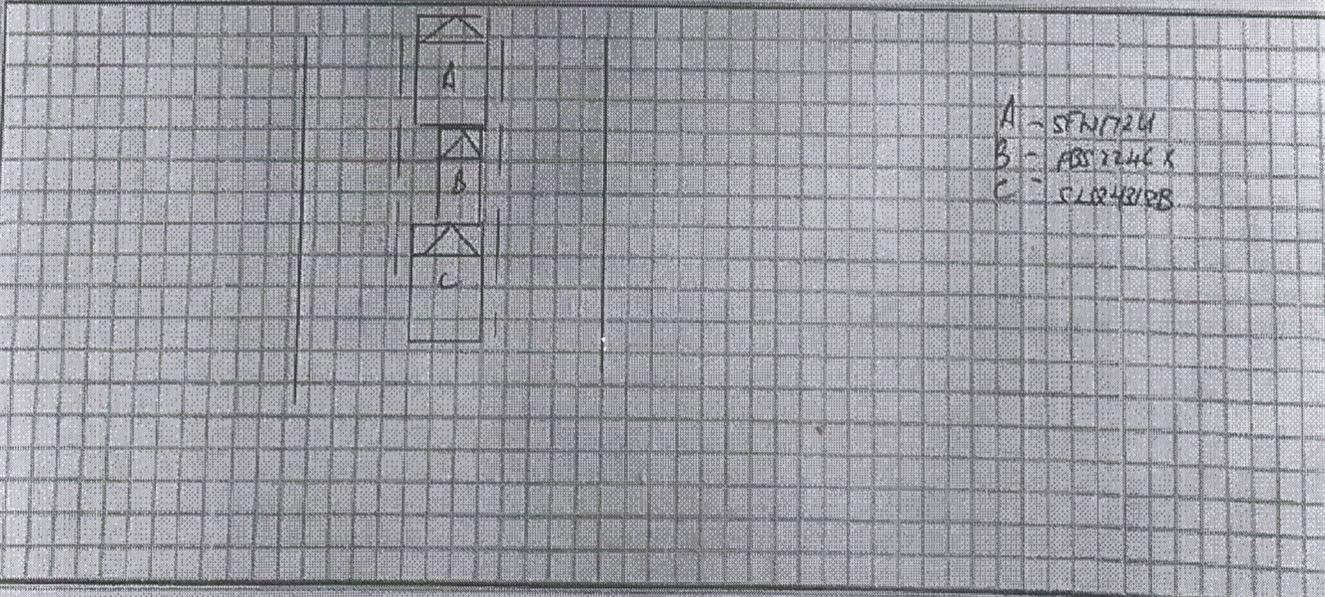
[Signature] 24/1/2018
Policyholder's Signature / Date & Time

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

Muhammad Hariz Sami BAAS
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

PUNGLA ROAD



Describe Circumstance of the Accident

REFER TO REPORT NUM 1/2024/1111/7073

Declaration

I/We declare the foregoing particulars are true in every respect.

 21/11/24 105T
Policyholder's Signature / Date & Time

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

Muhammad Haziq Bin Hams
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)



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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/11/2024 14:00		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: AMIR NURULLAH BIN DOLLAH			Address: 879A TAMPINES AVENUE 8 #05-29 SINGAPORE 521879		
ID Type / ID No.: NRIC NO / S7503330C			Contact No.:		Mobile: 89302246
Nationality: SINGAPORE CITIZEN			Email: IMPERIALKOJEK@GMAIL.COM		
Sex: Male	Age: 49	Date of Birth: 12/02/1975	Type of Informant: Rider		
Race: Javanese			Language: English		
Occupation: Electrician			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 10/11/2024 17:00	Type of Location: Straight Road
Location: PUNGGOL ROAD				
Weather: Raining		Road Surface: Wet		
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBS2246X	Motorcycle	HONDA		White	Slightly Damaged	0
SFW172U	Motor car	NISSAN		Grey	Slightly Damaged	0
SLQ4318B	Motor car	MAZDA		Blue	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBS2246X		5121138220-03	24/02/2024	23/02/2025



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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	AMIR NURULLAH BIN DOLLAH	ID No.	S7503330C
Related Vehicle	FBS2246X (Motorcycle)	Contact No.	89302246
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	10/11/2024	Date Discharge	10/11/2024
No. of Days granted Medical Leave (MC)	08	Degree of Injury	Slight

Brief Details.

I WAS RIDING MY MOTORBIKE FBS2246X ON PUNGGOL ROAD , WHEN I REACHED SENGKANG MY BIKE WAS HIT FROM BEHIND BY SLQ4318.MY BIKE AND I WAS PUSHED FORWARD AGAINST SFW172U WHICH WAS STATIONARY WAITING FOR THE LIGHTS TO TURN GREEN.I FELL ON THE GROUND AND CANNOT STAND AS MY LEFT LEG HURTS VERY BAD AND MY RIGHT ARM ALSO HURT.SO SOMEONE CALLED THE AMBULANCE AND CONVEYED ME TO CGH FOR FURTHER CHECK UP.



**SINGAPORE
POLICE FORCE**



T/20241111/7073

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

3 of 3

Report No. T/20241111/7073

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / TPIB / ABDUL RAHIM BIN SALIM Contact No.: 65476904

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 11/11/2024 14:00
Classification Of Case:

This report is lodged at Eunos NPP Kiosk
NP168