

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	02/12/2024 12:04 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	30/11/2024 12:53 (SGT)
Exact Location of Accident	278 Changi Rd, Singapore 419758
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN1773Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GAZI MAHBUB
Passport No/FIN	G2218777K
Email Address	gazimahbub1995@hotmail.com
Mobile Phone No	(Phone) +65-88905030
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Cb150r
Variant	-
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 - Reporting only
Vehicle Category	Motorcycle
Transmission	Manual
CC	150
Vehicle Fuel	Petrol
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number	P21031719R00

DRIVER

Name of Driver	GAZI MAHBUB
Passport No/FIN	G2218777K
Date Of Birth	10/04/1992
Occupation	Outdoor
Driving Pass Date	01/12/2021
Driving License Pass Class	2B
Driving License Validity	Valid
Driving experience	2 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88905030
Alt. Phone Number	-
Email Address	gazimahbub1995@hotmail.com
Address	287A CHANGI ROAD
Address complement	-
Postcode	419766
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	Collision - Head to Rear
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 30th NOVEMBER AROUND 12:53 PM, AS I WAS TRAVELLING AT 278 CHANGI ROAD HEADING TO WORK, A CAR BEARING VEHICLE PLATE SMK3130B SUDDENLY BRAKE, I COLLIDED TO HIS REAR, RIGHT SIDE. I SUFFERED MINOR ABRASIONS & BRUISES AFTER I FALL FROM MY RIGHT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMK3130B
Vehicle Manufacturer	Honda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SURESHBABU PADMANABHAN
NRIC No	S7563285A
Contact Number	-
Address	APT BLK 773 PASIR RIS STREET 71
Address complement	#02-378
Postcode	510773
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	GAZI MAHBUB
Gender	Male
Phone No	(Phone) +65-88905030
Address	287A CHANGI ROAD
Address Complement	-
Post Code	419766
Approximate Age Years Old	32
Injuries Sustained	SUFFERED MINOR ABRASIONS & BRUISES
Injured person in which vehicle?	FBN1773Z
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

We declare the foregoing particulars are true in every respect.

MAH

Mohd



Witnessed by ☒ Reporting Centre
Personnel

SKETCH PLAN

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



Mahd

Policyholder's Signature / Date & Time



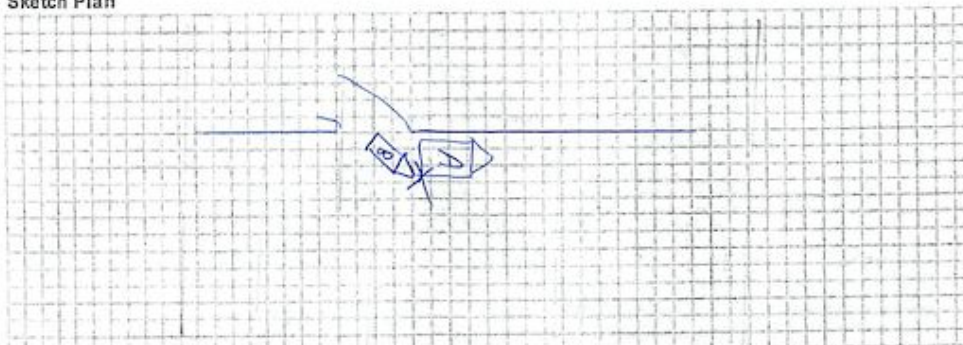
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Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan

























It pays to choose

**Budget
Direct
insurance**

Certificate of Insurance

 Comprehensive Motorcycle Policy
 Policy Number: P21031719R00

Motor Vehicles (Third-Party Risks And Compensation) Act 1960 of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P21031719R00 (Comprehensive / Named Rider Plan)

1) Vehicle Registration Number	:	FBN1773Z
Chassis Number	:	MLHKC2889J5024076
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	16/08/2024 (00:00)
3) Date / Time of Expiry of Insurance	:	24/07/2025 (23:59)
4) Excess (i) Policy	:	S\$ 500.00
(ii) Theft Outside Singapore	:	50% of Market Value of your Motorcycle at the time of theft up to maximum of S\$ 2,000.00
(iii) Medical Expenses	:	Not applicable
5) Policyholder	:	GAZI MAHBUB
6) Persons or Classes of Persons Entitled to Drive*		
Rider(s) named as a Main / Named Rider in this Certificate of Insurance only		
<p>Provided that the person riding is permitted in accordance with the licensing or other laws or regulations to ride the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from riding the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act 1961 of Singapore and its registration under the said Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.</p>		
Main Rider / Date of Birth	:	GAZI MAHBUB (10/04/1992)
Named Rider / Date of Birth	:	None
7) Limitation as to use*		
<p>Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.</p>		
<p><i>* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.</i></p>		
8) Finance Company	:	NA

I / We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on
 27/06/2024

Auto & General Insurance (Singapore) Pte. Limited
 Trading as Budget Direct Insurance



 Simon Birch
 Chief Executive Officer



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SS3R24C20001 Vehicle Registration No: FBN1773Z
 Name (as shown in NRIC) : GAZI MAHBUB NRIC/FIN/Passport No : G2218777K
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : 278 CHANGI ROAD Singapore (419758)
 Contact (Tel) : _____ Mobile No. : 88905030
 Email Address : gazimahbub1995@hotmail.com
 Date of Accident : 30.11.2024 Time of Accident : 12:53 (sgt)
 Place of Accident : 278 CHANGI ROAD
 Insurance Company : AUTO & GENERAL INSURANCE (SINGAPORE) PTE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

TO AMEND VEHICLE NUMBER

Policyholder / Driver's Signature
 Date:

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:
 Date:

