

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	12/12/2024 14:10 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	10/12/2024 17:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PETIR ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBU9218X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MOHAMMED NUR ILHAM BIN MOHAMMED NAZRI
NRIC No	S9936940Z
Email Address	INSPIRE1911@GMAIL.COM
Mobile Phone No	(Phone) +65-92320623
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	ADV160 ABS CVT
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Auto
CC	157
Vehicle Fuel	Petrol
First Registration Date	11/04/2023
Chassis no	MH1KFB217NK008448
Effective Date/Time of Ownership	11/04/2023 02:04 (SGT)

INSURANCE COMPANY

Name of Insurance Company	Etiga Insurance Pte Ltd
Policy Number / Cover Note Number	MX107992

DRIVER

Name of Driver	MOHAMMED NUR ILHAM BIN MOHAMMED NAZRI
NRIC No	S9936940Z
Date Of Birth	19/11/1999
Occupation	Indoor
Driving Pass Date	20/04/2022
Driving License Pass Class	2B
Driving License Validity	Valid
Driving experience	2 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92320623
Alt. Phone Number	-
Email Address	INSPIRE1911@GMAIL.COM
Address	BLK 208 PETIR ROAD 02-515 SINGAPORE 670208
Address complement	-
Postcode	-
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 - Change/cross lane
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?	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?	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	Bukit Panjang Neighbourhood Police Centre
Police Station Address	No.1 Segar Road #01-05 Singapore 677738
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER WITH ATTACHED.
REMARKS : MOTORBIKE AT TRAFFIC COMPOUND

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	SHA8238D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	FOO CHEE TATT
NRIC No	S0155582J
Contact Number	-
Address	-
Address complement	-
Postcode	-
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	MOHAMMED NUR ILHAM BIN MOHAMMED NAZRI
Gender	Male
Phone No	(Phone) +65-92320623
Address	BLK 208 PETIR ROAD 02-515 SINGAPORE 670208
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NG TENG FONG GENERAL HOSPITAL - 15 DAYS MC
Injured person in which vehicle?	FBU9218X
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

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.


Policyholder's Signature / Date & Time


 12/12/24 12:45
Driver's Signature (if driver is not the policyholder) / Date & Time


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

Sketch Plan

A. FBU 9218X

B. SHH 8238D



Describe Circumstance of the Accident

ref to Police report

Note: Please note that your insurer may have 14 days time frame for you to submit an own damage claim under your own policy, please check your policy for more information.

Declaration

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

Policyholder's Signature / Date & Time_____
Driver's Signature (if driver is not the policyholder) / Date & Time_____
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)



**SINGAPORE
POLICE FORCE**



T/20241211/2000

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

1 of 3

Report No. T/20241211/2000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/12/2024 00:09		Vide Report No.:		Station Diary No.: 1
Informant's Particulars				
Name of Informant: MOHAMMED NUR ILHAM BIN MOHAMMED NAZRI		Address: APT BLK 208 PETIR ROAD #02-515 SINGAPORE 670208		
ID Type / ID No.: NRIC NO / S9936940Z		Contact No.: Home/Office: Mobile: 92320623		
Nationality: SINGAPORE CITIZEN		Email: inspire1911@gmail.com		
Sex: Male	Age: 25	Date of Birth: 19/11/1999	Type of Informant: Rider	
Race: Malay		Language: English		
Occupation: HOTEL SUPERVISOR		Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 10/12/2024 17:30	Type of Location: Straight Road
Location: PETIR ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
FBU9218X	Motorcycle	HONDA	ADV160 ABS CVT	Red	Seriously Damaged	0
SHA8238D	Taxi	BYD	E6 (ME-2)	Yellow	Slightly Damaged	0

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



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1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

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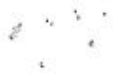
Report No. T/20241211/2000

CONTINUATION OF REPORT

Rider			
Name	MOHAMMED NUR ILHAM BIN MOHAMMED NAZRI	ID No.	S9936940Z
Related Vehicle	FBU9218X (Motorcycle)	Contact No.	92320623
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: 2B Date of Expiry: NIL
Date Treatment	10/12/2024	Date Discharge	10/12/2024
No. of Days granted Medical Leave	15	Degree of	Serious
Driver			
Name	FOO CHEE FATT	ID No.	S0155582J
Related Vehicle	SHA8238D (Taxi)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 10/12/2024 at about 1730hrs, I was riding my motorcycle bearing plate number FBU9218X, along Petir Rd nearby Bus Stop 44359 on the right lane. A Taxi bearing plate number SHA8238D, on the left lane decided to change lane to the right without checking his blind spot and eventually hit me. I fell off my motorcycle and suffered, left leg abrasion, fractured right ribcage, fractured left collar bone. Traffic police officers and SCDF paramedics attended to me. The traffic police officers took my statement and informed me that my motorcycle will be towed to the Traffic Police compound. I was conveyed to Ng Teng Fong General Hospital via ambulance. I was given 15 days of MC by the doctor at the said hospital. The taxi driver was not injured. I do not have any in-vehicle camera recording the incident. This is the first time such incident happened to me.



SINGAPORE
POLICE FORCE



T/20241211/2000

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1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

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Report No. T/20241211/2000

CONTINUATION OF REPORT

Signature of Officer Recording The
J /
SGT 2 SUFYAN BIN RAZALI

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SR STAFF SGT MUHAMMAD GHAZALI BIN
ABDUL RAZAK
Contact No.: 65476367

Signature Of Informant:

Date/Time:
11/12/2024 00:09

Classification Of Case:

NP168