

## 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	01/07/2024 18:20 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	30/06/2024 02:55 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JLN BUKIT MERAH
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP8897T
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	RIZQY HAZRI BIN IDRIS
NRIC No	T0222478F
Email Address	RIZQYHAZRI@GMAIL.COM
Mobile Phone No	(Phone) +65-91296477
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	R15
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 - Claiming third party
Vehicle Category	Motorcycle
Transmission	Manual
CC	155

#### INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5131876148-01

#### DRIVER

Name of Driver	RIZQY HAZRI BIN IDRIS
NRIC No	T0222478F
Date Of Birth	03/08/2002
Occupation	Indoor

Driving Pass Date .....	08/03/2022
Driving experience .....	2 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91296477
Alt. Phone Number .....	-
Email Address .....	RIZQYHAZRI@GMAIL.COM
Address .....	BLK 9 JALAN RUMAH TINGGI
Address complement .....	#11-453
Postcode .....	150009
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 - Major/Minor Rd
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 .....	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 AS POLICE REPORT

#### 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 .....	SHB157B
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	Na
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	RIZQY HAZRI BIN IDRIS
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	21
Injuries Sustained .....	Swollen right big toe, abrasion left leg, left hand . Strain on shoulder and right thigh
Injured person in which vehicle? .....	FBP8897T
Were seat belts worn? .....	No
Was this injured conveyed to hospital by ambulance? .....	Yes

#### WITNESS DETAILS

##### WITNESS 1

Name .....	Nasser
Phone .....	(Phone) +65-90298292
Email .....	-



**SKETCH PLAN****IMPORTANT NOTICE**

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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)**

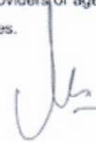
I understand, acknowledge, agree and consent that:

- (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' 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.



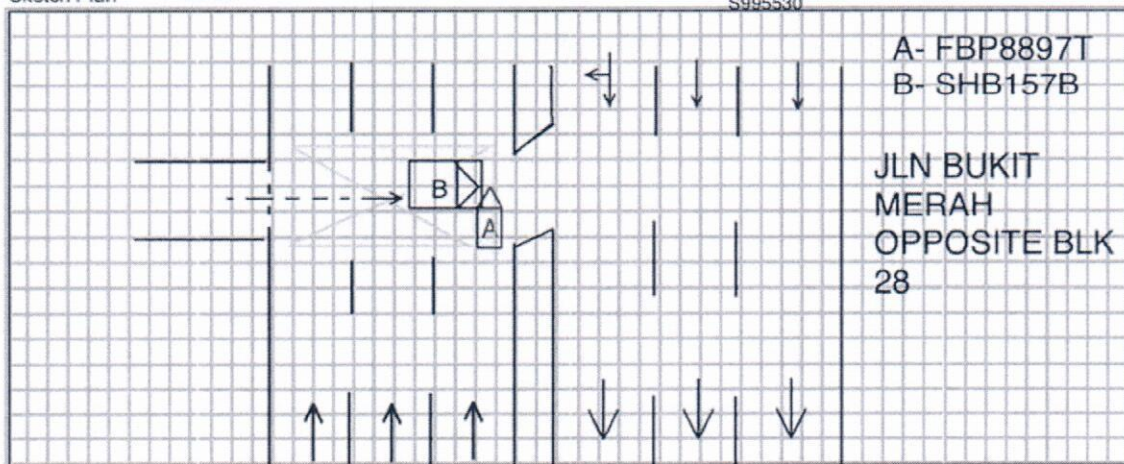
Policyholder's Signature / Date & Time  
01/07/2024

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



Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)  
Muhammad Sumardi Bin Mohd Affandi  
S995530

Sketch Plan 17:50hrs



Describe Circumstance of the Accident

REFER TO GEARS

Declaration

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

Policyholder's Signature / Date & Time  
01/07/2024  
17:50hrs

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)  
Muhammad Sumardi Bin Mohd Affandi<sub>2</sub>  
S995530





**SINGAPORE  
POLICE FORCE**



T/20240701/7071

1 of 3

Report No. T/20240701/7071

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

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/07/2024 15:09		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: RIZQY HAZRI BIN IDRIS			Address: 9 JALAN RUMAH TINGGI #11-453 SINGAPORE 150009		
ID Type / ID No.: NRIC NO / T0222478F			Contact No.: Home/Office: Mobile: 91296477		
Nationality: SINGAPORE CITIZEN			Email: rizqyhazri@gmail.com		
Sex: Male	Age: 21	Date of Birth: 03/08/2002	Type of Informant: Rider		
Race: Malay			Language: English		
Occupation: National Service Full Time			Driving Licence Information: Class: 2B Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/06/2024 02:55	Type of Location: Straight Road
Location:  JALAN BUKIT MERAH				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBP8897T	Motorcycle	YAMAHA	YZF-R155	Red		0

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBP8897T	NTUC Income Insurance Co-Operative Limited	5131876148-01	19/11/2023	18/11/2024



**SINGAPORE  
POLICE FORCE**

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



T/20240701/7071

2 of 3

Report No. T/20240701/7071

CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	RIZQY HAZRI BIN IDRIS	ID No.	T0222478F
Related Vehicle	FBP8897T (Motorcycle)	Contact No.	91296477
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	30/06/2024	Date Discharge	30/06/2024
No. of Days granted Medical Leave (MC)	07	Degree of Injury	Slight

**Brief Details.**

On 30/06/24 at about 2:55am I was riding along Jalan Bukit Merah road towards Kampong Bahru Road in lane 1. Before the T junction of Hoy Fatt road a taxi (SHB157B) dashed out the carpark (BMBM1) and tried to make an illegal right turn. With no time to react, I collided with the front right side of the taxi. I was not able to get up and required assistance after being flung about 1 meter away. I was then conveyed to SGH. I have someone that is willing to be the witness.



**SINGAPORE  
POLICE FORCE**

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



T/20240701/7071

3 of 3

Report No. T/20240701/7071

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
Ahmad Syafiq Bin Harris  
Contact No.: 65476201

Signature Of Informant:  
The identity of the person making this report has been  
authenticated by Singpass. No signature is required.

Date/Time:  
01/07/2024 15:09

Classification Of Case:

NP168