

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	10/07/2024 17:51 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	03/07/2024 22:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JURONG WEST AVENUE 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FZ2530R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ABDUL SALAAMUDIN BIN AB WAHAB
NRIC No	S9210419B
Email Address	ABDEAN@OUTLOOK.COM
Mobile Phone No	(Phone) +65-91813735
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Suzuki
Model	Drz400smk5
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	0

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5146032434

DRIVER

Name of Driver	ABDUL SALAAMUDIN BIN AB WAHAB
NRIC No	S9210419B
Date Of Birth	28/03/1992
Occupation	Indoor

Driving Pass Date	01/10/2012
Driving experience	11 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91813735
Alt. Phone Number	-
Email Address	ABDEAN@OUTLOOK.COM
Address	476 JURONG WEST STREET 41 #09-336
Address complement	-
Postcode	640476
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 on collision
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 TO ATTACHED

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	SMK6971X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	NA / Unknown
Name of Driver	-
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	ABDUL SALAAMUDIN BIN AB WAHAB
Gender	Male
Phone No	(Phone) +65-91813735
Address	476 JURONG WEST STREET 41 #09-336
Address Complement	-
Post Code	640476
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FZ2530R
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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6. This report will be forwarded by the insurers to 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.
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

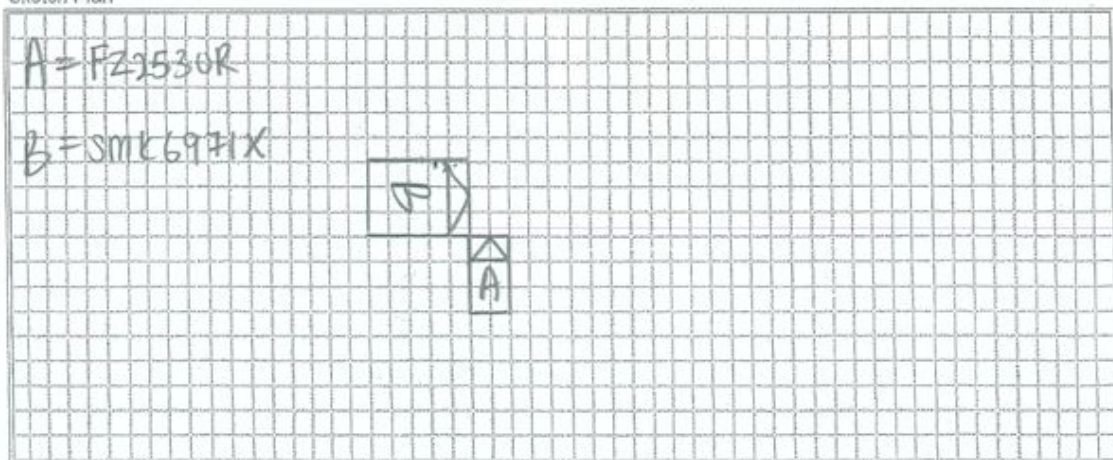


Actual Driver's Signature (if driver is not the policyholder) / Date & Time

LOH

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

Sketch Plan



vJun2022

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Describe Circumstance of the Accident

Refer to the police report.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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

LOH

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



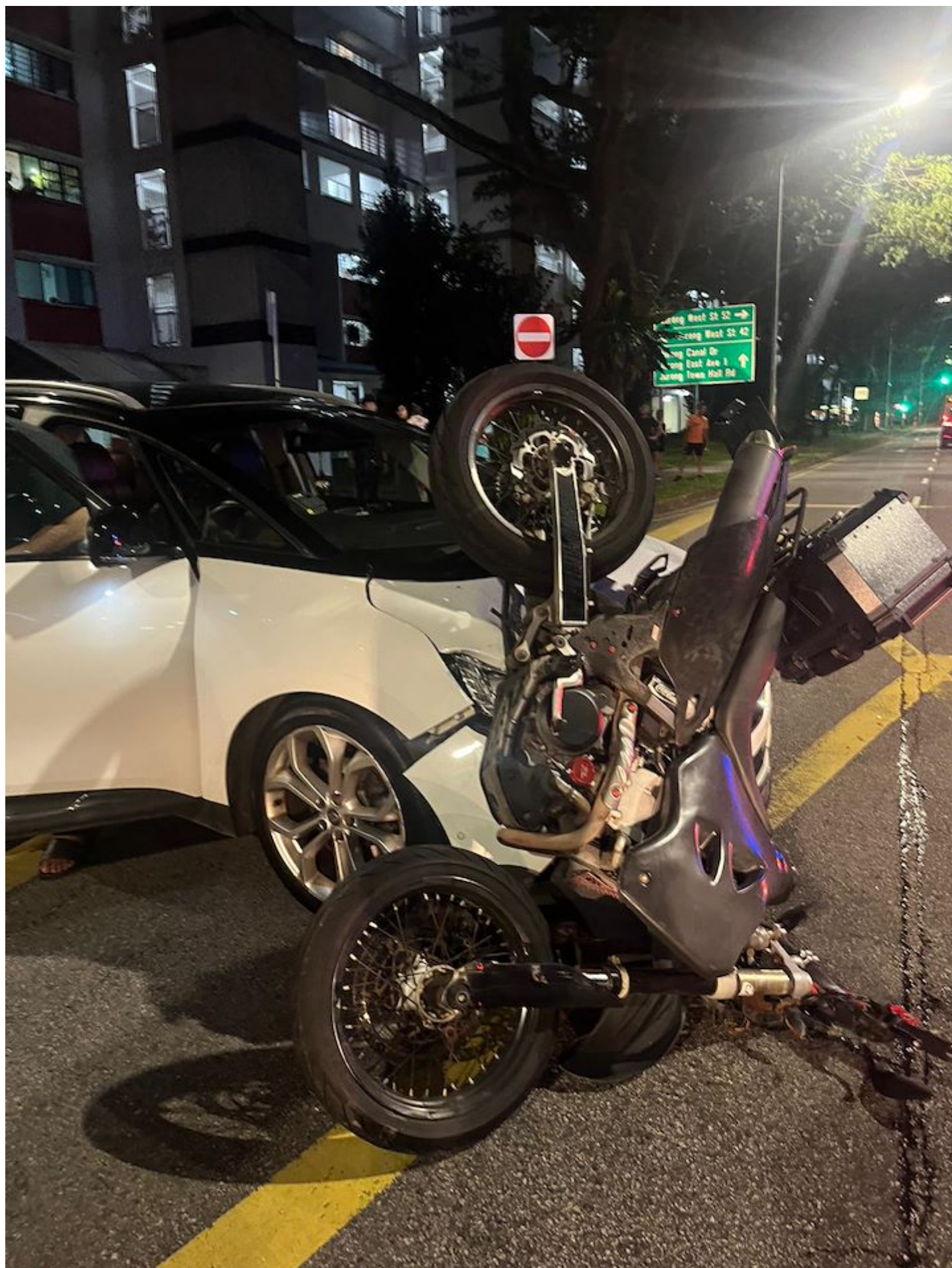


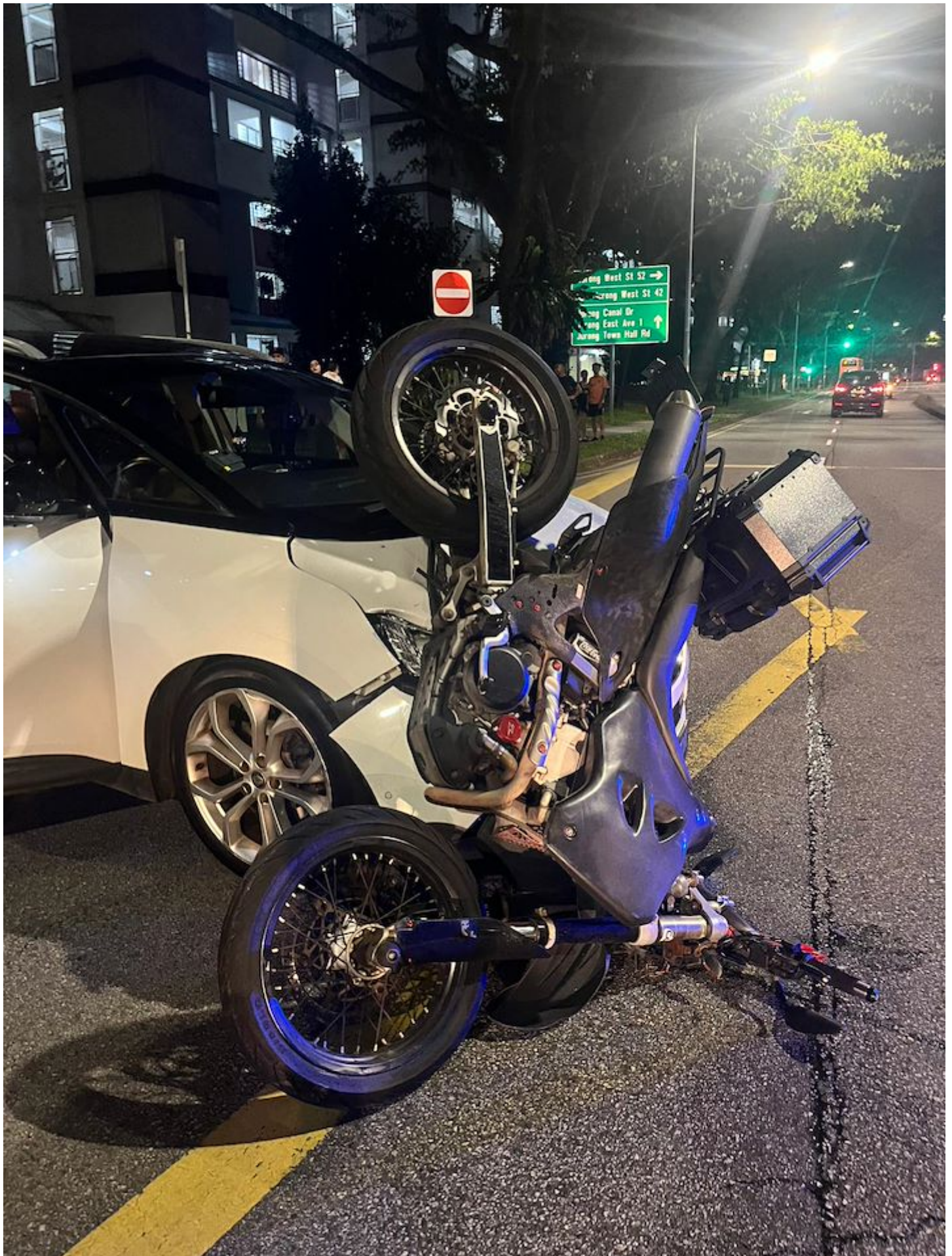














**SINGAPORE
POLICE FORCE**



T/20240704/7009

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

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Report No. T/20240704/7009

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/07/2024 04:00		Vide Report No.: J/20240703/0137		Station Diary No.:	
Informant's Particulars					
Name of Informant: ABDUL SALAAMUDIN BIN AB WAHAB			Address: 476 JURONG WEST STREET 41 #09-336 SINGAPORE 640476		
ID Type / ID No.: NRIC NO / S9210419B			Contact No.: Home/Office: Mobile: 91813735		
Nationality: SINGAPORE CITIZEN			Email: abdean@outlook.com		
Sex: Male	Age: 32	Date of Birth: 28/03/1992	Type of Informant: Rider		
Race: Malay			Language: English		
Occupation: IT infrastructure specialist			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry: 31/07/2024		

General Information of the Accident				
Type of Accident:	Injury Drink & Drive	Drink Drive: Yes	Date/Time of Accident: 03/07/2024 22:30	Type of Location: Straight Road
Location: JURONG WEST AVENUE 1				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FZ2530R	Motorcycle			Black	Seriously Damaged	0
SMK6971X	Motor car			White	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FZ2530R	NTUC Income Insurance Co-Operative Limited	5146032434	25/05/2024	24/05/2025



**SINGAPORE
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T/20240704/7009

Police Station Of Origin:
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Tel No: 65470000

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Report No. T/20240704/7009

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	ABDUL SALAAMUDIN BIN AB WAHAB		ID No. S9210419B
Related Vehicle	FZ2530R (Motorcycle)		Contact No. 91813735
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL		Class of Driving Licence & Expiry Date Class: 2B,2A,2,3 Date of Expiry: 31/07/2024
Date Treatment	04/07/2024		Date Discharge 04/07/2024
No. of Days granted Medical Leave (MC)	NIL		Degree of Injury Serious

Brief Details.

Hi Sir/Madam,

The incident took place at about 10.30pm when i was heading home. I was going straight after passing Caltex Jurong Spring, 100 Jurong West Ave 1 when i hit the side of the car. The road wasn't even congested hence the driver should be able to see my clearly.

I first saw the car hinging out of the carpark from about 10-15 meters away. I slowed down & pressed the horn to warn the driver of my existance when i noticed him/her going passed the stop line. I noticed that the vehicle stopped after the horn & i proceeded to accelerate straight as it was my right of way.

To my horror, the vehicle suddenly moved forward. I managed to hold onto the horn but didn't managed to jam brake as it was super close. I think that was the reason why i flung because i didn't managed to brake at all. I flew & landed on my knee & was in excruciating pain that made me immobilized throughout the ordeal.

My motorbike was in perfect working condition prior, even for the braking system as i had the rear disc brake replaced & had the rear brake pump serviced in early May before the annual inspection so i got no problem applying the brakes.

I'm a defensive style rider/driver & had never had a serious accident like this before.

I didn't had the chance to interview the driver after the accident but i'm guessing the driver is either drunk or using his/her phone when the accident happened.

A witness contacted me & mentioned that he saw the car moving out when it was clearly my right of way.

I really hope justice would be served & hope the driver gets the proper punishment so he/she won't repeat this mistake & endanger people's lives.



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



T/20240704/7009

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Report No. T/20240704/7009

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: 04/07/2024 04:00
Officer In Charge Of Case: TP / DDGVT / JOFILIANO BIN MOHAMED ALI Contact No.: 65476960	Classification Of Case:

NP168