

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 14:26 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	17/06/2024 21:00 (SGT)
Exact Location of Accident	Near 1 Tuas Ave 11, Singapore 639067
Additional Location Information	JUNCTION OF TUAS CRESCENT BY TUAS AVENUE 11. TOWARDS TUAS AVENUE 2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN7237R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LOO SIN HON
NRIC No	S7767339C
Email Address	ALEXLOO3893@GMAIL.COM
Mobile Phone No	(Phone) +65-96635473
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	Xabre
Variant	TFX150
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	150

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5114403043-04

DRIVER

Name of Driver	LOO SIN HON
NRIC No	S7767339C
Date Of Birth	18/01/1977

Occupation	Outdoor
Driving Pass Date	07/01/2006
Driving experience	18 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96635473
Alt. Phone Number	-
Email Address	ALEXLOO3893@GMAIL.COM
Address	1 LORONG 7 TOA PAYOH
Address complement	#07-49
Postcode	310001
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)	2
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	-

PASSENGER 1

Name	MAROUF MOHAMMAD JAGANGIR ALAM
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Toa Payoh Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002519999
Alt. Police Station Phone No	(Fax) +65-63548749
Police Station Address	93 Toa Payoh Central Toa Payoh Community Building #01-02 Singapore 319194
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20240423/2036

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	GBA843E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	LOO SIN HON
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBN7237R
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	MAROUF MOHAMMAD JAGANGIR ALAM
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBN7237R
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.



01072024/1430HRS

Policyholder's Signature / Date & Time

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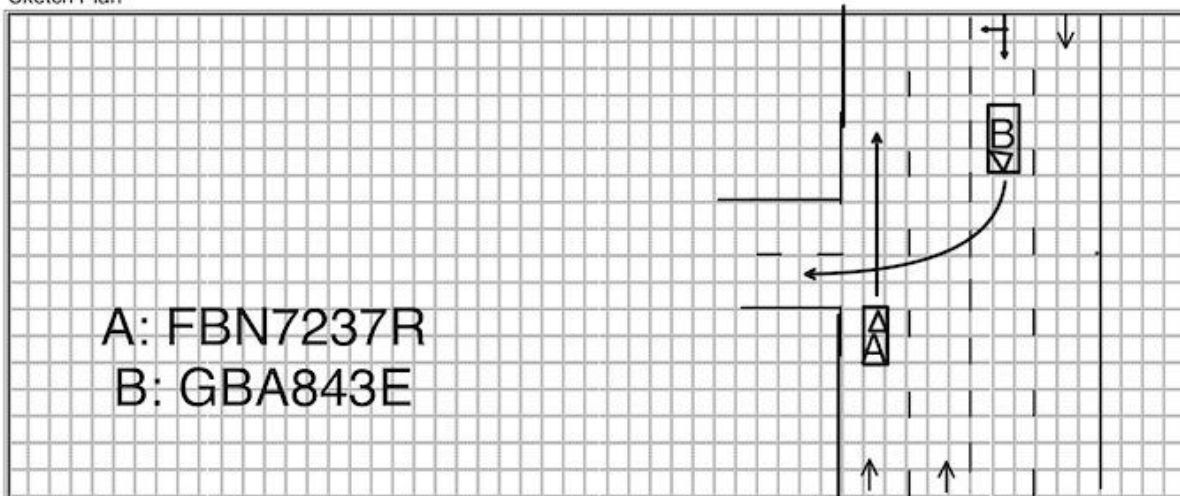
Driver's Signature (if driver is not the policyholder) / Date & Time



MUHAMMAD ZAKI BIN SUPIAN

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

Sketch Plan



2 of 2

Describe Circumstance of the Accident

Declaration

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

01072024/1430HRS

Policyholder's Signature / Date & Time

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

Muhammad Zaki bin Supian

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













SINGAPORE
POLICE FORCE



T/20240423/2036

3 of 3

Report No. T/20240423/2036

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

CONTINUATION OF REPORT

Signature of Officer Recording The
E /
SR STAFF SGT
RAFIAHTOLADAWIAH BINTE
YUSOFF

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SI MOHAMED SOPHIAN BIN MOHAMED AMIR
Contact No.: 91874317

Signature Of Informant:

Date/Time:
23/04/2024 11:34

Classification Of Case:

NP168



**SINGAPORE
POLICE FORCE**



T/20240423/2036

2 of 3

Report No: T/20240423/2036

Police Station Of Origin:
Toa Payoh N.P.C

83 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

CONTINUATION OF REPORT

Passenger			
Name	MAROUF MOHAMMAD JAHANGIR ALAM	ID No.	NIL
Related Vehicle	NIL	Contact No.	85816361
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Rider			
Name	LOO SIN HON	ID No.	S7767339C
Related Vehicle	NIL	Contact No.	96635473
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: 2B.3 Date of Expiry: NIL
Date Treatment	17/04/2024	Date Discharge	18/04/2024
No. of Days granted Medical Leave	14	Degree of	NIL



Brief Details.

I am currently working as Tat Hong Panel Beater. I have been working at Tat Hong Heavy Equipment (Pte) Ltd for about 21 years.

On 17/04/2024, at about 9pm, I was riding my motorbike (registration number: FBN7237R) and ferrying my colleague (Name: Marouf Mohammad Jahangir Alam, HP: +6585816361) heading along Tuas Cres towards Tuas Avenue 2 to alight my colleague at Tuas MRT station. I rode my motorbike on the left lane at about 30km/h.

Suddenly a lorry from the right lane on the opposite traffic making right turn into Tuas Avenue 11. I homed the lorry and tried to brake but I still collided with the left portion of the lorry. I wish to state that the lorry never switched on the signal light.

I am lodging this report for insurance purposes.

 SINGAPORE POLICE FORCE		 T/20240423/2035				
Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999		1 of 3 Report No. T/20240423/2035				
REPORT OF A TRAFFIC ACCIDENT						
Date/Time Report Made: 23/04/2024 11:34		Vide Report No.: T/20240419/2035				
		Station Diary No.: 45				
Informant's Particulars						
Name of Informant: LOO SIN HON		Address: 1 LORONG 7 TOA PAYOH #07-49 SINGAPORE 310001				
ID Type / ID No.: NRIC NO / S7767339C		Contact No.: Home/Office: Mobile: 96635473				
Nationality:		Email:				
Sex: Male	Age: 47	Date of Birth: 18/01/1977	Type of Informant: Rider			
Race: Chinese		Language: English				
Occupation: PANEL BEATER		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: 17/04/2024 21:00			
Type of Location: Straight Road						
Location: TUAS CRESCENT						
Weather: Clear		Road Surface: Dry				
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light			
Type of Collision: Between Moving Vehicles - Head On			Anyone conveyed by ambulance: Yes			
Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
FBN7237R	Motorcycle				Totally Damaged	1
Details of Person Involved						
Any Pedestrian Involved: No						
No. of Pedestrians Injured: NIL				Use of Pedestrian Crossing: NA		



**SINGAPORE
POLICE FORCE**
SAFEGUARDING EVERY DAY

Our Ref: TP/IP/11704/2024

LOO SIN HON
1 LORONG 7 TOA PAYOH
#07-49
Singapore 310001

000013

Traffic Police
10 Ubi Avenue 3
Singapore 408865

IB Call Centre: 65470000
FAX: 65474883

Date: 27/05/2024

Dear Sir

TRAFFIC ACCIDENT INVOLVING FBN7237R & GBA843E ALONG TUAS CRESCENT ON 17/4/24

I refer to the above accident.

2 We have completed our investigation into the case. Action has been initiated against the driver of **GBA843E** for the offence of **driving without reasonable consideration causing hurt under section 65(1)(b) punishable under section 65(4)(a) of the road traffic act 1961.**

3 Please be informed that our decision does not preclude you from pursuing insurance / civil claims.

4 If you have any clarification, you may contact the Investigation Officer, Muhammad Afiq Bin Osman at office number: 96367158.

Yours faithfully,
SI Muhammad Afiq Bin Osman
Investigation Officer (GIT 3)
Traffic Police
Singapore Police Force

This is a computer-generated letter. No signature is required.

A FORCE FOR THE NATION