

## 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 Authorised 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 ability.
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 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 Report	29/11/2017 11:13
Date Of Accident	24/11/2017 18:20
Exact Location Of Accident	OPPOSITE WHEELLOCK PLACE CARPARK A0007
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK4644J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MUHAMMAD FAISAL BIN ISHAK
NRIC No	S9311156G
Email Address	BREAKERS24@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-82007201
Alternative Phone No	OTHERS-82007201

### Vehicle Particulars

Manufacturer	HONDA
Model	CBR1000RR-999CC (M)
Exact Purpose for which vehicle was being used at time of accident	BIKE WAS PARKED
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5087214029
Cover Note Number	

### Driver

Name of Driver	MUHAMMAD FAISAL BIN ISHAK
NRIC No	S9311156G
Date Of Birth	24/03/1993
Occupation	INDOOR
Date Of Driving Pass	21/12/2016
Driving Experience	0 YEAR AND 11 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-82007201
Fax Number	
Contact Number	OTHERS-82007201
Email Address	BREAKERS24@HOTMAIL.COM

Address	BLK 485D CHOA CHU KANG AVENUE 5 #10-142
Postcode	684485
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG SOUTH NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 124 PENDING ROAD , <b>POSTCODE:</b> 670124 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7609999 - <b>FAX NO:</b> 67636614
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20171124/2150

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDM9688R
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	UNKNOWN
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Phone Number 81610104

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number F6454C

Vehicle Make/Model/Colour VESPA

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

## Sketch Plan

### SKETCH PLAN


#### IMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
6. The 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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

  
Policyholder's Signature  
Date & Time: 29/11/17  
10:43am

\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

## Sketch Plan #2

### SKETCH PLAN




### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in blue ink across the lined area: "PLS REPORT TO POLICE DEPT 7/2017/1124/2150".

### DECLARATION

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

  
Policyholder's Signature  
Date & Time: 29/11/17  
10:43am

Signature, Date & Time of Policyholder

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

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

# Sketch Plan #3



**SINGAPORE  
POLICE FORCE**



T/20171124/2150

Police Station Of Origin:  
Bukit Panjang South NPP  
124 Pending Road #01-00 SINGAPORE  
670124  
Tel No: 1800-7609999

1 of 3

Report No. T/20171124/2150

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/11/2017 20:09	Vide Report No.:	Station Diary No.: 77
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### Informant's Particulars

Name of Informant: MUHAMMAD FAISAL BIN ISHAK		Address: APT BLK 485D CHOA CHU KANG AVENUE 5 #10-142 SINGAPORE 684485	
ID Type / ID No.: NRIC NO / S9311156G		Contact No.: Home/Office: Mobile: 82007201	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 24	Date of Birth: 24/03/1993	Type of Informant: Rider
Race: Indian		Language: English	Institution / School Name:
Occupation: PSA CONTAINER HANDLING SPECIALIST		Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:	

### General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/11/2017 18:20	Type of Location: Car Park
Location: Along Road 1 ORCHARD ROAD OPPOSITE WHEELLOCK PLACE CARPARK A0007			
Weather: Raining	Road Surface: Wet	Road Speed Limit:	
Traffic Flow:	Traffic Control:	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
F6454C	Motorcycle	VESPA		Orange		0
FBK4644J	Motorcycle	HONDA	CBR1000RR FIREBLADE	Red	Slightly Damaged	0
SDM9688R	Car	NISSAN		Black		0

### Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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# Sketch Plan #4



**SINGAPORE  
POLICE FORCE**



T/20171124/2150

2 of 3

Police Station Of Origin:  
Bukit Panjang South NPP  
124 Pending Road #01-00 SINGAPORE  
670124  
Tel No: 1800-7609999

Report No. T/20171124/2150

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK4644J	NTUC Income Insurance Co-Operative Limited	5087214029	29/12/2016	25/02/2018

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD FAISAL BIN ISHAK	ID No.	S9311156G
Related Vehicle	FBK4644J (Motorcycle)	Contact No.	82007201
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 24/11/2017 at about 1700hrs, I parked my motorcycle in the carpark on the double yellow line at carpark A0007 (Opposite Wheelock place). There was no other lots, thus I parked my motorcycle there. Everything was intact and normal. On the same day at about 1820hrs, I returned to my motorcycle and discovered that there was scratches on the left side of my fairing and engine guard. There was a note on my motorcycle from a witness namely HP:81610104. He claimed that he saw a car (SDM9688R) knocked onto a motorcycle (F6454C-Vespa). After that, the driver came out and carried the Vespa and the Vespa hit onto my motorcycle. After which, the driver just drove off. I have taken photos of the damages.

Sketch Plan #5



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Bukit Panjang South NPP  
124 Pending Road #01-00 SINGAPORE  
670124  
Tel No: 1800-7609999



T/20171124/2150

3 of 3

Report No. T/20171124/2150

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:  
J /  
Staff Sgt MUHAMMAD FIRDAUS BIN SAHROL

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / HRT /  
Sr Staff Sgt ESTHER CHONG  
Contact No.: 65476368

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
24/11/2017 20:09

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



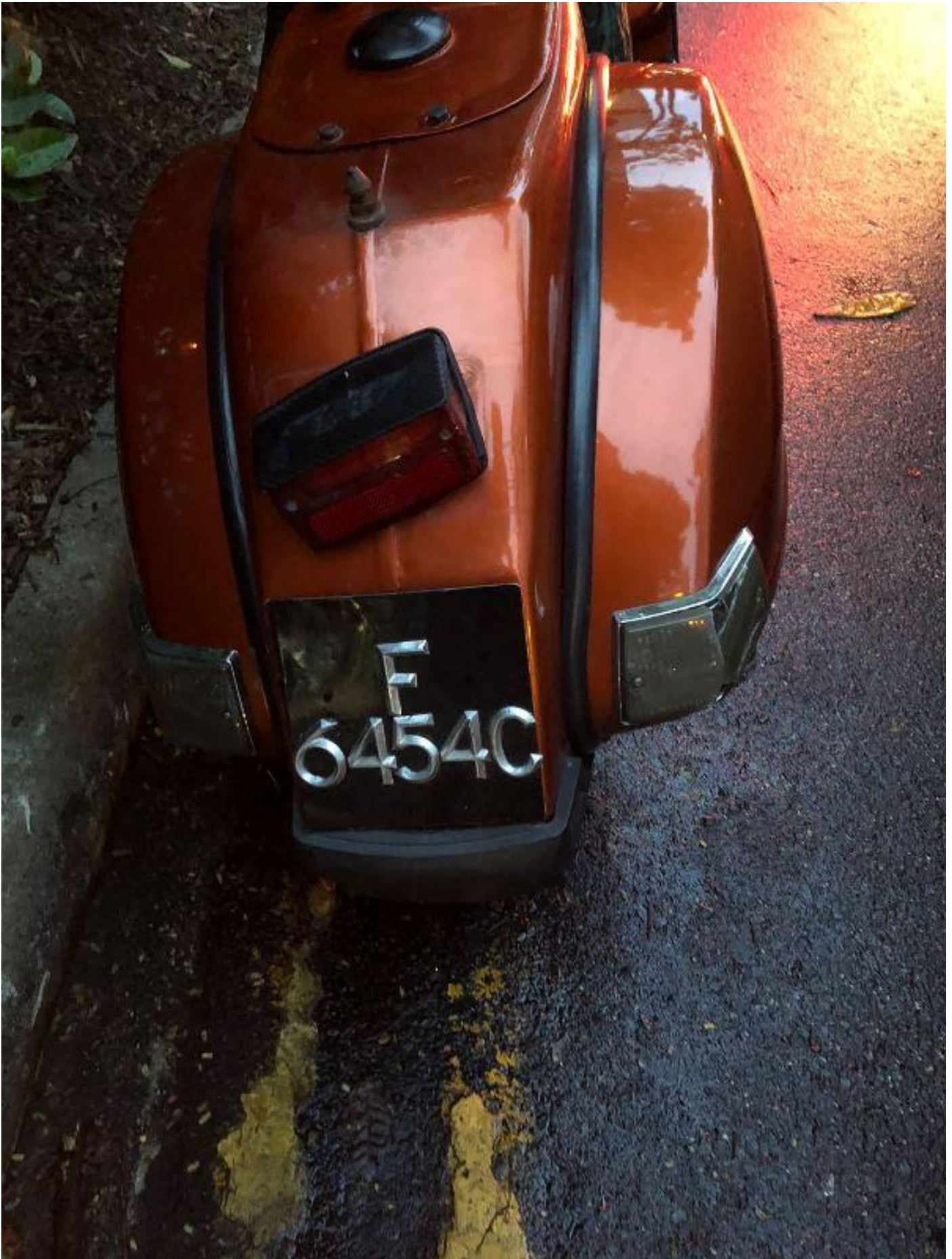
Accident Photo

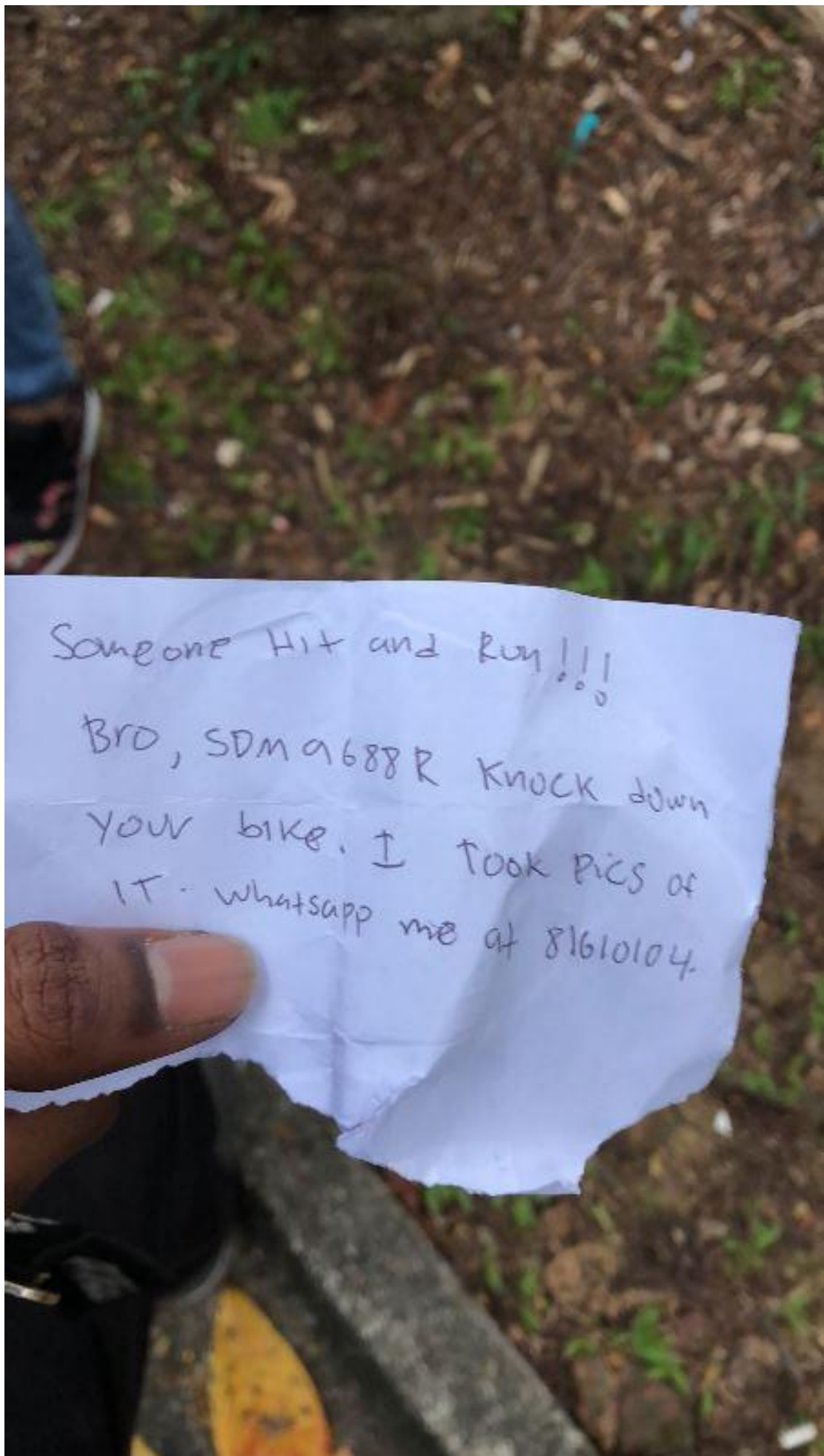


Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



**FULL**  
PARKING LOTS AVAILABLE

**Electronic Parking System  
(Per Minute Charging)**



**Car  
Monday to Saturday**

7am to 11am	\$1.30 per 30 minutes
11am to 5pm	\$1.50 per 30 minutes
5pm to 10.30pm	\$0.80 per 30 minutes
10.30pm to 7am (next day)	\$0.70 per 30 minutes

**Sunday & Public Holiday**

7am to 11am	\$0.70 per 30 minutes
11am to 10.30pm	\$0.80 per 30 minutes
10.30pm to 7am (next day)	\$0.70 per 30 minutes

(For any parking session between 10.30pm and 7am the following day, the maximum parking charge is \$5.65)



**Motorcycle  
Everyday (Including Public Holiday)**

7am to 10.30pm	\$0.10 per 30 minutes (Maximum \$0.65)
10.30pm to 7am (next day)	\$0.10 per 30 minutes (Maximum \$0.65)

**NOTICE**

LHN Parking Pte Ltd ("THE MANAGEMENT") and URA ("THE OWNER") or their agent(s) accept no responsibility for any loss or damage to any vehicle or the fittings or contents of any vehicle parked in this car park, or for any injury or death suffered by any person in this car park, that is not directly resulting from their negligence. Vehicle is parked at the vehicle owner's risk.

This use of this car park is subject to such terms and conditions as may be implemented or supplemented by THE MANAGEMENT or THE OWNER at any time.

Accident Photo



Accident Photo



Accident Photo

