

## 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	27/12/2017 17:03
Date Of Accident	22/12/2017 15:55
Exact Location Of Accident	BKE AFTER MANDAI RD EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FZ2628T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MUHAMMAD JUWAIDI BIN NORIZAN
NRIC No	S9116637B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97346623
Alternative Phone No	OFFICE-97346623

### Vehicle Particulars

Manufacturer	HONDA
Model	CB400SF
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
If No, Please state action to be taken	REPORTING ONLY
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	5069251248-03
Cover Note Number	

### Driver

Name of Driver	MUHAMMAD JUWAIDI BIN NORIZAN
NRIC No	S9116637B
Date Of Birth	17/05/1991
Occupation	INDOOR
Date Of Driving Pass	30/07/2013
Driving Experience	4 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97346623
Fax Number	
Contact Number	OFFICE-97346623
EEmail Address	NOEMAIL

Address	BLK 110 WOODLANDS STREET 13 #06-130
Postcode	730110
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20171225/7008.

#### 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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver) 1

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number FBK8681A  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category MOTORCYCLE  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage

No. Of Passenger (Including Driver) 1

**DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number FH3952U  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category MOTORCYCLE  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage

No. Of Passenger (Including Driver) 1

**DETAILS OF INJURED PERSON 1**

Name MUHAMMAD JUWAIDI BIN NORIZAN  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? FZ2628T  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? YES  
Address  
Postcode

## Accident 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.

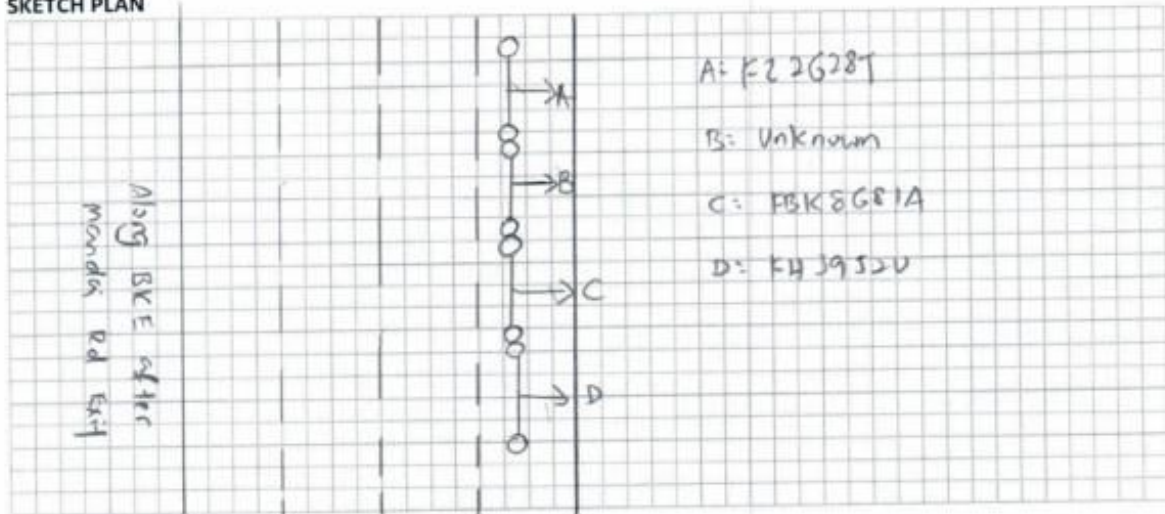
Policyholder's Signature  
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report T/20171225/7008.

DECLARATION

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

*James*  
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

*[Signature]*  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



Police Report



**SINGAPORE  
POLICE FORCE**

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



T/20171225/7008

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Report No. T/20171225/7008

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/12/2017 22:30	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: MUHAMMAD JUWAIDI BIN NORIZAN		Address: APT BLK 110 WOODLANDS STREET 13 #06-130 SINGAPORE 730110	
ID Type / ID No.: NRIC NO / S9116637B		Contact No.:	Mobile: 97346623
Nationality: SINGAPORE CITIZEN		Email: juwaidi_17@hotmail.com	
Sex: Male	Age: 26	Date of Birth: 17/05/1991	Type of Informant: Rider
Race: Malay		Language: English	Institution / School Name:
Occupation: Building technician		Driving Licence Information: Class: 2B,2A,3	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/12/2017 15:55	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY After Mandai Exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: SELF-SKIDDED			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK8681A	Motorcycle				Seriously Damaged	1
FH3952U	Motorcycle				Slightly Damaged	1
FV3---- (Not Accurate)	Motorcycle				Seriously Damaged	1
FZ2628T	Motorcycle	HONDA	CB400SF	Blue	Seriously Damaged	1

Police Report



**SINGAPORE  
POLICE FORCE**



T/20171225/7008

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Report No. T/20171225/7008

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

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JQU9280	Motorcycle			Black	Seriously Damaged	1
SKU5568E	Car				Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FZ2628T	NTUC Income Insurance Co-Operative Limited	5069251248-03	26/11/2017	25/11/2018

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD JUWAIDI BIN NORIZAN	ID No.	S9116637B
Related Vehicle	FZ2628T (Motorcycle)	Contact No.	97346623
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	22/12/2017	Date Discharge	22/12/2017
No. of Days granted Medical Leave	14	Degree of Injury	Slight

Brief Details.

I am the rider of vehicle registration no. FZ2628T.

At about 1555hr while riding back from work at BKE just after mandai exit, I witness a malaysian motorbike bearing plate number JQU9280 lane splitting recklessly between a trailer that is driving at lane 2 and a car (SJK8888) that is driving at lane 1. I was riding at lane 1 & I witness that the motorcycle (JQU9280) loose control due to his left handle bar hit the trailer chassic and cause him to fall in between the trailer and the car. His sudden drop cause me to loose control even though I was about 3 to 4 vehicles away from the said motorcycle. My sudden reaction by applying emergency break to try my best to avoid any collision cause me to skid and fall. 3 other bikes that is also involve in the collision fall as well due to could not react on time. The accident cause me to have abrasions on my knees, right thigh & right palm, arline fractured at my right hand thumb area. I was convey by ambulance to KTPH for futher treatment.

Police Report



**SINGAPORE  
POLICE FORCE**

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



T/20171225/7008

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Report No. T/20171225/7008

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
YEO CHUN JIAN  
Contact No.: 65476213

Authentication Stamp  
NP168

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

Date/Time:  
25/12/2017 22:30

Classification Of Case:



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

