

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 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	24/01/2018 15:00
Date Of Accident	24/01/2018 09:05
Exact Location Of Accident	CLEMENTI AVENUE 6 OPPOSITE MAJU CAMP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	AX6889A
Insured/Policyholder	
Name Of Registered Owner	MOHAMMAD DANIAL BIN AMIR
NRIC No	S9231817F
Email Address	DANNNNN@LIVE.COM.SG
Mobile Phone No	(LOCAL) +65-93801707
Alternative Phone No	OTHERS-93801707

Vehicle Particulars

Manufacturer	YAMAHA
Model	FZ16-153CC (M)
Exact Purpose for which vehicle was being used at time of accident	RIDING TO WORK
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	5077182065-01
Cover Note Number	

Driver

Name of Driver	MOHAMMAD DANIAL BIN AMIR
NRIC No	S9231817F
Date Of Birth	06/09/1992
Occupation	OUTDOOR
Date Of Driving Pass	07/02/2013
Driving Experience	4 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93801707
Fax Number	
Contact Number	OTHERS-93801707
Email Address	DANNNNN@LIVE.COM.SG

Address	BLK 121 BULKIT BATOK CENTRAL #02-437
Postcode	650121
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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)	2
Passenger 1	NAME: : AMIR(FATHER) GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180124/2048

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	FBK3450H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	SIVA
NRIC/Passport Number	S7321226Z
Contact Number	98985211
Address	

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLE6015A
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver DENNIS LAI
NRIC/Passport Number S6970592H
Contact Number 96725746
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name SIVA
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? FBK3450H
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Sketch Plan

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.
- (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: 24/1/18

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

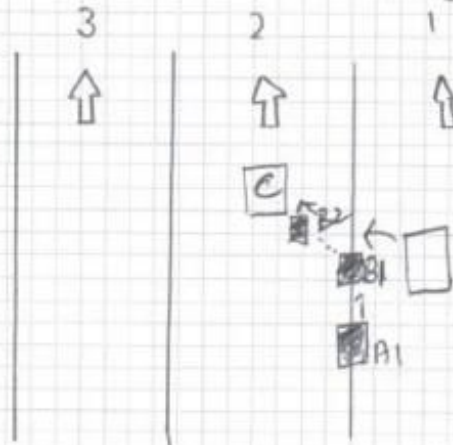

Reporting Centre Personnel's Signature
Name: 24/01/2018
NRIC/FIN No.: REEDY WATHEB

Sketch Plan #2

SKETCH PLAN

CLEMENTI AVENUE 6 (OPPOSITE MAJU CAMP)

- A) AX 6889A
- B) FBK 3450H
- C) SLE 6015A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Referral to Police Report
7/20180124/2018

DECLARATION

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

[Signature] 24/1/18
 Policyholder's Signature
 Date & Time:

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

[Signature] 24/01/2018
 Reporting Centre Personnel's Signature
 Name: *Resli Watab*
 NRIC/FIN No.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180124/2048

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

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Report No. T/20180124/2048

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/01/2018 12:46		Vide Report No.: D/20180124/0035		Station Diary No.: 49	
Informant's Particulars					
Name of Informant: MOHAMMAD DANIAL BIN AMIR			Address: APT BLK 121 BUKIT BATOK CENTRAL #02-437 SINGAPORE 650121		
ID Type / ID No.: NRIC NO / S9231817F			Contact No.: Home/Office: Mobile: 93801707		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 25	Date of Birth: 06/09/1992	Type of Informant: Rider		
Race: Malay			Language: English		Institution / School Name:
Occupation: IT HELPDESK			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: 24/01/2018 09:05	Type of Location: Straight Road
Location: Along Road 1 CLEMENTI AVENUE 6 Opposite MAJU camp				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
AX6889A	Motorcycle	YAMAHA	FZ 16	Red	No Damage	0
FBK3450H	Motorcycle				Slightly Damaged	0
SLE6015A	Car				Slightly Damaged	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/20180124/2048

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Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20180124/2048

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
AX6889A	NTUC Income Insurance Co-Operative Limited	5077182065-01	15/02/2017	14/02/2018

Brief Details.

On the 24/1/2018 at about 0905hrs, I was riding my bike (AX6889A) along Clementi Ave 6 and the traffic was very heavy. The cars all stopped. The motorcycles were riding in between the cars. Out of a sudden, the motorcycle (FBK3450H) suddenly did a jam break just in front of me to avoid a car that abruptly swerved out from the most right lane. I braked but did not have time to react and collided into the rear of the motorcycle's rear. The motorcycle FBK3450H also collided into a car (SLE6015A). The rider namely Siva, S7321226Z, 98985211 fell on the floor and suffered injuries on his hands and private area. He was then conveyed to the hospital by ambulance. The car owner is Denis Lai, S6970592H, 96725746. I was not injured and my vehicle suffered no damages.

Sketch Plan #5



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999



T/20180124/2048

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Report No. T/20180124/2048

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:

D /
Sgt 2 ROGER GOH XIN YAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt IRMAN BIN MOHAMAD SAID
Contact No.: 65476365

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
24/01/2018 12:46

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

