

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	14/03/2018 18:11
Date Of Accident	26/01/2018 19:30
Exact Location Of Accident	ALONG PIE (JURONG) NEAR BUKIT BATOK WCEGA TOWER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBB4561L
Insured/Policyholder	
Name Of Registered Owner	REDUAN BIN ABDULLAH
NRIC No	S9431073C
Email Address	IWANCHUBBY@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93813183
Alternative Phone No	OFFICE-93813183

Vehicle Particulars

Manufacturer	HONDA
Model	CB400
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	EQ INSURANCE COMPANY LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMMPHQ17-000943
Cover Note Number	N.A.

Driver

Name of Driver	REDUAN BIN ABDULLAH
NRIC No	S9431073C
Date Of Birth	31/08/1994
Occupation	INDOOR
Date Of Driving Pass	23/06/2017
Driving Experience	0 YEAR AND 7 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93813183
Fax Number	
Contact Number	OFFICE-93813183
Email Address	IWANCHUBBY@HOTMAIL.COM

Address	NIL
Postcode	
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	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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: : FATIN NADIAH GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NPC
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ON 26/01/2018 AT ABOUT 1920HRS, I WAS RIDING MY MOTORCYCLE; FBB4561L TRAVELLING ON PIE TOWARDS JURONG NEAR BUKIT BATOK WCEGA TOWER WHEN I MET WITH AN ACCIDENT. MY PILLION IS FATIN NADIAH, HP : 97107821. I WAS ON THE EXTREME RIGHT LANE OF THE PIE WHEN A BIG WHITE VEHICLE SWERVED FROM THE 3RD LANE TO MY LANE ON THE EXTREME RIGHT. I WAS TRAVELLING AT A SPEED OF 40KM/H WHEN THE VEHICLE IN FRONT OF ME SWERVED INTO MY LANE AND SUDDENLY JAMMED BRAKE. AS THE VEHICLE SWERVED FROM THE LEFT TO MY LANE, AND SUDDENLY JAMMED BRAKE, I WAS UNABLE TO STOP IN TIME AND COLLIDED WITH THE REAR OF THE VEHICLE. AFTER THE COLLISION, I IMMEDIATELY CHECKED MY PILLION FATIN NADIAH AND CARRIED HER TO THE EXTREME RIGHT ROAD SHOULDER. AFTER WHICH I CHECKED MYSELF FOR MAJOR INJURIES AND SAW THAT I HAVE LOST MY LEFT BIG TOE AND SUFFERED ABRASIONS ON MY LEFT ELBOW. AFTER WHICH I WAS CONVEYED TO NG TENG FONG HOSPITAL, HOWEVER I WAS THEN TRANSFERRED TO TAN TOCK SENG HOSPITAL AS NG TENG FONG DOES NOT DO TOE RECONSTRUCTIVE SURGERY. I WISH TO STATE THAT I WAS NOT INTOXICATED FROM ALCOHOL NOR ANY SUBSTANCES DURING THAT PERIOD OF TIME NOR AT THE TIME OF THE ACCIDENT. I ALSO WISH TO STATE THAT I WAS TRAVELLING AT A SAFE SPEED OF 40 KM/H AND ALSO DUE TO HEAVY TRAFFIC.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB6711
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Vehicle Make/Model/Colour	MERCEDES BENZ/ VIANO
Details Of Properties	NA
Vehicle Category	TAXI
Name of Driver	SABTU BIN SAWAM
NRIC/Passport Number	
Contact Number	NA
Address	NA
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	REDUAN BIN ABDULLAH
Approximate Age	
Injuries Sustain	LOST LEFT BIG TOE AND SUFFERED ABRASIONS ON LEFT ELBOW
Injured person in which vehicle?	FBB4561L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

SKETCH PLAN

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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 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

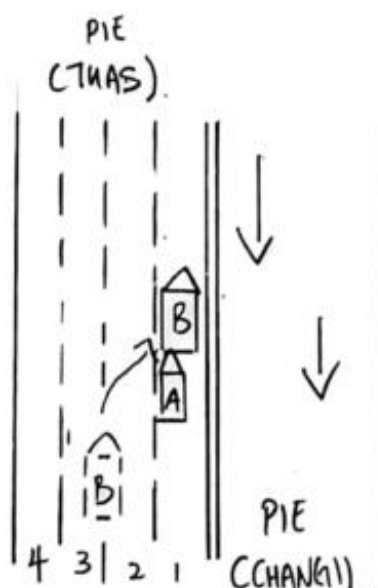
14/05/2019 1500
Policyholder's Signature / Date & Time

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

VERIFIED BY AJAX MARS
REPORTING OFFICER
EUGENE KOH

Witnessed by Reporting Centre
Personnel

Sketch Plan



ALONG PIE (JURONG)
NEAR BUKIT BATOK,
WCEGA TOWER.

A) FBB 4561 L
B) SHB 6711 L

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20180206/2117

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Report No. T/20180206/2117

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/02/2018 16:20		Vide Report No.:		Station Diary No.: 107	
Informant's Particulars					
Name of Informant: REDUAN BIN ABDULLAH			Address: APT BLK 560A JURONG WEST STREET 42 #05-1111 SINGAPORE 641560		
ID Type / ID No.: NRIC NO / S9431073C			Contact No.: Home/Office: Mobile: 93813183		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 23	Date of Birth: 31/08/1994	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: Registered nurse			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 26/01/2018 19:30	Type of Location: EXPRESSWAY
Location: Along Road 1 PAN ISLAND EXPRESSWAY TOWARDS JURONG NEAR BUKIT BATOK WCEGA TOWER				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit: 90 Km/h
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
FBB4561L	Motorcycle	HONDA	CB400	Black	Seriously Damaged	0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
FBB4561L	EQ INSURANCE COMPANY LTD.	DMMPHQ17- 000943	16/12/2017	15/12/2018	

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180206/2117

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20180206/2117

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	REDUAN BIN ABDULLAH	ID No.	S9431073C
Related Vehicle	FBB4561L (Motorcycle)	Contact No.	93813183
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2A Date of Expiry: NIL
Date Treatment	26/01/2018	Date Discharge	29/01/2018
No. of Days granted Medical Leave	18	Degree of Injury	Serious
Pillion			
Name	FATIN NADIAH	ID No.	NIL
Related Vehicle	NIL	Contact No.	97107821
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 26/01/2018 at about 1920hrs, I was riding my motorcycle; FBB4561L travelling on PIE towards Jurong near Bukit Batok Wcega Tower when I met with an accident. My pillion is Fatin Nadiah, HP: 97107821. I was on the extreme right lane of the PIE when a big white vehicle swerved from the 3rd lane to my lane on the extreme right.

I was travelling at a speed of 40km/h when the vehicle in front of me swerved into my lane and suddenly jammed brake. As the vehicle swerved from the left to my lane, and suddenly jammed brake, I was unable to stop in time and collided with the rear of the vehicle.

After the collision, I immediately checked my pillion, Fatin Nadiah and carried her to the extreme right road shoulder. After which I checked myself for major injuries and saw that I have lost my left big toe and suffered abrasions on my left elbow. After which I was conveyed to Ng Teng Fong Hospital, however I was then transferred to Tan Tock Seng Hospital as Ng Teng Fong does not do toe reconstructive surgery.

I wish to state that I was not intoxicated from alcohol nor any substances during that period of time nor at the time of the accident. I also wish to state that I was travelling at a safe speed of 40km/h, and also due to heavy traffic.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180206/2117

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20180206/2117

CONTINUATION OF REPORT

POLICE REPORT



**SINGAPORE
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Police Station Of Origin:
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700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20180206/2117

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Report No. T/20180206/2117

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/
Sgt 2 CHIANG WEI TONG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SI THABAGESH JEYATHESH
Contact No.: 65476232

Signature Of Informant:

Date/Time:
06/02/2018 16:20

Classification Of Case:

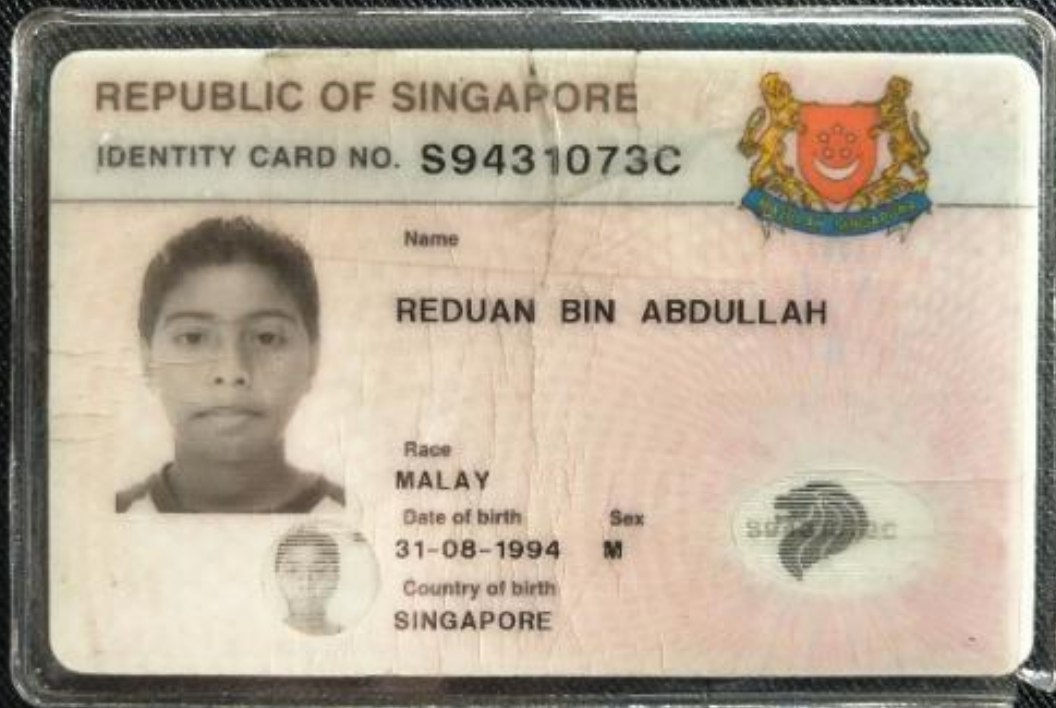
Authentication Stamp

NP168

SN 126

Singapore Police Force

Identification Card



Identification Card



Driving License



Driving License

