

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	13/02/2018 12:09
Date Of Accident	12/02/2018 14:00
Exact Location Of Accident	ALONG UPPER CHANGI ROAD EAST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBJ7250Y
Insured/Policyholder	
Name Of Registered Owner	ZAHARIN BIN ALI
NRIC No	S7307668D
Email Address	ZAHARINALI81@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-91540811
Alternative Phone No	OTHERS-91540811

Vehicle Particulars

Manufacturer	YAMAHA
Model	JUPITER MX-134CC HC
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	5067744339-03
Cover Note Number	

Driver

Name of Driver	ZAHARIN BIN ALI
NRIC No	S7307668D
Date Of Birth	25/02/1973
Occupation	OUTDOOR
Date Of Driving Pass	03/04/2006
Driving Experience	11 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91540811
Fax Number	
Contact Number	OTHERS-91540811
Email Address	ZAHARINALI81@YAHOO.COM.SG

Address:	BLK 370 JURONG EAST STREET 32 #08-366
Postcode	600371
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	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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	WC1875Y
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	GANESHAN RAMACHANDRAN
NRIC/Passport Number	F7834697M
Contact Number	81865543
Address:	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1


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.

 13/2/18

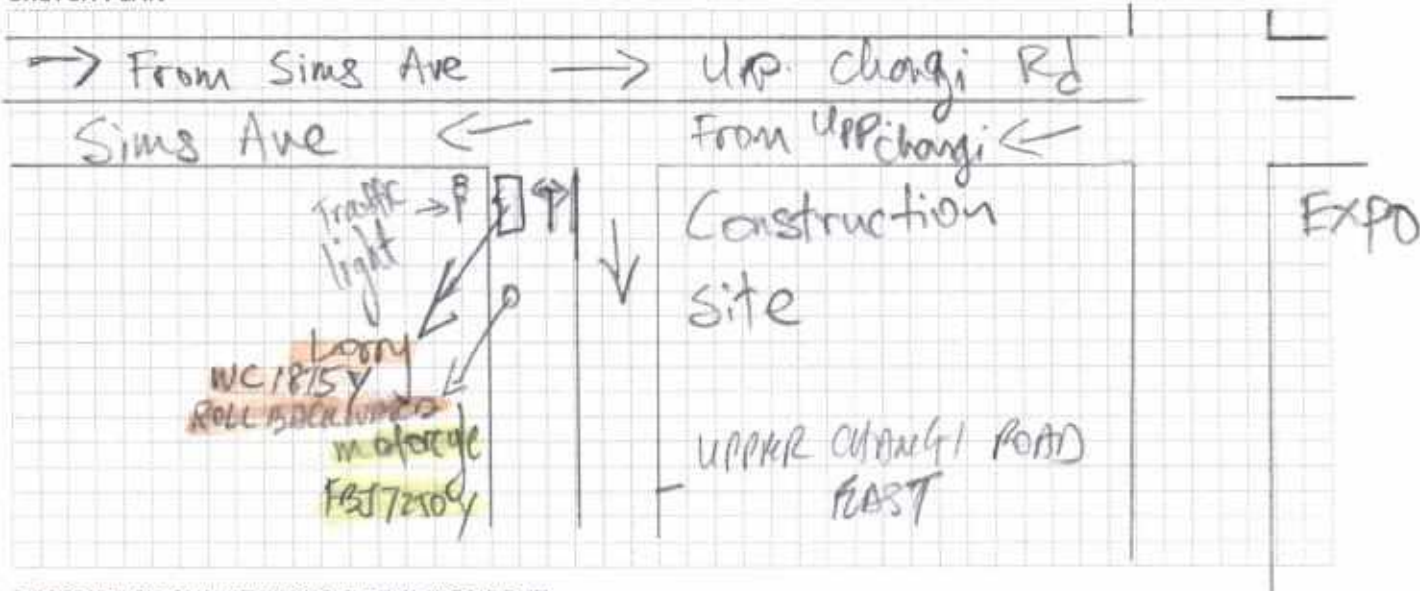
Policyholder's Signature
Date & Time:

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

 13/02/2018

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On Monday, 12/2/2018 at 1400 hrs, I waited behind a construction lorry as the traffic light was red. I gave a one car length away from the lorry. Then somehow the lorry started to move backward gradually. I started to move back as fast as possible but since I was riding a motorcycle, so ~~it~~ I was not fast enough. The right lane was empty and before I was able to switch to the right lane, it was too late. The back of the lorry hit the front of my bike.

I asked the driver whether he put the hand brake and he said yes but if he put the hand brake the lorry would not move backward in such a way. Then he said while waiting for the light to be green, he was eating. The lorry plate number is WC1875Y and my motorcycle number is FBJ 7250Y. The weather was clear during the accident and the road was dry.

DECLARATION

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

[Signature] 13/2/18

Policyholder's Signature
Date & Time:

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

[Signature] 13/02/2018
Reporting Centre Personnel's Signature
Name: *Roshan WABAB*
NRIC/FIN No.:

Claim Handling

Accident MT/0982161

Policy No.	5067744339-03	Vehicle No.	FBJ7250Y	GST Registration No.	
Policyholder Name	ZAHARIN BIN ALI			Policyholder NRIC	
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	
Contact No.(Mobile)	91540811	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	No

Accident Details

Report Date	13/02/2018 12:30	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head
Date of Accident	12/02/2018	Time of Accident hh:mm	14:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG UPPER CHANGI ROAD EAST				

Benefits

Excess

Own Damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 371 #08-366	Address 2	JURONG EAST STREET 32	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5067744339-03		

OI Driver Info

Driver Name	ZAHARIN BIN ALI	Driver Type	Main Driver	Driver DOB	
Unnamed driver Name		Driver NRIC	S7307568D	Driving Experience	
Register Date of Driver License	03/04/2006	Driver Age	44	Contact No.(Home)	
Contact No.(Mobile)	91540811	Contact No.(Office)		Address 3	
Address 1	BLK 371 #08-366	Address 2	JURONG EAST STREET 32	Post Code	
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.	FBJ7250Y	Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	ZAHARIN BIN ALI	Insured NRIC	
Contact No.(Mobile)	91540811	Contact No.(Home)	64810292	Contact No.(Office)	
Email Address	zaharinali81@yahoo.com.sg	OI Vehicle Number	FBJ7250Y	TP Vehicle Number	
Claim Description	FBJ7250Y / WC1875Y ON 12 Feb 2018				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	
Date Registered	13/02/2018 12:32	Claim Close Date			
Report Taken By	ROSLI WAHAB				
<input checked="" type="checkbox"/> Print AK letter					

Save Submit
















Attachment

Accident No.	MT/0982161	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	13/02/2018 12:34
Path *		Category *	Confidential
			Urgency
			Normal

Browse Clear Please Select

<input type="button" value="Browse"/>	<input type="button" value="Clear"/>	Please Select	▼	N/A	▼	Normal
<input type="button" value="Browse"/>	<input type="button" value="Clear"/>	Please Select	▼	N/A	▼	Normal
<input type="button" value="Browse"/>	<input type="button" value="Clear"/>	Please Select	▼	100	▼	Normal
<input type="button" value="Browse"/>	<input type="button" value="Clear"/>	Please Select	▼	100	▼	Normal
<input type="button" value="Browse"/>	<input type="button" value="Clear"/>	Please Select	▼	N/A	▼	Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	De
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 13 Feb 2018 12:34	NREC/ Driving License	Normal	NRIC/ Driving
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 13 Feb 2018 12:34	SAS	Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 13 Feb 2018 12:33	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 13 Feb 2018 12:33	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 13 Feb 2018 12:33	Photos	Normal	Photo
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 13 Feb 2018 12:32	Photos	Normal	Photo

Video List

Uploaded By/Date	Folder Date	File Name	Sort
		<input type="button" value="Display in New Window"/>	<input type="button" value="Scan and uploading"/>

ACCIDENT STATEMENT

ACCIDENT DATE: 12 / 02 / 2018 (DD/MM/YYYY), TIME: 14 : 00 (HH:MM)

LOCATION: Upper Changi Rd. East

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBJ7250Y
 b) INSURANCE COMPANY: NTUC INCOME
 c) POLICY NUMBER: 5067744339-03
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: YAMAHA JUPITER MX 135
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: WORK
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES / NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: ZAHARIN BIN ALI (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S7303668D CONTACT: 91540811
 c) ADDRESS: BLK 371, JURONG EAST ST. 32, #08-366
SINGAPORE 600371

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* d) DATE OF BIRTH: 25 / 02 / 1973 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR) 3/4/2006

f) DATE OF DRIVING PASS: 3/4/2006

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. c) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: WC1875Y MODEL: LORRY

b) DRIVER'S NAME: GANESAN RAMACHANDRAN

c) NRIC/FIN/PASSPORT: F7834697M CONTACT: 81865543

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____

e) DRIVER'S NAME: _____

f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email: zaharinali81@yahoo.com.sg

fax: _____

V1080

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7307668D



Name
ZAHARIN BIN ALI


زهارين بن علي

Race
MALAY

Date of birth
25-02-1973

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S7307668D

Name
ZAHARIN BIN ALI

Birth Date 25 Feb 1973

Issue Date 03 Apr 2006



4931418



NRIC No. S7307668D

Date of issue
01-02-2013

Address
APT BLK 371 JURONG EAST STREET 32
#08-366
SINGAPORE 600371

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIFIED

CLASS DATE
03 Apr 2006

Class 2B Motorcycles < 200 cc



NP 428A

License No: S7307668D



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5067744339-03

Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle

: FB17250Y

Chassis Number

: MH350C004EK709232

2. Name of Policyholder

: ZAHARIN BIN ALI

3. Effective Date of Insurance

: 24 Sep 2017

4. Expiry Date of Insurance

: 23 Sep 2018

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: ZAHARIN BIN ALI
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: SPEEDWAY MOTOR PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : AXIS LINK PTE LTD (00000614757)

Date of Issue : 23 Aug 2017 10:37 hrs

Reprint : 23 Aug 2017 10:37 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive