

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	22/02/2018 18:22
Date Of Accident	20/02/2018 18:50
Exact Location Of Accident	JUNCTION OF BOON TAT STREET/CECIL STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FZ2052D
Insured/Policyholder	
Name Of Registered Owner	AHMAD HIDAYAT BIN AHMAD SANAWA
NRIC No	S9001338F
Email Address	NORSYAKINAHMADHIDAYAT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96269764
Alternative Phone No	OTHERS-96269764

Vehicle Particulars

Manufacturer	KAWASAKI
Model	KRR ZX150 M-149CC (M)
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	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5084700984-01
Cover Note Number	

Driver

Name of Driver	AHMAD HIDAYAT BIN AHMAD SANAWA
NRIC No	S9001338F
Date Of Birth	16/01/1990
Occupation	OUTDOOR
Date Of Driving Pass	14/10/2008
Driving Experience	9 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96269764
Fax Number	
Contact Number	OTHERS-96269764
EEmail Address	NORSYAKINAHMADHIDAYAT@GMAIL.COM

Address	BLK 956 HOUGANG STREET 91 #02-296
Postcode	530956
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 - OPENING DOOR OF VEHICLE
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX BLOCK A , POSTCODE: 088762 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2369999 - FAX NO: 62268438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180221/2086

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	SKP4739L
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ZHENG ZHIGUANG
NRIC/Passport Number	S8403673J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver) 2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKC186B

Vehicle Make/Model/Colour HONDA

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 2

Sketch Plan

SKETCH PLAN

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 liability**.
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. 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:

22/2/18 4:23

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

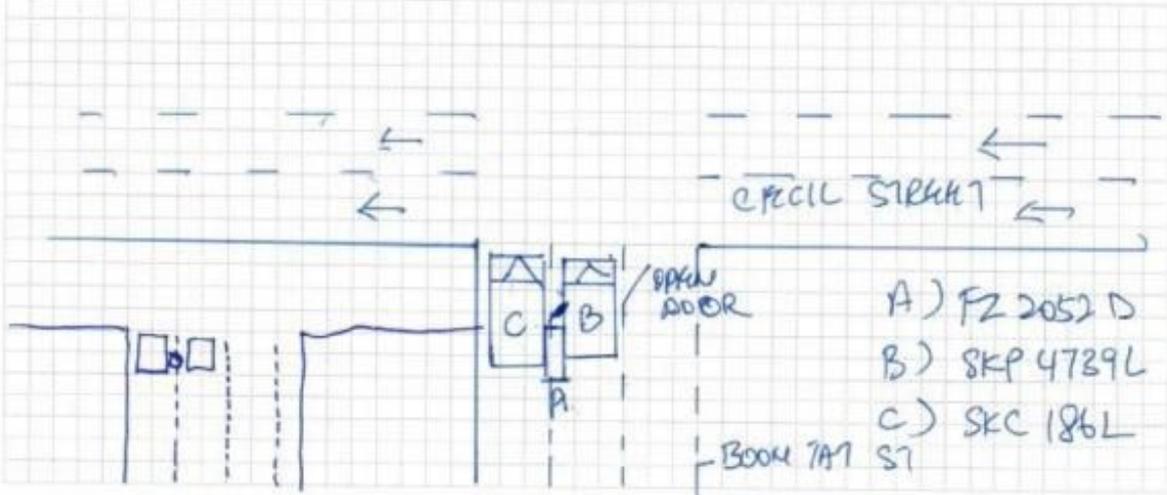
Name:

NRIC/FIN No.:

22/02/2018
Resli Wattoob

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*pls refer to police report
 7/2018021/2018*

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time: 22/2/18 14:23

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

[Signature] 22/02/2018
 Reporting Centre Personnel's Signature
 Name: Kelly Kothas
 NRIC/FIN No.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180221/2086

1 of 4

Report No. T/20180221/2086

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/02/2018 14:02	Vide Report No.:	Station Diary No.: 84
--	------------------	--------------------------

Informant's Particulars			
Name of Informant: AHMAD HIDAYAT BIN AHMAD SANAWA		Address: APT BLK 956 HOUGANG STREET 91 #02-296 SINGAPORE 530956	
ID Type / ID No.: NRIC NO / S9001338F		Contact No.: Home/Office:	Mobile: 96269764
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 28	Date of Birth: 16/01/1990	Type of Informant: Rider
Race: Boyanese		Language: English	Institution / School Name:
Occupation: DELIVEROO RIDER		Driving Licence Information: Class: 2B	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 20/02/2018 18:50	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 BOON TAT STREET CECIL STREET Junction of Boon Tat Street and Cecil Street				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Moving vehicle with vehicle door			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FZ2052D	Motorcycle	KAWASAKI	KRR ZX150 M	Green	Slightly Damaged	0
SKC186B	Car	HONDA		Purple	No Damage	1
SKP4739L	Car	HONDA		Silver	No Damage	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180221/2086

2 of 4

Report No. T/20180221/2086

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FZ2052D	NTUC Income Insurance Co-Operative Limited	5084700984-01	03/10/2017	02/10/2018

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	AHMAD HIDAYAT BIN AHMAD SANAWA		ID No.	S9001338F
Related Vehicle	FZ2052D (Motorcycle)		Contact No.	96269764
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	20/02/2018	Date Discharge	20/02/2018	
No. of Days granted Medical Leave	07	Degree of Injury	Slight	
Driver				
Name	ZHENG ZHIGUANG		ID No.	S8403673J
Related Vehicle	SKP4739L (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

On 20th February 2018, I was riding my own bike bearing registration number FZ2052D while at work at around 6.50pm to 7pm, picking up food from Far East Square to send to AXA Tower when I met with an accident. I travelled along Telok Ayer Street as I turn in to Boon Tat Street towards Cecil Street, I was riding in between the 2nd and third lane. As I was approaching the junction of Boon Tat and Cecil. There were one(1) car each on the 2nd and 3rd lane as I was approaching the junction. Suddenly the door of the Honda car which was on the 2nd lane bearing registration plate number SKP4739L, opens. I last saw a Chinese lady behind the said door. I was unable to react as I was already very close and I hit straight onto the vehicle door and subsequently I flung to the left then to the ground. I do not remember if I hit the car on the 3rd lane. I remembered both drivers of the two vehicles came out to make a check on me. The other vehicle was a Honda bearing registration plate number SKC186B.

Ambulance later came and I was conveyed to the hospital after I exchanged particulars with the driver of SKP4739L. I vomited twice in the ambulance after the accident. I only know that my motorbike left lever was broken. I have not checked if there are more damages to my motorbike. In hospital, I went through a

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20180221/2086

3 of 4

Report No. T/20180221/2086

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

CONTINUATION OF REPORT

series of scans, x-rays and MRI. I vomited while in A&E and I suffered some cuts on my knees and I was discharged with a neck brace on my neck. I was also given seven(7) days of Hospitalization Leave.

I did not have any camera attached to my motorbike and helmet. I am lodging this report for traffic to look into this matter.

Sketch Plan #6



SINGAPORE
POLICE FORCE



T/20180221/2086

4 of 4

Report No. T/20180221/2086

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

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:
A /
Staff Sgt NURSALIHA BINTE SAHAWAT

Signature Of Informant:

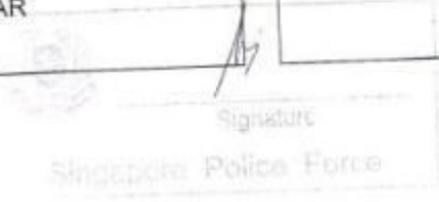
Signature Of Interpreter:
Not applicable

Date/Time:
21/02/2018 14:02

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt RAZIZ BIN TAHAR
Contact No.: 65476200

Classification Of Case:

Authentication Stamp
NP168



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

