

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	05/03/2018 19:13
Date Of Accident	28/02/2018 18:30
Exact Location Of Accident	ALONG PUNGGOL RD OUTSIDE SHELL PETROL KIOSK EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FU629E
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD RIZEHAN BIN ABDUL GANI
NRIC No	S9746263A
Email Address	ANTONIO97557@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90147200
Alternative Phone No	OTHERS-90147200

Vehicle Particulars

Manufacturer	KAWASAKI
Model	KRR ZX150-148CC (M)
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	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	5095263643
Cover Note Number	

Driver

Name of Driver	MUHAMMAD RIZEHAN BIN ABDUL GANI
NRIC No	S9746263A
Date Of Birth	31/12/1997
Occupation	INDOOR
Date Of Driving Pass	13/10/2016
Driving Experience	1 YEAR AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90147200
Fax Number	
Contact Number	OTHERS-90147200
Email Address	ANTONIO97557@GMAIL.COM

Address	BLK 672B EDGEFIELD PLAINS #10-549
Postcode	822672
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?	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	PUNGGOL N.P.C
Police Station Address	ROAD: 21A TEBING LANE , POSTCODE: 828837 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180301/2021

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	SHC836T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	CHENG TIANG KWANG
NRIC/Passport Number	S1228348B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	MUHAMMAD RIZEHAN BIN ABDUL GANI
Approximate Age	
Injuries Sustain	SERIOUS INJURY
Injured person in which vehicle?	FU629E
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.

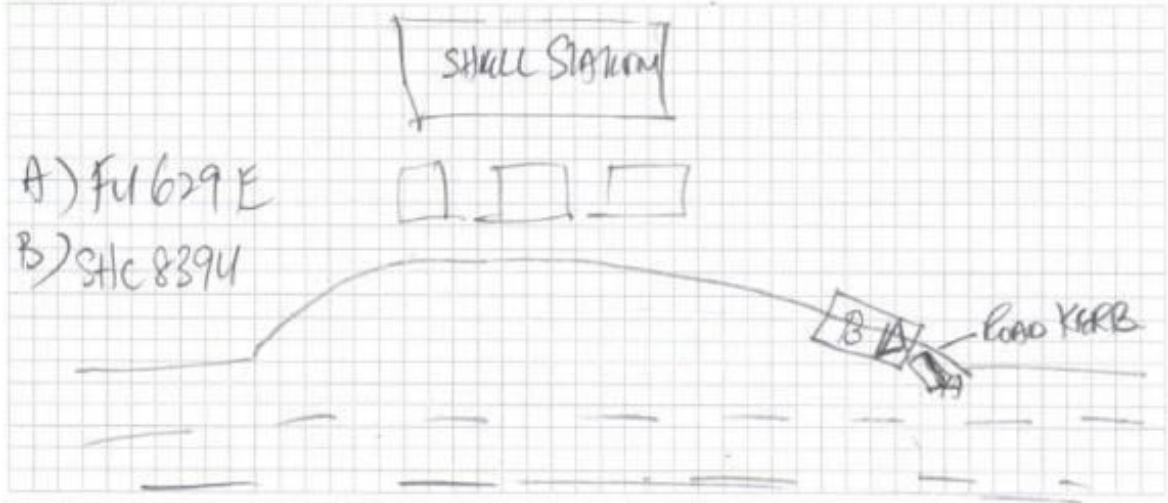
 05/03/18
Policyholder's Signature
Date & Time:

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

 05/03/2018
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text across the grid area: "PLS REFER TO POLICE REPORT" and "T/".

DECLARATION

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

05/03/18

Policyholder's Signature
Date & Time:

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

05/03/2018
Reporting Centre Personnel's Signature
Name: [Signature]
NRIC/FIN No.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180301/2021

Police Station Of Origin:
Punggol N.P.C.
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

1 of 3

Report No. T/20180301/2021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/03/2018 10:06	Vide Report No.: F/20180228/0177	Station Diary No.: 26
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Informant's Particulars

Name of Informant: MUHAMMAD RIZEHAN BIN ABDUL GANI			Address: APT BLK 672B EDGEFIELD PLAINS #10-549 SINGAPORE 822672	
ID Type / ID No.: NRIC NO / S9746263A			Contact No.: Home/Office: Mobile: 90147200	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 20	Date of Birth: 31/12/1997	Type of Informant: Rider	
Race: Boyanese			Language: English	Institution / School Name:
Occupation: SAF NSF			Driving Licence Information: Class: 2B Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/02/2018 18:30	Type of Location: Bend
Location: Along Road 1 PUNGGOL ROAD				
Along Punggol Road outside of Shell Petrol kiosk exit				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow:	Traffic Control: Not Controlled	Traffic Volume: Heavy		
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FU629E	Motorcycle	KAWASAKI	KRRZX150	Silver		0
SHC836U	Car					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FU629E	NTUC Income Insurance Co-Operative Limited	5095263643	26/10/2017	25/10/2018

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180301/2021

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

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Report No. T/20180301/2021

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD RIZEHAN BIN ABDUL GANI	ID No.	S9746263A
Related Vehicle	FU629E (Motorcycle)	Contact No.	90147200
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	07	Degree of Injury	Serious
Driver			
Name	Cheng Tiang Kwang	ID No.	S1228348B
Related Vehicle	SHC836U (Car)	Contact No.	NIL
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 28/02/2018 at about 1830hrs, I was at Shell Petrol Kiosk along Punggol Road riding my motorcycle FU629E. While I was about to exit Shell petrol kiosk, there was vehicle on the main road along Punggol Road, as such I came to a stop at the exit of Shell Petrol kiosk.

While I was stopping at the exit of Shell Petrol kiosk, I suddenly felt an impact from the rear and fell to the ground. I was conscious at that time, I turned back and look and noticed that there was a Citycab Taxi bearing registration plate number SHC836U which was behind my motorcycle which had mounted a kerb and hit onto my motorcycle. The taxi uncle only came to me saying sorry but did not help me call for an ambulance or help me get up.

Traffic Police and Ambulance was also at scene. I was then conveyed by ambulance to CGH and was given 7 days of medical leave. I suffered pain on the lower back area, left side of my body. The injuries caused me to be unable to walk properly.

Sketch Plan #5



SINGAPORE
POLICE FORCE



T/20180301/2021

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

3 of 3

Report No. T/20180301/2021

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:

F /

Sgt 2 LIM JIN YEOW, BENNY

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

01/03/2018 10:06

Officer In Charge Of Case:

TP / GIT /

Sgt 3 RASHIDAH BINTE AZMAN

Contact No.: 65476216

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



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