

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 | 06/03/2018 11:56 |
| Date Of Accident | 03/03/2018 18:30 |
| Exact Location Of Accident | ALONG TAMPINES RD TOWARDS UPP SERANGOON RD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-----------------------|
| Vehicle Registration Number | FBD1400C |
| Insured/Policyholder | |
| Name Of Registered Owner | ALORIDE PTE. LTD. |
| Co Reg No | 201629994W |
| Email Address | FYECASPER08@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-91159411 |
| Alternative Phone No | OFFICE-91159411 |

Vehicle Particulars

| | |
|--|----------------------|
| Manufacturer | YAMAHA |
| Model | NOUVO ELEGANCE-133CC |
| 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 | REPORTING ONLY |
| 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 | 5085645204-01 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------------|
| Name of Driver | MUHAMMAD FIRDAUS BIN HASSAN |
| NRIC No | S9726707C |
| Date Of Birth | 08/08/1997 |
| Occupation | INDOOR |
| Date Of Driving Pass | 08/05/2017 |
| Driving Experience | 0 YEAR AND 9 MONTH |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-91159411 |
| Fax Number | |
| Contact Number | OTHERS-91159411 |
| EEmail Address | FYECASPER08@GMAIL.COM |

| | |
|---|-------------------------------------|
| Address | BLK 403 YISHUN AVENUE 6 #10-1212 |
| Postcode | 760403 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OTHER - HIRER |
| 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? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | MACPHERSON NEIGHBOURHOOD POLICE POST |
| Police Station Address | ROAD: BLK 54 PIPIT ROAD #01-82/84 , POSTCODE: 370054 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-7449999 - FAX NO: 65476366 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180305/2130

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 | SLN8760X |
| Vehicle Make/Model/Colour | TOYOTA HARRIER |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | JONATHAN LIM |
| NRIC/Passport Number | S7243655E |
| Contact Number | 98783840 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |

No. Of Passenger (Including Driver)

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 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.

X

Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time:
6 March 2018
12:11:12 AM


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

Sketch Plan #2

SKETCH PLAN

Alumni Temporal Co Temporal UPP Sekoulboom Co

TAMPINES Road

4A

FBD 1400 C

5760X

Stopped at traffic light

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

DECLARATION

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

Policyholder's Signature _____

Date & Time:

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

6 March 2018
11:17 AM

Reporting Centre Personnel's Signature

Name: _____

NRIC/FIN No. :

06/03/2018

Personnel's Signature *Rashad Hunter*

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180305/2130

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

1 of 3

Report No. T/20180305/2130

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 05/03/2018 18:19 | Vide Report No.: | Station Diary No.: 56 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | |
|--|--|------------------------------|-----------------------------|
| Name of Informant: MUHAMMAD FIRDAUS BIN HASSAN | Address: APT BLK 403 YISHUN AVENUE 6 #10-1212 SINGAPORE 760403 | | |
| ID Type / ID No.: NRIC NO / S9726707C | Contact No.: Home/Office: Mobile: 91159411 | | |
| Nationality: SINGAPORE CITIZEN | Email: | | |
| Sex: Male | Age: 20 | Date of Birth: 08/08/1997 | Type of Informant: Rider |
| Race: Malay | Language: English | | Institution / School Name: |
| Occupation: Part Time Car Washer | Driving Licence Information: Class: 2B,3 Date of Expiry: | | |

General Information of the Accident

| | | | | |
|--|---|--------------------|--|------------------------------------|
| Type of Accident: | Non-Injury Others | Drink Drive: No | Date/Time of Accident: 03/03/2018 18:30 | Type of Location: Straight Road |
| Location: Along Road 1 TAMPINES ROAD | | | | |
| <u>Along Tampines Road towards Upper Serangoon Road, before Hougang Ave 3 Cross Junction</u> | | | | |
| Weather: Clear | Road Surface: Dry | | Road Speed Limit: | |
| Traffic Flow: One Way | Traffic Control: Traffic Light - Working | | Traffic Volume: Moderate | |
| 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 |
|-------------|------------|------|-------|-------|------------------|-----------------|
| FBD1400C | Motorcycle | | | | Slightly Damaged | 0 |
| SLN8760X | Car | | | | Slightly Damaged | 0 |

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180305/2130

2 of 3

Report No. T/20180305/2130

Police Station Of Origin:

MacPherson NPP

54 Pipit Road #01-82/84 SINGAPORE

370054

Tel No: 1800-7449999

CONTINUATION OF REPORT

Brief Details.

On the 03/03/2018 at about 1830hrs, I was riding on my bike(FBD1400C) along Tampines Road towards Upper Serangoon Road. When approaching the Cross Junction of Tampines Road and Hougang Ave 3, I saw one car(SLN8760X) stopping at the Traffic Light Junction. I then applied brake but was unable to stop in time. My bike then hit onto the car's rear. The car suffered slight dent and scratches on the rear bumper and my bike suffered slight damage on the front.

Sketch Plan #5



SINGAPORE
POLICE FORCE



T/20180305/2130

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

3 of 3

Report No. T/20180305/2130

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:
G /
Sgt 2 LEE WEI LUN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
05/03/2018 18:19

Officer In Charge Of Case:

TP / GIA /

Staff Sgt TANG SIEW PING

Contact No.: 65476430

Classification Of Case:

Authentication Stamp
NP168



SINGAPORE
POLICE FORCE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

