

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	15/03/2018 14:53
Date Of Accident	14/03/2018 19:30
Exact Location Of Accident	ALONG BIDEFORD ROAD TOWARDS ORCHARD ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK7267U
Insured/Policyholder	
Name Of Registered Owner	NURUL HIDAYAH BINTE SHAFIE
NRIC No	S9609396I
Email Address	HZQVLL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94251657
Alternative Phone No	OTHERS-97835263

Vehicle Particulars

Manufacturer	YAMAHA
Model	FZN150-149CC
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5076879569-02
Cover Note Number	

Driver

Name of Driver	AHMAD HAZIQ BIN SHAFIE
NRIC No	S9924546H
Date Of Birth	06/08/1999
Occupation	INDOOR
Date Of Driving Pass	23/02/2018
Driving Experience	0 YEAR AND 0 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-94251657
Fax Number	
Contact Number	OTHERS-97835263
EMail Address	HZQVLL@GMAIL.COM

Address	BLK 5 TIONG BAHRU ROAD #01-14
Postcode	162005
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
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)	2
Passenger 1	NAME: : FRIEND GENDER: : FEMALE

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	SDE248D
Vehicle Make/Model/Colour	B.M.W
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MICHAEL ARI SUMARTA
NRIC/Passport Number	S7377669D
Contact Number	97891827
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.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 15/03/2018

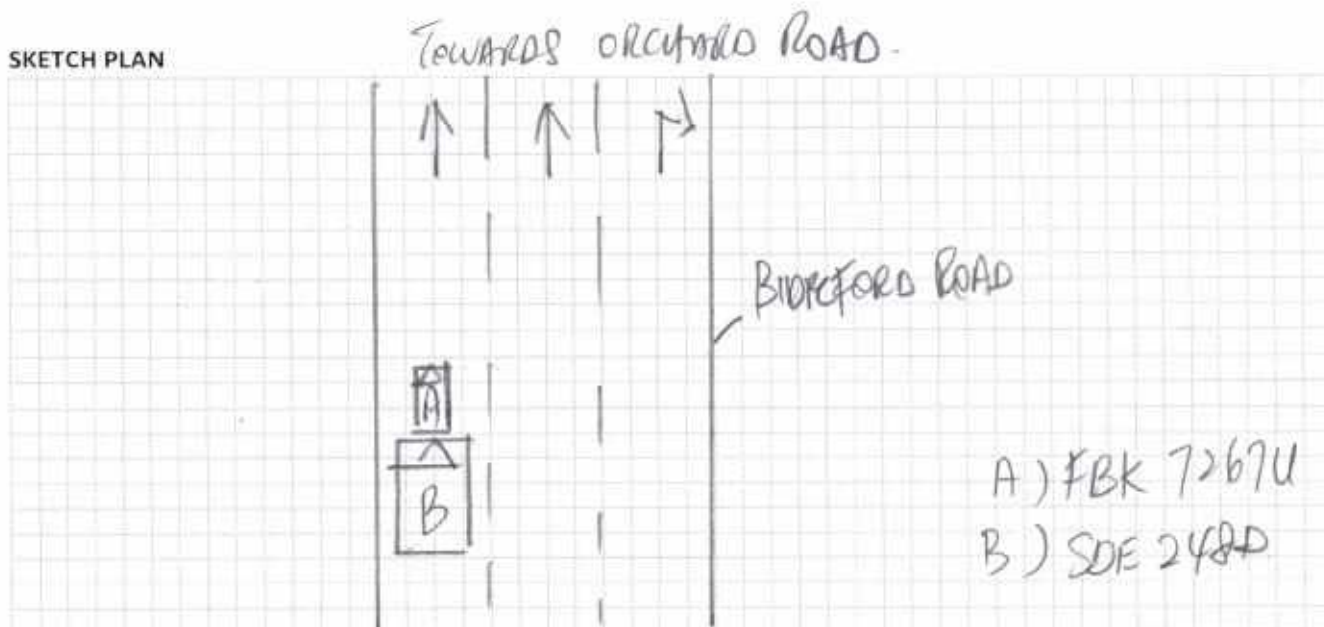
2:30 pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was looking at the side mirror to make a lane change.

I was hit by a BMW car before I make a lane change.

I was moving slow at that time.

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: 15/03/2018

2:40 pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

15/03/2018

Rosa A/HOB

Claim Handling

Accident MT/0986171

Policy No.	5076879569-02	Vehicle No.	FBK7267U	GST Registration No.	
Policyholder Name	NURUL HIDAYAH BINTI SHAFIE	Cover Type	Third Party, Fire & Theft	Policyholder NRIC	
Product Code	MOTORCYCLE INSURANCE	Contact No.(Office)		Loading	
Contact No.(Mobile)	94251657	Special Remarks		Contact No.(Home)	
Email Address		TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode	
KFK	<input type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	15	eCode Reason	
NCD Protection	No	Private Hire	No		

Accident Details

Report Date	15/03/2018 15:51	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head
Date of Accident	14/03/2018	Time of Accident hh:mm	18:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG BIDEFORD ROAD TOWARDS ORCHARD ROAD				

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 5 #01-14	Address 2	TJONG BAHRU ROAD	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5076879569-02		

OI Driver Info

Driver Name	AHMAD HAZIQ BIN SHAFIE	Driver Type	Named Driver	Driver DOB	
Unnamed driver Name		Driver NRIC	59924548H	Driving Experience	
Register Date of Driver License	23/02/2018	Driver Age	18	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.		Driver Vehicle No.	FBK7267U	Driver Insurer Company	
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No				

Declaration

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

Claim 001 **New**

Claim Type *	OG-MX	Insured Name	NURUL HIDAYAH BINTI SHAFIE	Insured NRIC	
Contact No.(Mobile)	94251657	Contact No.(Home)		Contact No.(Office)	
Email Address	hidayah95@hotmail.com	Of Vehicle Number	FBK7267U	TP Vehicle Number	
Claim Description	FBK7267U / SD6248D ON 14 Mar 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 Reserved	
Date Registered	15/03/2018 15:53	Claim Close Date			
Report Taken By	ROSLI WAHAB				

☐ Print AK letter

Save Submit

Attachment

Accident No.	MT/0986171	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	15/03/2018 15:54
Path *		Category *	Confidential Urgency
		Browse... Clear	Please Select

Browse...	Clear	Please Select	▼	NO	→	Normal
Browse...	Clear	Please Select	▼	NO	→	Normal
Browse...	Clear	Please Select	▼	NO	→	Normal
Browse...	Clear	Please Select	▼	NO	→	Normal
Browse...	Clear	Please Select	▼	NO	→	Normal

[Upload Video](#)

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	De
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 15 Mar 2018 15:54	SAS	Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 15 Mar 2018 15:54	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 15 Mar 2018 15:53	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 15 Mar 2018 15:53	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 15 Mar 2018 15:53	Photos	Normal	Photo
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 15 Mar 2018 15:53	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 15 Mar 2018 15:53	Photos	Normal	Photo

Video List

Uploaded By/Date	Folder Date	File Name	Source
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[Display in New Window](#)

[Scan and uploading](#)

ACCIDENT STATEMENT

ACCIDENT DATE: 14/03/2018 (DD/MM/YYYY), TIME: 19.30 (HH:MM)

LOCATION: BIDEFORD ROAD TOWARDS ORCHARD ROAD

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBK 7267.U
 b) INSURANCE COMPANY: MMU
 c) POLICY NUMBER: 5076879569-02
 d) POLICY TYPE: ☒ COMPREHENSIVE / ☐ THIRD PARTY / ☐ THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: 70
 f) TYPE: ☐ SALOON / ☐ COUPE / ☐ MPV / ☐ VAN / ☐ LORRY / ☐ MOTORCYCLE / ☐ OTHERS
 g) VEHICLE CATEGORY: ☐ PRIVATE / ☐ COMMERCIAL / ☐ MOTORCYCLE
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 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: Nurul Hidayah Bte Shafie (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 5992454611 CONTACT: 94251657
 c) ADDRESS: BK 5, Tiong Bahru Rd, #01-14

PRIVILEGE (4)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

4/ No of passengers
(including driver)
(2)

- DRIVER
 a) NAME: Ahmad Haziq Bin Shafie (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 5992454611 CONTACT: 97835263
 c) ADDRESS: BK 5, Tiong Bahru Rd #01-14

* d) DATE OF BIRTH: 06/08/1999 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 23/02/2018

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

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

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

6. WAS ANYBODY INJURED (YES / NO)

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

- IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

4/ No of passengers
(including driver)
(1)

- a) VEHICLE NUMBER: SDF 2480 MODEL: BMW

- b) DRIVER'S NAME: Michael Ari Sumarta

- c) NRIC/FIN/PASSPORT: 57377669D CONTACT: 97891827

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____

- b) DRIVER'S NAME: _____ CONTACT: _____

- c) NRIC/FIN/PASSPORT: _____

4/ No of passengers
(including driver)
()

Email: h2gull@gmail.com

Fax: _____

Video _____

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9924546H



Name

AHMAD HAZIQ BIN SHAFIE

Race

JAVANESE

Date of birth

06-08-1999

Country/Place of birth

SINGAPORE

Sex

M

REPUBLIC OF SINGAPORE DRIVING LICENCE

S9924546H



AHMAD HAZIQ BIN SHAFIE

Date of issue: 06 Aug 1999

Issue Date: 23 Feb 2018



0002776368G

5263984



NRIC No. S9924546H



Date of issue

29-01-2014

APT BLK 5 TIONG BAHRU ROAD #01-14
SINGAPORE 182005

NRIC No: S9924546H

Date: 04/07/2017

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2B Motorcycles <= 200 cc

EFFECTIVE DATE

23 Feb 2018

NP 428A



Licence No: S9924546H

eBaoTech

General Claim

Hello, NAC_BUKIT_MERAH_800676

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident

Vehicle No. (For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5076879569-02	HIDAYAH BINTE SHAFIE	S96093961	GMC	Third Party, Fire & Theft	FBK7267U	FBK7267U	09/01/2018	08/01/2019