

1501441039257

Date In: 28/03/2018 18:20
 Ref No: N/A/2018005416/Y
 Veh No: FX 8531 J
 D.O.A: 14/03/2018 21:50
 OD: TP / Reporting Only

Job description	Date & Time Completed	Done by
SAS e-filing		
E-mail (with 131000)		
1-Motor Claim Form	M71098 7270	28/03/2018 J.H.
1-Motor VVO (with 131000)		
1-Photo Uploaded		
Assessment/Survey Report		
Ass'l Report by Fax/Hand to Owner/Whse		

TP Insurec:
 Preferred Wksp / INC Assgn Wksp / OW: ()
 TP Particulars: Yeh No: SGW 3156 K, INC () / Non-INC ()
 Owner / Driver: ()
 Policy No: () Period: () Cover Type: ()
 Confirmed by: () Date: ()
 Insured/Driver Liability: () % (Note: Est. Status (WO): NI 0-20%; P: 21-79%; P: 80-100%)
 Year of Registration: () Warranty: YES () / NO ()
 Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:
 () Walk-In Customer: Customers Information strictly Confidential & Strictly NO refer of reporter.
 () Total Loss Case: to e-mail Insurer URGENTLY.
 Drive-In () / Towed-In () / Invoice: YES () / NO () / Towing Co: ()

Remarks	Date & Time Completed	Done by
1) Apply for Transition Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Recovery Photo (Repair Cost > \$3000) ()		

Injury: _____
 Date/Time: _____
 Action: _____

Human's Particulars	Invoice Preparation Checklist	Amount	Remarks
Driver/Owner:	1) ARI Accident Reporting (300)	300	
Contact No:	2) DA - Damage Assessment (3100)	3100	INC (549)
Assessed Portion:	3) TP - Towing Fee	340/141	
C. Checked by (Ongr-In-Charge):	4) PT - Follow Through Survey	330	
Comments:	5) RT - Follow Through Survey (Recovery)	330	
	6) TR - Re-inspection	335	
	7) NI - DA + SMRT Survey	3160	
	8) NTUC Additional Services		
	9) Q11		
	10) NI - Courtesy Car / Tpl Allowance	33	
	11) NI - Repair Coordination	310	
	12) NI - Post Repair Inspection	335	
	13) NI - DY / Collision/Unass Coordination	33	
	14) NI - TP (Non-INC) against INC	330	
	15) NI - Issue Invoils	10	
	Invoice dated	Per Charge	
	Invoice Paid	How Charged	

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	22/03/2018 18:20
Date Of Accident	14/03/2018 21:50
Exact Location Of Accident	JUNCTION OF SENGKANG EAST WAY/SENGKANG EAST RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FX8531J
Insured/Policyholder	
Name Of Registered Owner	DANI AZARRI TAY BIN HARDI
NRIC No	S9644091Z
Email Address	DANITEH14@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81218003
Alternative Phone No	OTHERS-81218003

Vehicle Particulars

Manufacturer	YAMAHA
Model	RXZ135-133CC (M)
Exact Purpose for which vehicle was being used at time of accident	TRAVELLING HOME
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	5097897941
Cover Note Number	

Driver

Name of Driver	DANI AZARRI TAY BIN HARDI
NRIC No	S9644091Z
Date Of Birth	03/12/1996
Occupation	OUTDOOR
Date Of Driving Pass	25/01/2018
Driving Experience	0 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81218003
Fax Number	
Contact Number	OTHERS-81218003
EMail Address	DANITEH14@GMAIL.COM

Address	BLK 580 HOUGANG AVENUE 4 #04-628
Postcode	530580
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 - U-TURN
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	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180315/2100

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	SGW3156K
Vehicle Make/Model/Colour	
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)

DETAILS OF INJURED PERSON 1

Name	DANI AZARRI TAY BIN HARDI
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FX8531J
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was on my way back along Sengkang Fast Way, travelling @ a speed of about ~~40~~ 50-60 km/h. It was green light on my side when a car suddenly inch forward to second lane to make a u-turn suddenly. I was shocked and proceeded to avoid by moving to the 3rd lane. The car inched further to the 3rd lane making a wide u-turn and I had no reaction time and was forced to hit the front of his car bearing plate number SGW 3156 K

POLICE REPORT 7/20180315/2100

DECLARATION

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

Javitary

Policyholder's Signature

Date & Time: 22-March-2018

1730hrs.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

[Signature] 22/03/2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

[Signature]



Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20180315/2100

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/03/2018 15:15	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: DANI AZARRI TAY BIN HARDI		Address: 580 HOUGANG AVE 4 #04-628 HDB-HOUGANG SINGAPORE 530580	
ID Type / ID No.: NRIC NO / S9644091Z		Contact No.:	Mobile: 81218003
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 21	Date of Birth: 03/12/1996	Type of Informant: Rider
Race: Chinese		Language:	Institution / School Name:
Occupation: Student		Driving Licence Information: Class: 2B,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 14/03/2018 21:50	Type of Location:
Location: Junction of Road 1 and Road 2 SENGKANG EAST ROAD SENGKANG EAST WAY Sengkang Community Center				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FX8531J	Motorcycle	YAMAHA	RXZ			0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Passenger			
Name	DANI AZARRI TAY BIN HARDI	ID No.	S9644091Z
Related Vehicle	FX8531J (Motorcycle)	Contact No.	81218003
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	14/03/2018	Date Discharge	15/03/2018
No. of Days granted Medical Leave	07	Degree of Injury	NIL

Brief Details.

On the 15/03/2018 at about 2155 to 2200 hrs I was traveling along Sengkang east road outside Sengkang Community Center where I met an accident with a car. I was traveling along the 2nd lane of the road towards Buangkok Green, when another vehicle traveling from Sengkang East Road towards Punggol tried to make a U-turn to my direction in a diagonal way into lane 3 and the head of his vehicle was already on the 2nd lane, as traffic light was green in my favour I tried to avoid collision by steering to the left side of the road but he inch out more and I hit onto his vehicle. The head of my Motorbike collided onto his front bumper of the car.



**SINGAPORE
POLICE FORCE**



T/20180315/2100

3 of 3

Report No. T/20180315/2100

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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: TP / SEBASTIAN NG JING PEI
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIT / SI NG CHWEE THENG Contact No.: 65476397

Authentication Stamp
NP168

Signature Of Informant:
Date/Time: 15/03/2018 15:15
Classification Of Case:
Signature:

Claim Handling

Accident MT/0987270

Policy No.	5097897941	Vehicle No.	FX8531J	GST Registration No.	
Policyholder Name	DANI AZARRI TAY BIN HARDI	Cover Type	Third Party	Policyholder NRIC	
Product Code	MOTORCYCLE INSURANCE	Contact No.(Office)		Loading	
Contact No.(Mobile)	81218003	Special Remark		Contact No.(Home)	
Email Address		TGA	<input type="radio"/> No <input type="radio"/> Yes	eCode	
KFK	<input type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No	Private Hire		No	

Accident Details

Report Date	22/03/2018 18:43	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Major
Date of Accident	14/03/2018	Time of Accident (hh:mm)	21:50	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNCTION OF SENGKANG EAST WAY/SENGKANG EAST RD				

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 580 #04-62B	Address 2	HOUGANG AVENUE 4	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	04-62B	Related Policy Number	5097897941		

OI Driver Info

Driver Name	Dani Azarri Tay Bin Hardi	Driver Type	Main Driver	Driver DOB	
Unnamed driver Name		Driver NRIC	595440912	Driving Experience	
Register Date of Driver License	01/01/2018	Driver Age	21	Contact No.(Home)	
Contact No.(Mobile)	81218003	Contact No.(Office)		Address 1	
Address 1	BLK 580 #04-62B	Address 2	HOUGANG AVENUE 4	Address 2	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	04-62B	Driver Vehicle No.	FX8531J	Driver Insurer Company	
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input type="radio"/>				

Declaration

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

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	DANI AZARRI TAY BIN HARDI	Insured NRIC	
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	
Email Address		OJ Vehicle Number	FX8531J	TP Vehicle Number	
Claim Description	FX8531J / SGW3156K 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 Received	
Date Registered	22/03/2018 18:45	Claim Close Date			
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/0987270	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	22/03/2018 18:48
Path *		Category *	Confidential Urgency
		Browse Clear	Please Select



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Mar 2018 18:46

Photos

Normal

Photo



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Mar 2018 18:46

Photos

Normal

Photo



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Mar 2018 18:46

Photos

Normal

Photo



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Mar 2018 18:45

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Normal

SAS



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Mar 2018 18:45

NRIC/ Driving License

Normal

NRIC/ Driving

Video List

Uploaded By/Date

Folder Date

File Name



Source

Display in New Window

Scan and uploading

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9644091Z



Name

DANI AZARRI TAY BIN
HARDI

Race

CHINESE

Date of birth

03-12-1996

Sex

M

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9644091Z

Name

DANI AZARRI TAY BIN HARDI

Birth Date: 03 Dec 1996

Issue Date: 19 May 2016



002569087J



4709622

NRIC No. S9644091Z



Date of issue

15-04-2011

Address

APT BLK 580 HOUGANG AVENUE 4
#04-52B
SINGAPORE 530580

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

CI

EFFECTIVE DATE

Class 2B

Motorcycles \leq 200 CC

25 Jan 2016

Class 3

Motor cars \leq 3000 kg with \leq 7 passengers, exclusive of the driver; and motor tractors/vehicles \leq 2500 kg

19 Mar 2016

S9644091Z

S / No. 9000277640

NP 428A



Licence No. S9644091Z

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 : 5097897941	Cover : Third Party
1. Index mark and Registration Number of Vehicle	: FX8531J
Chassis Number	: PMY5PV1000006711
2. Name of Policyholder	: DANI AZARRI TAY BIN HARDI
3. Effective Date of Insurance	: 03 Feb 2018
4. Expiry Date of Insurance	: 02 Feb 2019
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
INSURE WITH COE	: N/A
NAMED DRIVER (1)	: DANI AZARRI TAY BIN HARDI
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : **DIRECT BUSINESS DEPT (00000600280)**
 Date of Issue : **03 Feb 2018 09:24 hrs**

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive