

MVA318055807 / VAC - Kaki Bukit
ENTRY DATE & TIME: 28/04/2018 12:03
SUBMITTED BY: SITI PADHLON BTE ABDUL KADER

Your NCD will be affected due to late reporting
Actual e-Filing Submission Date & Time: 28/04/2018 12:14

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 28/04/2018 12:03
Date Of Accident 03/04/2018 08:40
Exact Location Of Accident KAKI BUKIT AVE 1
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number FP521H
Insured/Policyholder
Name Of Registered Owner MUHAMMAD FAIZUL BIN AHMAT JAAFAR
NRIC No S8936654B
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-87782041
Alternative Phone No OTHERS-87782041

Vehicle Particulars

Manufacturer YAMAHA
Model RXZ
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 5092194589
Cover Note Number

Driver

Name of Driver HAFEEZ BIN ABDUL LATIP
NRIC No S9805088D
Date Of Birth 20/02/1998
Occupation INDOOR
Date Of Driving Pass 25/09/2017
Driving Experience 0 YEAR AND 6 MONTH
Gender MALE
Mobile Number (LOCAL) +65-83823144
Fax Number
Contact Number OTHERS-83823144
Email Address NOEMAIL

Address BLK 170 BEDOK SOUTH ROAD #06-362
Postcode 460170
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured RELATIVE
Vehicle Registration Number of Driver's Own Vehicle -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident SIDE SWIPE
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 TANAH MERAH NEIGHBOURHOOD POLICE POST
Police Station Address ROAD: BLK 51 NEW UPPER CHANGI ROAD #01-1514 , POSTCODE: 461051 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: 1800-4499999 - FAX NO: 62447251
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

AS PER POLICE REPORT No. T/201840404/2181.

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 SHD7093U
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category TAXI
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	HAFEEZ BIN ABDUL LATIP
Approximate Age	20
Injuries Sustain	
Injured person in which vehicle?	FP521H
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	
Address	BLK 170 BEDOK SOUTH ROAD #06-362
Postcode	460170

28-04-18;12:06 ;

3/ 10


Accident Sketch Plan Pg. 1

SKETCH PLANIMPORTANT NOTICE

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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.

28 APR 2018

Policyholder's Signature
Date & Time:

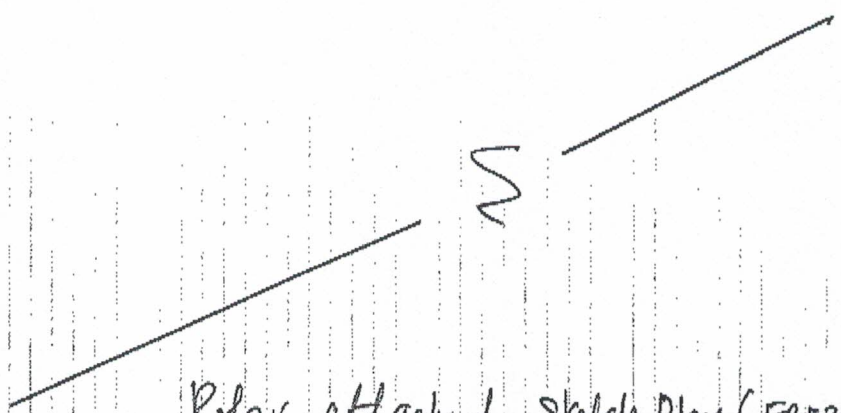

Driver's Signature
(If driver is not the policyholder)
Date & Time: 28/4/18

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@singnet.com.sg

Accident Sketch Plan Pg. 1

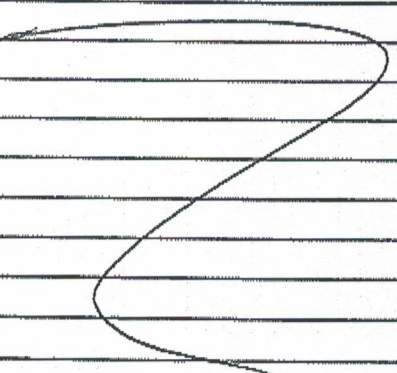
SKETCH PLAN



Refer attached Sketch Plan (FP5244)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer
Police Report



DECLARATION

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

28 APR 2018

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

28/4/18

IDAC KAKI BUKIT (VAC)

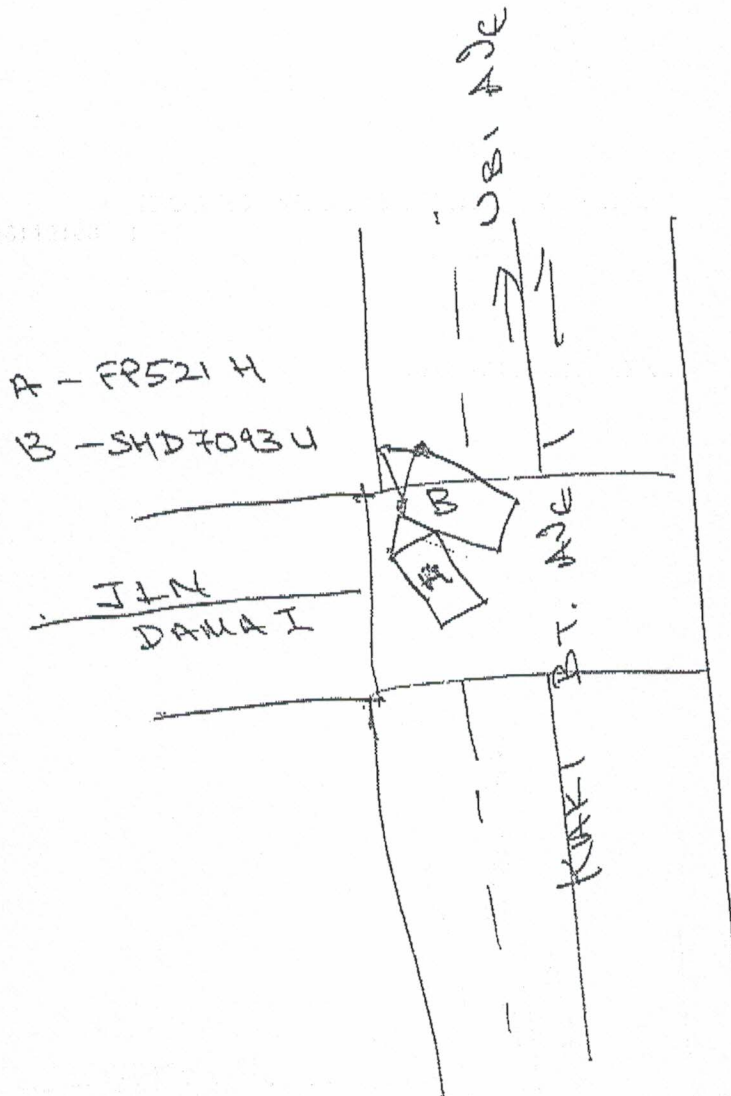
23 Kaki Bukit Ave 4

Reporting Centre Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vackb@singnet.com.sg

Accident Sketch Plan Pg. 1



28-04-18;12:06 ;

7/ 10



**SINGAPORE
POLICE FORCE**

Accident Sketch Plan Pg. 1



160160402781

Police Station Of Origin:

Tanah Merah NPP
51 New Upper Changi Road #01-1514
SINGAPORE 461051
Tel No: 1800 4499999

1 of 3
Report No: 122804047181

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:		04/04/2018 21:03		Video Report No.:		G72018040300077		Station Diary No.:		63					
Name of Informant:				Address:											
HAFEEZ BIN ABDUL LATIF				APT BLK 17D BEDOK SOUTH ROAD #06-362 SINGAPORE 460170											
ID Type / ID No.:				NRIC NO / S8805086D				Contact No.:				Mobile: 83823144			
Nationality:				SINGAPORE CITIZEN				Email:							
Sex:		Age:		Date of Birth:		Type of Informant:		Language:		Institution / School Name:					
Male		20		2002/1598		Rider									
Race:		Boynese		Occupation:		National Service Full Time		Driving Licence Information:		Date of Expiry:					

Type of Accident:		Injury Conveyed By Ambulance		Date/Time of Accident:		03/04/2018 08:40		Type of Location:		X-Junction	
Location: Along Road 1 KAM BUKIT AVENUE 1											
Weather:				Road Surface:				Road Speed Limit:			
Sunny				Dry							
Traffic Flow:				Traffic Control:				Traffic Volume:			
								Moderate			
Type of Collision:				Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance:			
								No			

Vehicle No.		Make		Model		Colour		Damage		No of Passengers	
FP321H	Motorcycle							Seriously Damaged	0		
SHD7093U	Car							Seriously Damaged	1		

28-04-18;12:06 ;

8/ 10

Accident Sketch Plan Pg. 1



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Tampin Meriah NPP
51 New Upper Chang Road #01-1514
SINGAPORE 461651
Tel No: 1800-4499999

CONTINUATION OF REPORT



7201804062181

2 of 3

Report No. T201804062181

Brief Details:

On 03/04/2018 at 0840hrs, my vehicle (P321H) was traveling along kaji buid ave 1 toward Ubi ave 1 and up ahead there is a X-Junction when I spotted a taxi (SH07093U) at the X-Junction make a illegal U-turn which cover both lanes that cause me to brake and hit against the side of the vehicle door and subsequently I was convey to CGH and there was traffic police also at the scene

28-04-18;12:06 ;

Accident Sketch Plan Pg. 1

**SINGAPORE
POLICE FORCE**

T/20180404/2181

Police Station Of Origin:
Tanah Merah NPP
51 New Upper Changi Road #01-1514
SINGAPORE 481051
Tel No: 1800-4499999

3 of 3

Report No. T/20180404/2181

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 TAN XIN XUE

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt. MOHAMMAD ZULKARNIAN BIN

SAV/SINGAPORE POLICE FORCE

Contact No.: 65476429

Authentication Stamp

NP168

SIGNATURE

Signature Of Informant:

Date/Time:

04/04/2018 21:03

Classification Of Case: