Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 18/04/2018 16:34

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 witholding 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	11/04/2018 09:39
Date Of Accident	30/03/2018 21:45
Exact Location Of Accident	KEPPEL ROAD TOWARDS MCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK9112U

Insured/Policyholder

Name Of Registered Owner	MOHAMMED YASHIN BIN ABDUL RASHID
NRIC No	S8308592D
Email Address	YASHIN.M.R@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90239004
Alternative Phone No	OTHERS-90239004

Vehicle Particulars

Manufacturer	KTM
Model	1290 SUPERDUKE R-1.3
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	PNMC2017-00000429
Cover Note Number	

Driver

Name of Driver	MOHAMMED YASHIN BIN ABDUL RASHID
NRIC No	S8308592D
Date Of Birth	07/03/1983
Occupation	INDOOR
Date Of Driving Pass	02/03/2010
Driving Experience	8 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90239004
Fax Number	
Contact Number	OTHERS-90239004
EMail Address	YASHIN.M.R@GMAIL.COM

Address	BLK 139 BEDOK RESERVOIR ROAD #04-1493
Postcode	470139
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)	2
Passenger 1	NAME: : JEANIE HO GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	KRETA AYER NEIGHBOURHOOD POLICE POST
Police Station Address	**ROAD**: 32 NORTH CANAL ROAD , **POSTCODE:** 059282 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO**: 1800-5359999 - **FAX NO**: 62362541
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180410/2017

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	ES933Z
Vehicle Make/Model/Colour	TOYOTA ALPHARD
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE CHIANG HOCK
NRIC/Passport Number	S0187379B
Contact Number	92700906
Address	

Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name	MOHAMMED YASHIN BIN ABDUL RASHID
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBK9112U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	JEANIE HO
Approximate Age	
Injuries Sustain	SERIOUS INJURY
Injured person in which vehicle?	FBK9112U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

SKETCH PLAN

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 liability**.
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. 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.

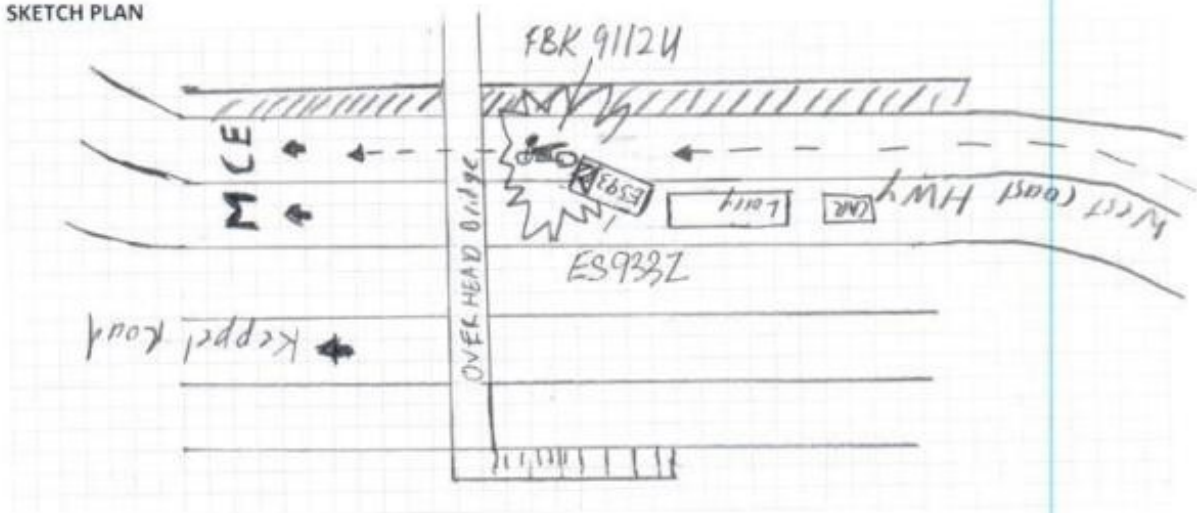
Policyholder's Signature
Date & Time:
10/4/2018

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT

DECLARATION

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

Policyholder's Signature
Date & Time:
10/4/2018

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

18/4/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

POLICE REPORT

SINGAPORE POLICE FORCE

T/20180410/2017

Report No. T/20180410/2017

Police Station Of Origin:
Kreta Ayer NPP
32 North Canal Road SINGAPORE 059282
Tel No: 1800-5359999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
10/04/2018 08:15	T/20180331/2123	8

Informant's Particulars

Name of Informant: MOHAMMED YASHIN BIN ABDUL RASHID			Address: APT BLK 139 BEDOK RESERVOIR ROAD #04-1493 SINGAPORE 470139	
ID Type / ID No.: NRIC NO / S8308592D			Contact No.: Home/Office: Mobile: 90239004	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 35	Date of Birth: 07/03/1983	Type of Informant: Rider	
Race: Indian			Language:	Institution / School Name:
Occupation: Financial analyst (eg equities analyst, credit analyst)			Driving Licence Information: Class: 2B,2A,2	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 31/03/2018 21:45	Type of Location: Straight Road
Location: Along Road 1 KEPPEL ROAD Before entrance to MCE				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 70 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
ES933Z	Car				Slightly Damaged	0
FBK9112U	Motorcycle	KTM	1290 SUPER DUKE R	Black	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

SINGAPORE POLICE FORCE

T/20180410/2017

Report No. T/20180410/2017

Police Station Of Origin:
Kreta Ayer NPP
32 North Canal Road SINGAPORE 059282
Tel No: 1800-5359999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK9112U	FWD Singapore Pte. Ltd	PNMC2017-00000429	27/06/2017	26/06/2018

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	LEE CHIANG HOCK		ID No.	S0187379B	
Related Vehicle	ES933Z (Car)		Contact No.	NIL	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Discharge	NIL	
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL	
Rider					
Name	MOHAMMED YASHIN BIN ABDUL RASHID		ID No.	S8308592D	
Related Vehicle	FBK9112U (Motorcycle)		Contact No.	90239004	
Hospital/Clinic	SHALOM CLINIC & SURGERY		Class of Driving Licence & Expiry Date	Class: 2B,2A,2 Date of Expiry: NIL	
Date Treatment	04/04/2018		Date Discharge	04/04/2018	
No. of Days granted Medical Leave	07		Degree of Injury	Slight	
Pillion					
Name	JEANIE HO		ID No.	K02902135	
Related Vehicle	FBK9112U (Motorcycle)		Contact No.	85748629	
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	31/03/2018		Date Discharge	07/04/2018	
No. of Days granted Medical Leave	38		Degree of Injury	Serious	

SINGAPORE POLICE FORCE

T/20180410/2017

Report No. T/20180410/2017

Police Station Of Origin:
Kreta Ayer NPP
32 North Canal Road SINGAPORE 059282
Tel No: 1800-5359999

CONTINUATION OF REPORT

Brief Details.

On 31/03/2018 at around 2145hrs, I was riding my motorcycle, FBK9112U along Keppel Road towards MCE when a motor vehicle, ES933Z knocked into me from the rear. My motorcycle was pushed forward by the impact towards the centre divider but I managed to regain control and looked back to see that my pillion was no longer there. I made a U-turn and travelled back to the point of impact where I found my pillion. I called for an ambulance at that point as the driver had not done so. I also noticed the in vehicle camera for the motorvehicle was blinking to indicate that recording was being done. My pillion was conveyed to SGH while I was interviewed by TP officers. My rear taillight broke off and the rear licence plate was dented and pushed under the seat due to the impact. The pillion footrest was twisted forwards too and there is some damage to the fairring. The damage to the motorvehicle was puncture of the right front wheel and damage to the rim, and the right front bumper was cracked. That's all.

SINGAPORE POLICE FORCE

T/20180410/2017

Report No. T/20180410/2017

Police Station Of Origin:
Kreta Ayer NPP
32 North Canal Road SINGAPORE 059282
Tel No: 1800-5359999

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: A / SI RAM ROHITASHWA TIWARY	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/04/2018 08:15
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt YUS MASTARI I KHAZALI Contact No.: 65476214	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

Accident Photo

Accident Photo

Driving License

Accident Photo

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