

## 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	03/05/2018 15:18
Date Of Accident	15/04/2018 17:25
Exact Location Of Accident	JUNCTION OF BOON LAY TWDS JALAN BAHAR
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBJ9884E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	FADHIL BIN IDRIS
NRIC No	S8524552Z
Email Address	FADHIL01@OUTLOOK.COM
Mobile Phone No	(LOCAL) +65-81982290
Alternative Phone No	OTHERS-81982290

### Vehicle Particulars

Manufacturer	YAMAHA
Model	JUPITER LC135-135CC
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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	AN3157382
Cover Note Number	14/07/2017 - 13/07/2018

### Driver

Name of Driver	FADHIL BIN IDRIS
NRIC No	S8524552Z
Date Of Birth	21/08/1985
Occupation	INDOOR
Date Of Driving Pass	29/08/2006
Driving Experience	11 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81982290
Fax Number	
Contact Number	OTHERS-81982290
Email Address	FADHIL01@OUTLOOK.COM

Address	BLK 757 JURONG WEST ST 74 #02-76
Postcode	640757
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 - CROSS JUNCTION
Weather Conditions	DRIZZLING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
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: : SITI ROSHIMAH BYE ROSLAN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG N.P.C
Police Station Address	<b>ROAD:</b> 2 JURONG WEST AVE 5 , <b>POSTCODE:</b> 649482 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7929999 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO THE POLICE REPORT & SKETCH PLAN BY DRIVER

#### 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	SHD9589T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	ANG AH LAI
NRIC/Passport Number	S1437241E
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name FADHIL BIN IDRIS

Approximate Age

Injuries Sustain LEGS & HANDS

Injured person in which vehicle? FBJ9884E

Were seat belts worn? NO

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

#### DETAILS OF INJURED PERSON 2

Name SITI ROSHIMAH BTE ROSLAN

Approximate Age

Injuries Sustain BODY UNWELL

Injured person in which vehicle? FBJ9884E

Were seat belts worn? NO

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

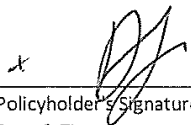
**SKETCH PLAN**

**IMPORTANT NOTICE**


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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.

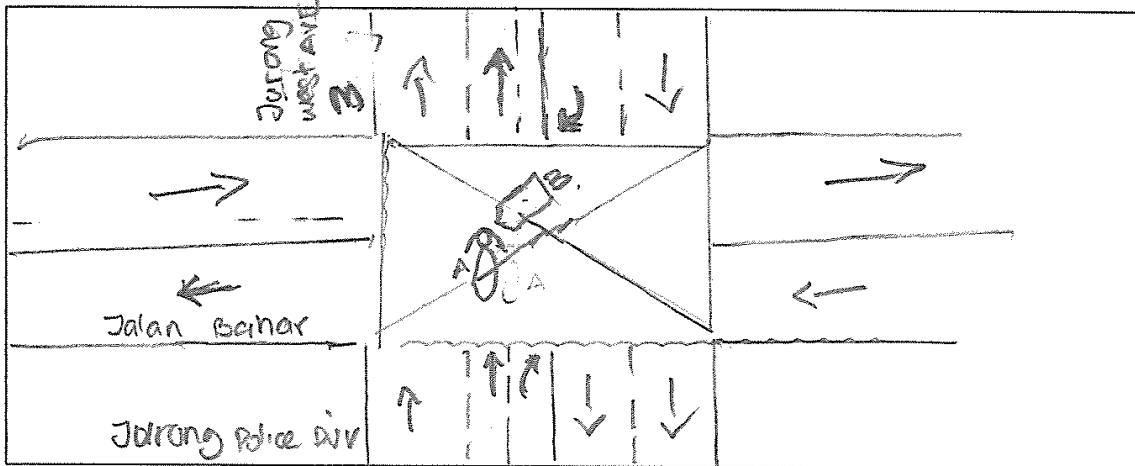
  
Policyholder's Signature  
Date & Time:

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

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

## Sketch Plan Pg. 2

Date of accident: 15 APR 18 Time: 17 30 Location: Along Jurong West Ave 3  
My Vehicle A: FBJ 9884E Vehicle B: SHD 9589 T Vehicle C: \_\_\_\_\_  
SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

☐ Claim OD/TP at Ah Lim Motor    ☒ Claim OD/TP at other workshop    ☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

**My workshop :**

Email address :

& myself :

Email address : fadhil01@outlook.com

**Note:** Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

## DECLARATION


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

x 

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

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

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



AN LIM MOTOR COMPANY

**Sketch Plan Pg. 3**



**SINGAPORE  
POLICE FORCE**



T/20180415/2111

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

1 of 3

Report No. T/20180415/2111

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/04/2018 23:29		Vide Report No.:		Station Diary No.: 101	
<b>Informant's Particulars</b>					
Name of Informant: FADHIL BIN IDRIS			Address: APT BLK 757 JURONG WEST STREET 74 #02-76 SINGAPORE 640757		
ID Type / ID No.: NRIC NO / S8524552Z			Contact No.: Home/Office: Mobile: 81982290		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 32	Date of Birth: 21/08/1985	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: SAFETY COORDINATOR			Driving Licence Information: Class: Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 15/04/2018 17:25	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 JALAN BOON LAY JALAN BAHAR Along Jalan Boon lay towards Jalan Bahar , at the traffic junction.				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBJ9884E	Motorcycle	YAMAHA	JUPITER 135 MANUAL	White	Slightly Damaged	1
SHD9589T	Car	CHEVROLET	EPICA 2.0DSL AT ABS D/AB 2WD 4DR	Red	Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20180415/2111

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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Report No. T/20180415/2111

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBJ9884E	AXA INSURANCE SINGAPORE PTE LTD	P1629996	14/07/2017	13/07/2018

**Brief Details.**

On 15/04/2018, at about 1725hrs, I was riding my motorcycle bearing the plate number: FBJ 9884E along Jln Boon Lay towards Jln Bahar with a pillion rider. The traffic light signal green, thus I proceed on my way. As I was moving towards Jln Bahar, a Transcab taxi bearing the plate number: SHD 9589T emerges out of the pocket zone, with the intention to turn right. I did not react in time thus, my motorcycle collided with the front of the taxi.

My motorcycle was stuck to the front part of the said taxi. I came down to make a check and discover that my motorcycle had sustained damages to the front side. I did not get to thoroughly check my vehicle as I was conveyed by the ambulance. The taxi also sustained damages to the front bumper with the plate number fell off. I did managed to exchange particulars with the driver of the said taxi.

The driver's particular is as follows:

Ang Ah LAi  
S1437241E  
Blk 276C Jurong West St 25 #09-21  
S(643276)

I wish to add that the police and ambulance came to scene. My pillion rider and I were conveyed by ambulance to Ng Teng Fong General Hospital. I was discharged and was given 03 days of MC. That is all.



**SINGAPORE  
POLICE FORCE**



T/20180415/2111

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

3 of 3

Report No. T/20180415/2111

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:

J /

Sgt 2 WONG JUN WEI, DANIEL

*sc/syb Hadri*

*H*

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt MOHAMMAD ABDILLAH BIN PALIL

Contact No.: 65476246

SN 127

Signature Of Informant:

*DJ*

Date/Time:

15/04/2018 23:29

Classification Of Case:

Authentication Stamp



Signature : *H*

**Singapore Police Force**



**AXA INSURANCE PTE LTD**  
 8 Shenton Way, #24-01 AXA Tower  
 Singapore 068811  
 Customer Service Centre #B1-01  
 Tel: 6338 7288 Fax: 6338 2522  
 Website: www.axa.com.sg  
 GST Registration Number: 199903512M



Original

A/c No: <b>03375</b>
Policy No (if any): <b>Renewal</b>
SmartDrive Quote Ref:

**MOTOR COVER NOTE**No. **AN3157382 ()**

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189) – Republic of Singapore; or
- The Road Transport Act 1987 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
- And any subsequent revisions to the above Acts and Agreements

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

**NR-BUDI HERMAWAN BIN  
MISABI**

**SCHEDULE**

THE COMPANY	AXA INSURANCE PTE LTD
INSURED	FADHIL BIN IDRIS
MAKE AND DESCRIPTION OF VEHICLE	YAMAHA JUPITER 135 MANUAL
VEHICLE REGISTRATION NO.	FBJ9884E
YEAR OF MANUFACTURE	2014
ENGINE NO.	55S134248
CHASSIS NO.	MH355S005EK134275
ENGINE CAPACITY/TONNAGE	134
COVER TYPE	THIRD PARTY, FIRE & THEFT
HIRE PURCHASE	SPEEDWAY MOTOR PTE LTD
VALUE (S\$)	MARKET VALUE
PERIOD OF INSURANCE	FROM: 14-Jul-2017 TO: 13-Jul-2018
EXCESS (S\$)	300
AXA PREMIUM WORKSHOP?	No

I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).

AXA INSURANCE PTE LTD

Issued by ANDA INSURANCE AGENCIES PL on 11-Jul-2017 2:43:05 PM

Authorised Signature

Note: This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.

- Premium for time on risk will be charged subject to minimum S\$53.50 (inclusive of GST) if the policy is cancelled after the inception date.
- An administrative fee of \$26.75 (inclusive of GST) will be charged:
  - Cover note issued and cancelled before inception.
  - Retaining the old registration number for a new vehicle insuring with AXA.

**PREMIUM WARRANTY****For Individual Customers:**

Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid

**For Non-Individual Customers:**

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception/renewal/endorsement. For all other cases, the premium in full should be paid before inception

Sketch Plan Pg. 7

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8524552Z



Name  
FADHIL BIN IDRIS

فadhil بن ادریس

Race

MALAY

Date of birth

21-08-1985

Sex

M

Country of birth

SINGAPORE

S8524552Z

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8524552Z

Name

FADHIL BIN IDRIS

Birth Date: 21 Aug 1985

Issue Date: 07 Jun 2012



91982290.

Max.  
siti roshimah bte  
roslan



4674595

NRIC No. S8524552Z



Date of issue

29-01-2011

Address

APT BLK 757 JURONG WEST STREET 74  
#02-76  
SINGAPORE 640757

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

EFFECTIVE DATE

Class 2B Motorcycles <= 200 CC

29 Aug 2006

Class 2A Motorcycles between 201 CC and 400 CC

02 May 2014

Class J Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg

07 Jun 2012

S / No. 9000196866

S8524552Z

NP 428A

Licence No. S8524552Z



NP 428A

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo

