SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number
Contact Number

EMail Address

- 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 <u>truthful and accurate</u> 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	10/05/2018 15:36
Date Of Accident	10/05/2018 05:45
Exact Location Of Accident	CARPARK INFRONT BLK 543 JURONG WEST ST 42
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FV4306E
Insured/Policyholder	
Name Of Registered Owner	MOHAMMAD YAZID BIN YAACOB
NRIC No	S8137421Z
Email Address	YAZIDYAA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97554503
Alternative Phone No	OFFICE-97554503
Vehicle Particulars	
Manufacturer	YAMAHA
Model	FJR1300
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/18-990677-WTT
Cover Note Number	-
Driver	
Name of Driver	MOHAMMAD YAZID BIN YAACOB
NRIC No	S8137421Z
Date Of Birth	12/12/1981
Occupation	OUTDOOR
Date Of Driving Pass	24/05/2005
Driving Experience	12 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97554503

OFFICE-97554503

YAZIDYAA@GMAIL.COM

BLK 543 JURONG WEST ST 42 #05-51 Address

Postcode

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions **CLEAR** Road Surface DRY

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? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

0 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name MARINE PARADE N.P.C

ROAD: 300 MARINE PARADE ROAD, POSTCODE: 449296, COUNTRY: Police Station Address

SINGAPORE

NO

NO

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

WITH DRIVER Remarks/ Reasons:

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBF2442P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Page 2 of 28

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)
 - 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:
 - 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

10/5/18

1500

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Sketch Plan

1			
10 - >> 10	010 A		4= FV4306E
18 ->>		6	3 = G8F 2442P
		to to	1 = Witnes footage
u u			
1 1 1 1 1	Open Carpark	Infront !	RIK 543 Jurang Wes
		51 42.	
ESCRIBE CIRCUMSTANCES C	F THE ACCIDENT		
		0230	
Please Re	efer to	Police	Report
		1	
		/	
		/	
	/		
	1		
			1.
DECLARATION	ulars are true in every respect.		
DECLARATION //We deciare the foregoing partic	culars are true in every respect.		hart
DECLARATION //We declare the foregoing partic	culars are true in every respect.		Reporting Centre Personnel's Signature





1 of 3

Report No. T/20180510/2084

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

EPORT O	F A TRAFFIC	ACCIDENT			
	ate/Time Report Made: 0/05/2018 14:27		Vide Report No.: Station Diary 47		
nforma	nt's Particu	ılars	基础 从上的时间下产业和国际产业		
lame of	Informant:	D BIN YAACOB	Address: APT BLK 543 JURONG WEST SINGAPORE 640543	T STREET 42 #05-51	
ID Type / ID No.: NRIC NO / S8137421Z		21Z	Contact No.: Home/Office:	Mobile: 97554503	
National			Email:		
Sex: Male	Age:	Date of Birth: 12/12/1981	Type of Informant: Vehicle Owner		
Race: Malay			Language: English	Institution / School Name:	
Occupation: TEL HNICAL OFFICER		CER	Driving Licence Information: Class: 2B,2A,2,3,4	Date of Expiry:	

, pe of scident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/05/2018 05:45	Type of Location Car Park
	ST STREET 42	43 Jurong West Street	42 #05-51	
Veathe :		Road Surface:	R	oad Speed Limit:
A CONTRACTOR				
Flow:		Traffic Control:	T	raffic Volume:

Details of Volume Vehicle No.	To receive the second	Make	Model	Color	Condition	No of Passenge
FV4306E	Турс	YAMAHA	FJR1300	Blue	Slightly Damaged	0
GBF2442P						0

tails of Person Involved	
ny Pedestrian Involved: No	
o. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT





2 of 3

Report No. T/20180510/2084

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

CONTINUATION OF REPORT

Vehicle Owner	A STATE OF THE PARTY OF THE PAR		OD	ID No.		S8137421Z
Name MOHAMMAD YA		ZID BIN YAACOB		10 140.		00.0
				Conta	ct No.	97554503
Related Vehicle	FV4306E			Community		
				Class	of	Class: NIL
Hospital/Clinic	NIL		Driving Licens Expiry	g ce &	Date of Expiry: NIL	
				-	-	
Date Treatment	NIL		Date Disc		NIL	
No of Dave gran	No. of Days granted Medical Leave		Degree o	f Injury	NIL	

On the 10/05/2018 at about 0450hrs, I came back home and parked my motorcycle at the open carpark in front of my house at Blk 543 Jurong West Street 42 at lot 2A. A few hours later at about 0900hrs, I came down from my house and discovered that my motorcycle was lying on the ground. As I was lifting up my motorcycle, one of my neighbours approached me and told me that his car has an in-vehicle camera. He said that the camera had captured footage of my motorcycle being knocked down at about 0547hrs by a lorry. There was no note left on my motorcycle.

My neighbor and I exchanged contact details and he then sent me the video footage and some screenshots showing a lorry colliding with my parked motorcycle and left after that. I informed my insurance company about this matter and was advised to lodge a police report.

101 91





3 of 3

Report No. T/20180510/2084

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296 Tel No: 1800-4428999

CONTINUATION OF REPORT

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Informant is not able to provide sketch plan

Staff Sgt SYED FAIZ BIN SYED SHAMSHUDIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/05/2018 14:27
Officer In Charge Of Case: TP : HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case:

APORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have ertificate with you now, please fax a copy to 65474885 stating the report number as reference.







































