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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 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

新疆和西部 东西的东西	ACCIDENT STATEMENT	The same
Date Of Report	18/05/2018 13:34	
Date Of Accident	18/05/2018 10:45	
Exact Location Of Accident	KAKI BUKIT AVE 1	
Country/State of Loss	SINGAPORE	
D	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	FBF5331G	
Insured/Policyholder		
Name Of Registered Owner	MOHAMED YASIN BIN ABDUL HMEED	
NRIC No	S0223153J	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-90231129	
Alternative Phone No	OTHERS-90231129	
Vehicle Particulars		
Manufacturer	YAMAHA	
Model	•	
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	REPORTING ONLY	
Vehicle Category	MOTORCYCLE	
Insurance Company		
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD	
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT	
Fleet Policy	NO	
Policy Number	5055185188-05	
Cover Note Number		
Driver		
Name of Driver	MOHAMED YASIN BIN ABDUL HMEED	
NRIC No	S0223153J	
Date Of Birth	03/06/1954	
Occupation	OUTDOOR	
Date Of Driving Pass	14/10/1981	
Driving Experience	36 YEARS AND 7 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-90231129	
Fax Number		
Contact Number	OTHERS-90231129	
EMail Address	NOEMAIL	

NOEMAIL

Address

BLK 124 YISHUN STREET 11

#05-367

Postcode

760124

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OWNER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

SIDE SWIPE

Weather Conditions

AFTER RAIN

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?

NO

Was any injured conveyed to hospital by

ambulance?

NO

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?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

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

SKE2500D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

KWAN YI XIN

NRIC/Passport Number

S9921459G

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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.
- 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.
- 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.
- 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) of:
 - 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 .:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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

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.:

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S0223153J



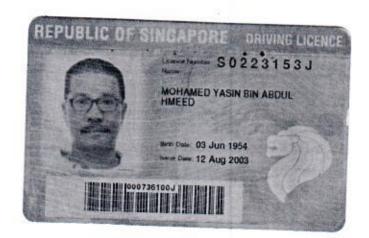


MOHAMED YASIN BIN ABDUL

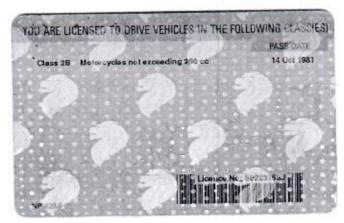
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Country of Birth
SINGAPORE











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 : 5055185188-05

Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle

: FBF5331G

Chassis Number

: 453304294

2. Name of Policyholder

: MOHAMED YASIN BIN ABDUL HMEED

3. Effective Date of Insurance

: 15 Aug 2017

4. Expiry Date of Insurance

: 14 Aug 2018

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

EXCESS (THEFT OUTSIDE SINGAPORE)

: PLEASE REFER OVERLEAF

INSURE WITH COE

: YES

NAMED DRIVER (1)

: MOHAMED YASIN BIN ABDUL HMEED

NAMED DRIVER (2)

N/A

HIRE PURCHASE COMPANY

: N/A

SUM INSURED

MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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

: 31 Jul 2017 12:39 hrs

Reprint

: 31 Jul 2017 12:39 hrs

Countersigned By:

Authorised Officer

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

eBao Tech									Gener	alClaim
Hello, NAC_BUKIT_MERAH My Desktop	50000000	cy Query				V.	Change La	inguage	· Change Password	Log Out
Notice of Loss	Policy N Vehicle	o. Na.(For Mator)	FBF5331G			Date of Acc	ident:	18/05	V2018 10:45	
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0.	5055185188-05	MOHAMED YASIN BIN ABDUL HMEED	50223153)	GMC	Third Party, Fire & Theft	FBF5331G	F8F5331G		14/08/2018
					- 1	Continue				

Bukit Merah

Policy No.	5055185188-05	Policyholder Name	МОНАМЕ	D YASIN BIN ABDUL HI	Policyholder NRIC	502231533	
Address	BLK 124 #05-367 YISHUN STR	EET 11 SINGAR	ORE 7601	24			
Product Name	MOTORCYCLE INSURANCE	Plan			Group Policy Flag	N	
Policy issue Date	31/07/2017	Effective Date	15/08/20	017 00:00		14/08/2018	23:59
Excess Type		All Claim Excess					
Third Party Excess	0.0	Own damage Excess	0.0		Windscreen Excess		
Additional Excess		OS Premium	0				
Outside Singapore OD Excess		Outside Singapore TP Excess				Youn	g/Inexperience Driver Excess
Agent	DIRECT BUSINESS DEPT	Agent Tel.	NIL		GST Flag	Y	
Co- nsurance lag	No				<i>32000007</i> €	ART-CO	
Open Policy Info							
Certificate nfo							
 Policyh 	older Mailing Address						
Address 1	BLK 124 #05-367	Addres	s 2	YISHUN STREET 11		ddress 3	SINGAPORE 760124
ddress 4		Addres	s Type	Singapore address	p	ost Code	760124
Jnit No.		Related	Policy	5055185188-05		HEATTEN.	, , , , , , , , , , , , , , , , , , , ,
	Object: FBF5331G						
• Endorse	ements						

Claim Handling

Accident MT/0994982					
Policy No.	5055185188-05	Vehicle No.	FBF5331G	Ger San Control	
Policyholder Name	MOHAMED YASIN BIN ABOUL HMEED		3332	GST Registration No.	
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party, Fire & Theft	Policyholder NRIC	S
Contact No.(Mobile)	90231129	Contact No.(Office)	0	Loading	0
Email Address		Special Remark	×	Contact No.(Home) eCode	0
KFK	No Yes	TCA	« No Yes		1
NCD Protection	No	NCD Entitlement(%)	20	eCode Reason	
			20	Private Hire	No
Report Date	19/05/2018 09:42	Accident Report Within 24 hr	s Yes	1954/400000000000000000000000000000000000	940
Date of Accident	18/05/2018	Time of Accident hh:mm		Accident Type	Si
Reporting Centre		Orange Force	10:45	Country of Accident	Si
Accident Location	KAKI BUKIT AVE 1	orange rorce		ICM No.	
▽ Benefits					
♥ Excess					
Own damage Excess	0.00	True via			
Unnamed Driver Excess	0.00	Additional Excess		Windscreen Excess	
Third Party Excess		Outside Singapore OD Excess			
GST Registered Info	mation 0.00	Outside Singapore TP Excess			
GST Registered	22000000				
GST Registration No.	No		GST Registration Date		
Modification History			GST Status Verified	Yes	
Policyholder Mailing	Address				
Address 1	BLK 124 #05-367	(2/22/19/5/2)	NOW SECURE AND ADDRESS OF THE PARTY OF THE P		
Address 4	DCK 124 903-367	Address 2	YISHUN STREET 11	Address 3	SI
Unit No.		Address Type	Singapore address	Post Code	76
♥ OI Driver Info		Related Policy Number	5055185188-05		
Driver Name	MOHAMED YASIN BIN ABDUL HMEED				
Unnamed driver Name	TASIN BIN ABDUL HMEED	Driver Type	Main Driver		
Register Date of Driver Licen	se 14/10/1981	Driver NRIC	\$02231533	Driver DOB	03/
Contact No.(Mobile)	90231129	Driver Age	63	Driving Experience	36
Address 1	BLK 124	Contact No.(Office)	0	Contact No.(Home)	0
Address 4	DCN 124	Address 2	YISHUN STREET 11	Address 3	
Unit No.	#05-367	Address Type	Singapore address	Post Code	760
Does he own a Singapore					
Registered car?	Yes + No	Driver Vehicle No.		Driver Insurer Company	
eclaration	V				
Breathalyser or Blood Test Reading?	0 mg	Any injury?	○ Yes ■ No		
odification History					
Claim 001 OD-MX No	we.				
laim Type •	OD-MX T	Insured Name	MOHAMED YASIN BIN ABDUL HI	Insured NRIC	-
ontact No.(Mobile)	90231129	Contact No.(Home)	67557437		S02
mail Address		OI Vehicle Number	FBF5331G	Contact No.(Office)	
aim Description	FBF5331G / SKE2500D ON 18 May 2018			TP Vehicle Number	SKE
referred Workshop Contact		Insured Liability •	Deutlette as Section 1	Name of Preferred Workshop	
equire Finalisation	Yes v	71004004004004000	Partially at Fault	v 2000	
ate Registered		Preferered Repair Option	Preferred Workshop, Name unknown ▼	GIA report	Rec
	19/05/2018 10:40	Claim Close Date		Date Received	19/0
	MUDICHALACANA	AREA - Control - Inc.			
port Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired	
	KRISHNASAMY	worksnop Repairer		Total Loss but Repaired	
port Taken By	KRISHNASAMY	worksnop Repairer	Save Submit	Total Loss but Repaired	

Accident No.

MT/0994982

Claim No.

Last Doc. Received

● Yes ○ No

Upload Date

19/05/2018 10:40

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Attachment List

	Uploaded By/Date	Folder Date	File Name		9	Source
Video List						
1	NAC_BUKIT_MERAH_800676 UKIT MER	(NATIONAL ASSESSMENT CENTRE SERVICES (B AH)) on 19 May 2018 10:37	Photos		Normal	Photos 20
***	NAC_BUKIT_MERAH_B00676 UKIT ME	(NATIONAL ASSESSMENT CENTRE SERVICES (B RAH)) on 19 May 2018 10:37	Photos		Normal	Photos 20
	NAC_BUKIT_MERAH_800676 UKIT ME	(NATIONAL ASSESSMENT CENTRE SERVICES (B RAH)) on 19 May 2018 10:37	Photos		Normal	Photos 20
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3	NAC_BUKIT_MERAH_B0067 UKIT ME	S(NATIONAL ASSESSMENT CENTRE SERVICES (B RAH)) on 19 May 2018 10:38	Photos		Normal	Photos 20
4	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 19 May 2018 10:38		Photos		Normal	Photos 20
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电影	NAC_BUKIT_MERAH_80067 UKIT ME	6(NATIONAL ASSESSMENT CENTRE SERVICES (B FRAH)) on 19 May 2018 10:38	Photos		Normal	Photos 20
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	NAC_BUKIT_MERAH_80067 UKIT M	6(NATIONAL ASSESSMENT CENTRE SERVICES (B ERAH)) on 19 May 2018 10:38	Photos		Normal	Photos 20
	NAC_BUKIT_MERAH_8006. UKIT M	(6(NATIONAL ASSESSMENT CENTRE SERVICES (B ERAH)) on 19 May 2018 10:38	Photos		Normal	Photos 20
63	NAC_BUKIT_MERAH_8006 UKIT M	76(NATIONAL ASSESSMENT CENTRE SERVICES (B ERAH)) on 19 May 2018 10:39	SAS		Normal	SAS 20
ATT SECTION	NAC_BUKIT_MERAH_8006 UKIT M	76(NATIONAL ASSESSMENT CENTRE SERVICES (B ERAH)) on 19 May 2018 10:40	NRIC/ Driving License		Normal	NRIC/ Driving Lic
Attachment		Uploaded By/Date	Category	9	Urgency	Descr

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