

NATIONAL Assessment Centre Services

(Unit 1 of 2000)

MAA 4180336

Date In: 25/05/2018 17:52

Ref No: NBA/Fuel/009577/y

Veh No: FBE 2550 R

Q.O.A: 19/05/2018 15:15

OD: TP Reporting Only

TP Insure:

Job Description

Date & Time Completed

Done by

SAS e-tiling

E-mail (with 3hrs, A/C 3hrs)

Motor Claim Form

Motor VVO (with 100 hrs, VVO 3hrs)

Photo Uploaded

Assessment Survey Report

Assessment Report by Fax/Hand to Owner/VVWAP

MT10995951-001

25/05/2018

18:16

Preferred Wksp / INC Assign Wksp / OWI:

Tell

Fax

TP Participant: Yeh No: PZ2098D

INC () / Non-INC ()

Owner / Driver:

Tell

Policy No:

Period:

Cover Type:

Confirmed by:

Date

Time

Insured/Driver Liability: () % (Note: BIL Stand (WO): NI 0.20%, PI 21.79%, PI 90.100%)

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:

() Work-In-Guionair: Customers Information strictly Confidential & Strictly NO refer of repeller.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () / Invoice: YES () / NO () / Towing Co:

Remarks: ()

DATA FILE Complete

Done by

1) Apply for Transition Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Recovery Photo (Repair Cost > \$3000) ()

4) Upload Recovery Photo (Repair Cost > \$3000) ()

5) Upload Recovery Photo (Repair Cost > \$3000) ()

6) Upload Recovery Photo (Repair Cost > \$3000) ()

7) Upload Recovery Photo (Repair Cost > \$3000) ()

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28) Upload Recovery Photo (Repair Cost > \$3000) ()

29) Upload Recovery Photo (Repair Cost > \$3000) ()

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Invoice Preparation Checklist

1) AR: Accident Reporting (\$300)

2) DA: Damage Assessment (\$100) INC (H)

3) TP: Towing Fee (\$100)

4) PT: Follow Through Survey (\$100)

5) PT: Follow Through Survey (Recovery) (\$100)

6) TR: Assessment (\$100)

7) NI: NI/DA + SMRT Survey (\$100)

8) NTUC Additional Survey (\$100)

9) NTUC Additional Survey (\$100)

10) NTUC Additional Survey (\$100)

11) NTUC Additional Survey (\$100)

12) NTUC Additional Survey (\$100)

13) NTUC Additional Survey (\$100)

14) NTUC Additional Survey (\$100)

15) NTUC Additional Survey (\$100)

16) NTUC Additional Survey (\$100)

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10) NTUC Additional Survey (\$100)

11) NTUC Additional Survey (\$100)

12) NTUC Additional Survey (\$100)

13) NTUC Additional Survey (\$100)

14) NTUC Additional Survey (\$100)

15) NTUC Additional Survey (\$100)

16) NTUC Additional Survey (\$100)

C. Checked by (Engin-Charge)

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C. Checked by (Engin-Charge)

Invoice Total

Net Charge

Net Charge

MA1803308

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	25/05/2018 17:52
Date Of Accident	19/05/2018 15:15
Exact Location Of Accident	ALONG JALAN AHMAD IBRAHIM
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FBE2550R
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD NUR AIDIL BIN ROSLI
NRIC No	S9408984J
Email Address	MUHAMMAD_NUR_AIDIL@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-92968714
Alternative Phone No	OTHERS-92968714
Vehicle Particulars	
Manufacturer	YAMAHA
Model	NOUVO ELEGANCE-133CC
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5092324505
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD NUR AIDIL BIN ROSLI
NRIC No	S9408984J
Date Of Birth	20/03/1994
Occupation	INDOOR
Date Of Driving Pass	03/06/2013
Driving Experience	4 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92968714
Fax Number	
Contact Number	OTHERS-92968714
EEmail Address	MUHAMMAD_NUR_AIDIL@HOTMAIL.COM

Address	BLK 717 JURONG WEST STREET 71 #04-105
Postcode	640717
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 - CHANGE/CROSS LANE
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	1
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	NANYANG N.P.C
Police Station Address	ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180519/2149

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	PZ2098D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
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	MUHAMMAD NUR AIDIL BIN ROSLI
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBE2550R
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: 25/05/2018 1600HRS

Driver's Signature

(If driver is not the policyholder)

Date & Time:

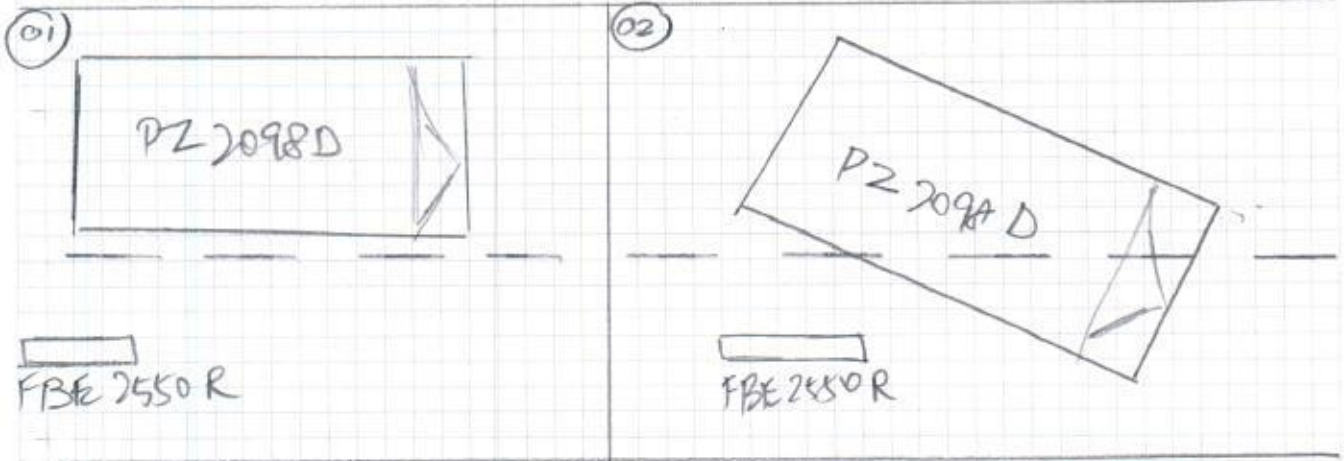
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

Along JACAN AHMAD Ibrahim



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
1/20180519/2149

DECLARATION

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

Policyholder's Signature

Date & Time: 25/05/2018

1600HRS
1600 HRS

Driver's Signature

(If driver is not the policyholder)

Date & Time:

25/05/2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180519/2149

1 of 3

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

Report No. T/20180519/2149

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/05/2018 22:03		Vide Report No.:		Station Diary No.: 88	
Informant's Particulars					
Name of Informant: MUHAMMAD NUR AIDIL BIN ROSLI			Address: APT BLK 717 JURONG WEST STREET 71 #04-105 SINGAPORE 640717		
ID Type / ID No.: NRIC NO / S9408984J			Contact No.: Home/Office: Mobile: 92968714		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 24	Date of Birth: 20/03/1994	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: ICA Officer			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 19/05/2018 15:15	Type of Location: Straight Road
Location: Along Road 1 TUAS WEST DRIVE				
Tuas Checkpoint Staff Exit point				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Abrupt Change of Lane				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE2550R	Motorcycle	YAMAHA	NOUVO ELEGANCE	Black		0
PZ2098D	Bus/Coach/Mi nibus				No Damage	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE2550R	NTUC Income Insurance Co-Operative Limited	5092324505	30/06/2017	26/07/2018



**SINGAPORE
POLICE FORCE**



T/20180519/2149

2 of 3

Report No. T/20180519/2149

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

CONTINUATION OF REPORT

Brief Details.

On 19/05/2018 at 1515hrs, I was exiting Tuas Checkpoint via the Staff Exit as I just ended my work. I was riding my vehicle, a Red Yamaha bearing the registration number of FBE2550R, on the right lane at that point of time and there was another vehicle in front of me, a Bus bearing the registration number of PZ2098D. The bus was driving on the left lane. However, the bus started to turn into my lane abruptly, and in order to avoid collision, I jammed the brake of my motorcycle and as a result, my motorcycle skidded and flew into the bush area at the right while I flew forward beside the bus. I then signaled to the bus driver asking him why did he change lane abruptly, he then signaled that there is a tree branch at the front.

I wish to add that there was no traffic police when I was at scene but ambulance was at scene. I was then conveyed to Ng Teng Fong for checkup and was given 08 days MC from 19/05/2018 to 26/05/2018. I also wanted to add that both vehicle did not collide with each other. I am lodging this report under instruction of Traffic Police and also for my insurance claim purpose



**SINGAPORE
POLICE FORCE**



T/20180519/2149

3 of 3

Report No. T/20180519/2149

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

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 TAN LITEK

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI YEO CHUN JIAN

Contact No.: 65476213

Signature Of Informant:

Date/Time:

19/05/2018 22:03

Classification Of Case:

Authentication Stamp
NP108

SN 127



Signature :

Singapore Police Force

Claim Handling

Accident MT/0995951

Policy No.	509224505	Vehicle No.	FBE2550R	GST Registration No.	
Policyholder Name	MUHAMMAD NUR AIDIL BIN ROSLI			Policyholder NRIC	S9408984J
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No.(Mobile)	92968714	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	25/05/2018 18:10	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Change / Cross lane
Date of Accident	19/05/2018	Time of Accident (hh:mm)	15:15	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG JALAN AHMAD IBRAHIM				

Benefits

Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 717 #04-105	Address 2	JURONG WEST STREET 71	Address 3	SINGAPORE 640717
Address 4		Address Type	Singapore address	Post Code	640717
Unit No.		Related Policy Number	5092324505		

OI Driver Info

Driver Name	MUHAMMAD NUR AIDIL BIN ROSLI	Driver Type	Main Driver	Driver DOB	20/03/1994
Unnamed driver Name		Driver NRIC	S9408984J	Driving Experience	4
Register Date of Driver License	03/06/2013	Driver Age	24	Contact No.(Home)	
Contact No.(Mobile)	92968714	Contact No.(Office)		Address 3	SINGAPORE 640717
Address 1	BLK 717 #04-105	Address 2	JURONG WEST STREET 71	Post Code	640717
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	FBE2550R	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	Yes No
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Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	MUHAMMAD NUR AIDIL BIN ROSLI	Insured NRIC	S9408984J
Contact No.(Mobile)	92968714	Contact No.(Home)		Contact No.(Office)	
Email Address	MUHAMMAD_NUR_AIDIL@HOTM	OI Vehicle Number	FBE2550R	TP Vehicle Number	P22098D
Claim Description	FBE2550R / P22098D ON 19 May 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	25/05/2018 18:15	Claim Close Date		Date Received	25/05/2018 00:00
Report Taken By	ROSLI WAMAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/0995951	Claim No.	001
Last Doc. Received	Yes No	Upload Date	25/05/2018 18:16

Path *	Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear Please Select	NO	Normal	
Choose File No file chosen	Clear Please Select	NO	Normal	
Choose File No file chosen	Clear Please Select	NO	Normal	
Choose File No file chosen	Clear Please Select	NO	Normal	
Choose File No file chosen	Clear Please Select	NO	Normal	
Choose File No file chosen	Clear Please Select	NO	Normal	
Message Read				

Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:16	Photos	Normal	Photos 2018-5-25		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:16	Photos	Normal	Photos 2018-5-25		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:16	Photos	Normal	Photos 2018-5-25		Edit

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:16	Photos	Normal	Photos 2018-5-25	Edit
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:15	Photos	Normal	Photos 2018-5-25	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:15	Photos	Normal	Photos 2018-5-25	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:15	Photos	Normal	Photos 2018-5-25	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:15	Photos	Normal	Photos 2018-5-25	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:15	Photos	Normal	Photos 2018-5-25	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:15	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-25	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 May 2018 18:15	SAS	Normal	SAS 2018-5-25	Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
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Display in New Window	Scan and uploading
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ACCIDENT STATEMENT

ACCIDENT DATE: (19 / 05 / 2018) (DD/MM/YYYY), TIME: (15 : 15) (HH:MM)

LOCATION: ALONG JALAN AHMAD IBRAHIM

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBE 2550 R
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: 5092324505
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: YAMAHA NOVO ELEGANCE
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: MUHAMMAD NUR AIDIL BIN ROSLI (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S94089847 CONTACT: 92968714
c) ADDRESS: BLK 717 JURONG WEST ST 71 #04-105
SINGAPORE 60717

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

3. DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

*d) DATE OF BIRTH: (20 / 03 / 1994) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 03/06/2013

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS DRIZZLING)
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: NANYANG NPC

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: PZ 2098 D MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

1) EMAIL : muhammad_nur_aidil@hotmail.com

2) VIDEO :

(1)
NUMBER OF
PASSENGER
INCLUDING DRIVER

()
NUMBER OF
PASSENGER
INCLUDING DRIVER
()
NUMBER OF
PASSENGER
INCLUDING DRIVER

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9408984J



Name

MUHAMMAD NUR AIDIL BIN
ROSLI

محمد نور عیدل بن روسلی

Race

MALAY

Date of birth Sex

20-03-1994 M

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S9408984J

Name

MUHAMMAD NUR AIDIL BIN
ROSLI

Birth Date 20 Mar 1994

Issue Date 03 Jun 2013



4430602

NRIC No. S9408984J



Date of issue

13-07-2009

Address

APT BLK 717 JURONG WEST STREET 71
#04-105
SINGAPORE 640717

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

EFFECTIVE DATE

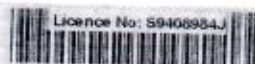
Class	Motorcycles
Class 2B	Motorcycles ≤ 200 CC
Class 2A	Motorcycles between 201 CC and 400 CC
Class 2	Motorcycles > 400 CC

43 Jun 2013
02 Nov 2015
07 Dec 2016

S9408984J

S / No. 9000264692

NP 429A



Hello, NAC_BUKIT_MERAH_800676

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Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="19/05/2018 15:55"/>						
Vehicle No.(For Motor)	<input type="text" value="FBE2550R"/>	<input type="button" value="Search"/>							
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5092324505	MUHAMMAD NUR AIDIL BIN ROSLI	S9408984J	GMC	Third Party, Fire & Theft	FBE2550R	FBE2550R	30/06/2017	26/07/2018
<input type="button" value="Continue"/>									



SINGAPORE POLICE FORCE

Singapore Police Force
10, Ubi Avenue 3
Singapore 408865
Tel : 6547 0000
Fax : 6547 6259

Date : 20 May 2018

Your Ref :
Our Ref : TP/IP/29701/2018

000086
MUHAMMAD NUR AIDIL BIN ROSLI
APT BLK 717 JURONG WEST STREET 71
#04-105
SINGAPORE 640717



Dear Sir / Madam,

CASE OF TRAFFIC ACCIDENT ALONG JALAN AHMAD IBRAHIM ON 19 MAY 2018 @ 3.18 PM

Please be informed that Traffic Police is investigating into the above matter and will update you the status in due course.

2 IF you have not lodged a Police Report of a Traffic Accident (NP168) in respect of the said accident which is now required for police investigation, please do so as soon as possible at the nearest police station, Neighbourhood Police Centre (NPC), Neighbourhood Police Post (NPP) or online via Singapore Police Force Electronic Police Centre (<http://www.police.gov.sg/epc>).

3 Please note that the information given by you in the Police Report of a Traffic Accident (NP168) will be carefully considered. You may not be called upon for an interview if the information in the Police Report is sufficient for our investigation. However, if you have any further information or other evidence (such as CCTV footages) which you have not stated in your report and which you think will assist in the investigation, you are advised to contact the Investigation Officer within 2 weeks of this letter to arrange for an appointment.

4 You may contact the Investigation Officer MD RIZWAN BIN KAMALUDIN at his / her office number: 65476185 or the supervisor NEO CHIN LOONG at 65476197 if you have any further queries.

5 Thank you.

Yours faithfully,

TAN CHEE SING (ASP)
CHIEF INVESTIGATION OFFICER
INVESTIGATION BRANCH
TRAFFIC POLICE

This is computer generated and does not require a signature.