

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	21/06/2018 20:11
Date Of Accident	21/06/2018 11:00
Exact Location Of Accident	NEW MARKET ROAD NEXT TO HAVELOCK 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE2369Z
Insured/Policyholder	
Name Of Registered Owner	ABDUL RAHMAN BIN ABDUL MAJEED
NRIC No	S8713176I
Email Address	MANABAM87@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83823519
Alternative Phone No	OTHERS-83823519

Vehicle Particulars

Manufacturer	YAMAHA
Model	TMAX500-499CC (A)
Exact Purpose for which vehicle was being used at time of accident	BIKE WAS 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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5092838460
Cover Note Number	

Driver

Name of Driver	ABDUL RAHMAN BIN ABDUL MAJEED
NRIC No	S8713176I
Date Of Birth	09/05/1987
Occupation	INDOOR
Date Of Driving Pass	29/06/2010
Driving Experience	7 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83823519
Fax Number	
Contact Number	OTHERS-83823519
Email Address	MANABAM87@GMAIL.COM

Address	BLK 336B YISHUN STREET 31 #07-25
Postcode	762336
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	2
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT D/20180621/2047

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	PC6933M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	LAU LIANG MENG
NRIC/Passport Number	S1470495G
Contact Number	83041121
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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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:

21/06/2018
1512 HRS

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

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

SKETCH PLAN

UNKNOWN WHEN INSURED
THE BIKE WAS ALREADY CARRIED
UP BY SOMEONE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PS, please to Police Report
2/20/2017

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

21/06/2018
Policyholder's Signature
Date & Time: 1512HR3

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

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



D/20180621/2047

1 of 2

POLICE REPORT (NP299)

Report No. D/20180621/2047

Police Station Of Origin
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Date/Time Report Made 21/06/2018 14:28	Vide Report No.	Station Diary No. 52
Name Of Informant ABDUL RAHMAN BIN ABDUL MAJEED	Address APT BLK 336B YISHUN STREET 31 #07-25 SINGAPORE 762336	
ID Type / ID No. NRIC NO / S8713176I	Contact No. Home/Office	Mobile 83823519
Nationality SINGAPORE CITIZEN	Email Address	
Occupation FIREMAN (PSA)	Sex Male	Age 31
Institution/School Name	Date of Birth 09/05/1987	Race Indian
Date/Time Of Incident 21/06/2018 11:00	Location Of Incident NEW MARKET ROAD SINGAPORE next to Havelock 2	

Brief details.

On 21/06/2018 at about 1100am, I had my bike FBE2369Z park at a parking lot next to Havelock 2. at about 1145am, I saw a note on my bike and I then call the number and a cisco officer had inform me that he had witness a bus PC6933M had hit my bike. he then chase after the bus driver, Lau Liang Meng, S1470495G, and the driver told him that he did not know he had hit my bike. He then gotten the driver particulars and pass it to me. I then contacted the bus driver's company and they told me to settle it by insurance. I then went down to IDAC and they told me to make a police report.

Signature Of Officer Recording The Report: D / Sgt 3 LEE HONG HAI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/06/2018 14:28
Officer In-Charge Of Case: D / Clementi Police Divisional Investigation Branch / Insp RAJPAL SINGH KANG Contact No.: 67700000	Classification Of Case:

Authentication Stamp

POLICE REPORT



SINGAPORE
POLICE FORCE



D/20180621/2047

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20180621/2047

I wish to state that this report is for insurance claim.

Signature Of Officer Recording The Report: D / Sgt 3 LEE HONG HAI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/06/2018 14:28
Officer In-Charge Of Case: D / Clementi Police Divisional Investigation Branch / Insp RAJPAL SINGH KANG Contact No.: 67700000	Classification Of Case:
Authentication Stamp	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

