

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 09:29
Date Of Accident	13/06/2018 17:15
Exact Location Of Accident	ALONG ROAD 1 ALEXANDRA ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH4813D
Insured/Policyholder	
Name Of Registered Owner	IZAIDI BIN MOHAMED HUSSAIN
NRIC No	S8620358H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97384293
Alternative Phone No	OFFICE-97384293

Vehicle Particulars

Manufacturer	YAMAHA
Model	FZ16-153CC (M)
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	Q/MTMC012017101818
Cover Note Number	

Driver

Name of Driver	IZAIDI BIN MOHAMED HUSSAIN
NRIC No	S8620358H
Date Of Birth	25/06/1986
Occupation	INDOOR
Date Of Driving Pass	23/07/2014
Driving Experience	3 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97384293
Fax Number	
Contact Number	OFFICE-97384293
Email Address	NOEMAIL

Address	BLK 463 TAMPINES STREET 44 #03-96
Postcode	520463
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - U-TURN
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?	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	TAMPINES N.P.C
Police Station Address	ROAD: TAMPINES N.P.C , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO THE POLICE REPORT. THANK YOU

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 Witness 1

Name	SEAH THIAM HENG
Phone Number	93627639
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

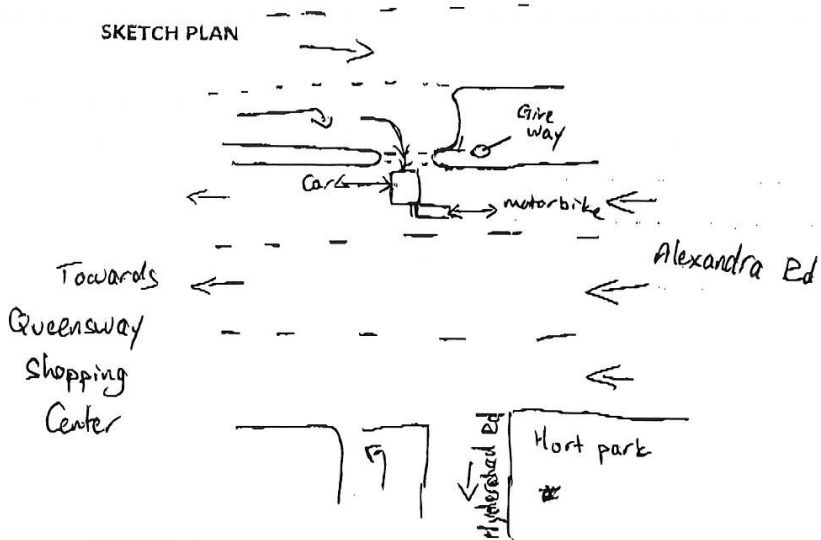
Vehicle Registration Number	SKP7331J
Vehicle Make/Model/Colour	HONDA ODYSSEY / GRAY
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHUA PUAY WEE
NRIC/Passport Number	S7300585Z
Contact Number	96910787

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name IZAIDI BIN MOHAMED HUSSAIN
Approximate Age
Injuries Sustain
Injured person in which vehicle? FBH4813D
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Sketch Plan Pg. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to the police report.

DECLARATION

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

Policyholder's Signature

Date & Time: 18/6/18
4.25pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 18/6/18
4.25 pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

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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: 18/6/18 4:25 PM

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20180613/2169

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

1 of 3

Report No. T/20180613/2169

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/06/2018 23:07		Vide Report No.: D/20180613/0083		Station Diary No.: 89
Informants Particulars				
Name of Informant: IZAIDI BIN MOHAMED HUSSAIN		Address: APT BLK 463 TAMPINES STREET 44 #03-96 SINGAPORE 520463		
ID Type / ID No.: NRIC NO / S8620358H		Contact No.: Home/Office: Mobile: 97384293		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 31	Date of Birth: 25/06/1986	Type of Informant: Rider	
Race: Javanese		Language:		Institution / School Name:
Occupation: senior technical specialist		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 13/06/2018 17:15	Type of Location: Straight Road
Location: Along Road 1 ALEXANDRA ROAD				
INCIDENT HAPPEN AT ALEXANDRA ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH4813D	Motorcycle	YAMAHA	FZ 16	Black	Seriously Damaged	0
SKP7331J	Car	HONDA	ODYSSEY	Grey	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBH4813D	AXA INSURANCE SINGAPORE PTE LTD	D18MTMC0100000 1	01/01/2018	31/12/2018



**SINGAPORE
POLICE FORCE**



T/20180613/2169

2 of 3

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

Report No. T/20180613/2169

CONTINUATION OF REPORT

Brief Details.

On the above mention time and date, I was riding my motorcycle (FBH4813D) along Alexandra road, on the most right lane, going straight, when a car (SKP7331J) who was turning right, wanting to go into junction of Hyderabad road (Hort park) hit me. The car left front side came in contact with my veh front, I flew off my veh for about 5 meters before landing on the road. I got help from passer-by(s) and the driver of the said car. Ambulance and Tp came down to scene. I was conveyed to NUH and given an MC of 8 days, 13/06/2018 - 20/06/2018.

I do not know if SKP7331J had any passengers, I do not know if there are any other injuries on the other party as well.

I suffered superficial wounds on both my shoulders, on my left elbow, left leg, right feet is swollen and is bleeding and right palm has cramps.

I would like to add that I have cameras at the front and back of my motorcycle.

Witness:

Seah Thiam Heng

88 Hillview Ave #05-07 hillbrooks (s)669590

93627639, 68933261

Leng

81333526

Driver of SKP7331J

Chua Puay Wee

S7300585Z

96910787

IO Sufian 65476367


Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623
Tel: 6461 6555 | Fax: 6221 3302 | Website: www.sompo.com.sg
Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

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)

Cert No./Policy No. : QMTMC012017101818
Insured : IZADI BIN MOHAMED HUSSAIN
Motor Vehicle (Regn No.) : FBH4813D
Cover : Third Party, Fire & Theft
Policy Commencement Date : 01 JANUARY 2018 00:00
Policy Expiry Date : 31 DECEMBER 2018 23:59
Maximum Liability (Section I) : Market value at time of loss
Excess* : \$300 - Section I
Named Driver 1 : IZADI BIN MOHAMED HUSSAIN
Named Driver 2 : ARDZI SOLLEIHIN BIN SAMSUDIN
Hire Purchase Owner : N.A

* Subject to GST wherever applicable

Persons or Classes of Persons Entitled to Drive

IZADI BIN MOHAMED HUSSAIN, ARDZI SOLLEIHIN BIN SAMSUDIN

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purposes and

- (a) by the Insured in person in connection with his business or profession or
- (b) in connection with the Insured's business or profession

The Policy does not cover

- (i) Use for hire or reward
- (ii) Use for racing pacemaking, reliability trial or speed-testing
- (iii) Use for the carriage of goods (other than samples) in connection with any trade or business
- (iv) Use for any purpose in connection with the Motor Trade

Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

For list of Accident Reporting Centres, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6461 6555.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Transport Act, 1987 (Malaysia); and (2) the policy terms, conditions and exceptions of the Motorcycle Policy (Ref: MCY-MTMC.01)

Sompo Insurance Singapore Pte. Ltd.

Authorized Signatory

Date and Time of Issue: 25 OCTOBER 2017 13:19


IMPORTANT NOTICE

- o Keep the Certificate in your Motor Vehicle;
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act;
- o On the sale of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
- o This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name: 11E07901 & ENSURE PTE. LTD. (MOTORCYCLE) CI Code:MY3

BB1DA037B93C5AE6

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8620358H



Name
IZAI DI BIN MOHAMED HUSSAIN
اليزيدي بن محمد حسين

Race
JAVANESE


Date of birth
25-06-1988

Sex
M

Country/Place of birth
SINGAPORE

S8620358H


REPUBLIC OF SINGAPORE DRIVING LICENCE



IZAI DI BIN MOHAMED HUSSAIN

25 JUN 1988

29 JULY 2019



5682021



NRIC No. S8620358H



Date of issue
21-12-2016

APT BLK 483 TAMPINES STREET 44 #03-88
SINGAPORE 620483

NRIC No: S8620358H Date: 18/03/2018 (R)


YOU ARE PERMITTED TO DRIVE VEHICLES OF THE FOLLOWING CLASSES

Class 2B	Motorcycles <= 200 CC	23 Jul 2014
Class 2A	Motorcycles between 201 CC and 400 CC	18 Mar 2014
Class 2	Motorcycles > 400 CC	23 Oct 2017
Class 3	Motor cars <= 3500 kg with <= 7 passengers, exclusive of the driver, and motor tractors/vehicles <= 2500 kg	25 Mar 2016

S8620358H

S / No. 8000310805

NP 420A



FRH 48130

Senior Technical Specialist

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

