

## 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	30/06/2018 14:34
Date Of Accident	28/06/2018 07:40
Exact Location Of Accident	SIMEI ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE667B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NUR AMIRA BINTE JUMALI
NRIC No	S9142242E
Email Address	MIRADOLLS@ICLOUD.COM
Mobile Phone No	(LOCAL) +65-87827004
Alternative Phone No	OTHERS-87827004

### Vehicle Particulars

Manufacturer	HONDA
Model	CB400
Exact Purpose for which vehicle was being used at time of accident	OTW TO WORK
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
Fleet Policy	NO
Policy Number	5078643174-02
Cover Note Number	

### Driver

Name of Driver	NUR AMIRA BINTE JUMALI
NRIC No	S9142242E
Date Of Birth	04/11/1991
Occupation	INDOOR
Date Of Driving Pass	05/10/2015
Driving Experience	2 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-87827004
Fax Number	
Contact Number	OTHERS-87827004
Email Address	MIRADOLLS@ICLOUD.COM

Address	BLK 229 TAMPINES ST 23 #03-253
Postcode	521229
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	SIDE SWIPE
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?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TAMPINES EAST NPP
Police Station Address	<b>ROAD:</b> 263 TAMPINES STREET 21 #01-138 , <b>POSTCODE:</b> 520263 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7839999 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180628/2120

#### 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	SLK6390J
Vehicle Make/Model/Colour	HONDA VEZEL
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DANIEL LO KIANG HEONG
NRIC/Passport Number	S7323761J
Contact Number	90051556
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHC4999G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN GEOK SUAN
NRIC/Passport Number	S1315377I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	NUR AMIRA BINTE JUMALI
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	FBE667B
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

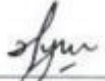
1. Please report **correctly** the details of the accident to speed up the claims process.
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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.

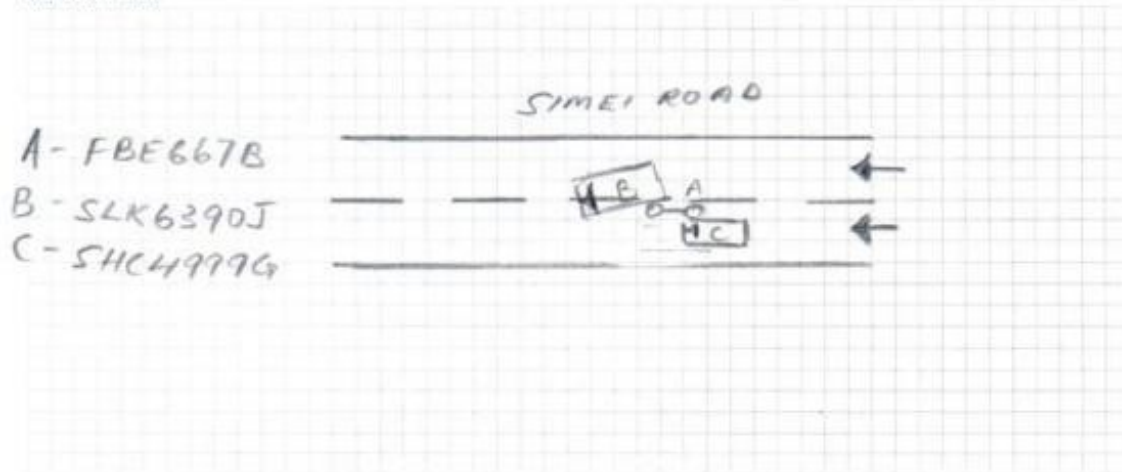
  
Policyholder's Signature  
Date & Time: 28/6/18

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

 30/06/18  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*P/s refer to the police report: T/20180628/3120*

*When asked if driver had a rearview camera, he denied. On the way to GGH, met with driver at the accident site <sup>again</sup> and a friend of mine found a rear view camera. ~~at this~~ Driver was defensive and refused to cooperate when asked for footage and phone number of taxi driver (Tan Geok Swan) as they exchanged particulars at the site. He mentioned that no such exchange took place. His tyre was also already in an unsafe driving condition to drive on the road as evident in his tyre threadings (photos attached in email).*

## DECLARATION

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

*[Signature]*  
 Policyholder's Signature  
 Date & Time: *28/6/18*

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

*[Signature]* *30/06/18*  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

Individual Statement



SINGAPORE  
POLICE FORCE

Police Station Of Origin:  
Tampines East NPP  
263 Tampines Street 21 #01-138  
SINGAPORE 520263  
Tel No: 1800-7839999



T/20180628/2120

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Report No. T/20180628/2120

CONTINUATION OF REPORT

**Brief Details.**

On 28/6/2018 at about 0740hrs, I was riding along Simei Road.

All of a sudden, the Honda Vezel in front of me had signaled left and changed lanes immediately. As a result, I was unable to react in time and I collided into the rear left side of the car. I was flung off my motorcycle as a result of the impact.

I remained conscious throughout the accident. I had managed to obtain the particulars of the Vezel driver. There was also a taxi involved as when I was flung off my motorcycle, my motorcycle had then hit an oncoming taxi.

After the accident, I had gone to see my doctor who had then referred me to Changi General Hospital for treatment. I had then went there for outpatient treatment and received 7 days of medical leave (28/6/2018 -4/7/2018).

As a result of the accident, I sustained multiple abrasions on my hands as well as a sprained right ankle.



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180628/2120

1 of 4

Police Station Of Origin:  
Tampines East NPP  
263 Tampines Street 21 #01-138  
SINGAPORE 520283  
Tel No: 1800-7838999

Report No: T/20180628/2120

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/06/2018 15:38	Video Report No.:	Station Diary No.: 28
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### Informant's Particulars

Name of Informant: NUR AMIRA BINTE JUMALI			Address: APT BLK 229 TAMPINES STREET 23 #03-253 SINGAPORE 521229		
ID Type / ID No.: NRIC NO / S9142242E			Contact No.: Home/Office: Mobile: 87827004		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 26	Date of Birth: 04/11/1991	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: PRE-SCHOOL TEACHER			Driving Licence Information: Class: Date of Expiry:		

### General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/06/2018 07:40	Type of Location: Straight Road
Location: Along Road 1 SIMEI ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE667B	Motorcycle	HONDA	CB400	Black	Slightly Damaged	0
SHC4999G	Car	TOYOTA	PRIUS TAXI (SMRT)	Maroon		0
SLK639DJ	Car	HONDA	VEZEL 1.5X HYBRID AT ABS D/AIRBAG 2WD	Black		0

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180628/2120

Police Station Of Origin  
Tampines East NPP  
253 Tampines Street 21 #01-138  
SINGAPORE 520263  
Tel No: 1800-7839999

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Report No. T/20180628/2120

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE667B	NTUC Income Insurance Co-Operative Limited	5078643174-02	23/03/2018	22/03/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	NUR AMIRA BINTE JUMALI	ID No.	S9142242E
Related Vehicle	FBE667B (Motorcycle)	Contact No.	87827004
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	28/06/2018	Date Discharge	NIL
No. of Days granted Medical Leave	07	Degree of Injury	Slight
Driver			
Name	TAN GEOK SUAN	ID No.	S1315377I
Related Vehicle	SHC4999G (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	DANIEL LO KIANG HEONG	ID No.	S7323781J
Related Vehicle	SLK6390J (Car)	Contact No.	90051556
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL



## Police Report



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POLICE FORCE**

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263 Tampines Street 21 #01-138  
SINGAPORE 520263  
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T/20180628/2120

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Police Report



SINGAPORE  
POLICE FORCE

Police Station Of Origin:  
Tampines East NPP  
263 Tampines Street 21 #01-138  
SINGAPORE 520263  
Tel No: 1800-7839999



T/20180628/2120

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Report No. T/20180628/2120

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:

G/

Sgt 3 BRYAN LIM GHIM SONG

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
Staff Sgt WONG SIEU LUI  
Contact No.: 65476151

Authentication Stamp  
NP150

Signature Of Informant:

*Handwritten signature*

Date/Time:  
26/06/2018 15:38

Classification Of Case: