SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number

Contact Number

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 <u>truthful and accurate</u> 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 aforesaid.

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	10/07/2018 13:17
Date Of Accident	09/07/2018 15:00
Exact Location Of Accident	ALONG JALAN TENAGA TOWARDS KAKI BUKIT RD 3
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	FBG4568S
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD HANAFI BIN ABDUL MOLOK
NRIC No	S9138561I
Email Address	SEHAZIN@YMAIL.COM
Mobile Phone No	(LOCAL) +65-82335864
Alternative Phone No	OFFICE-82335864
Vehicle Particulars	
Manufacturer	GILERA
Model	RUNNER ST200-198CC
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	PNMC2018-00000593
Cover Note Number	12/02/2018 - 11/02/2019
Driver	
Name of Driver	MUHAMMAD HANAFI BIN ABDUL MOLOK
NRIC No	S9138561I
Date Of Birth	29/10/1991
Occupation	OUTDOOR
Date Of Driving Pass	07/05/2010
Driving Experience	8 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82335864

OFFICE-82335864

SEHAZIN@YMAIL.COM

Address BLK 628 BEDOK RESERVOIR ROAD #02-1672

Postcode S470628

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

Insurance Company of Driver's Own Vehicle

Vehicle

011111

-

General Information of the Accident

Type Of Accident COLLIDED INTO MOTORCYCLIST

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.

1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

EUNOS NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 629 BEDOK RESERVOIR ROAD #01-1620 , POSTCODE:

470629, COUNTRY: SINGAPORE

Police Station Contact **TEL NO**: 1800-4439999 - **FAX NO**: 62444376

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER TO POLICE REPORT ATTACHED.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera? Was there any audio recorded?

YES NO

NO

Details of Witness 1

Name SYUQRIE
Phone Number 85698544

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLL6816T

Vehicle Make/Model/Colour NA
Details Of Properties NA

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number NA

Address

NA NA

Postcode

Postcode

Insurance Company Name

Nature Of Damage

NA

No. Of Passenger (Including Driver)

AND DESCRIPTION OF REAL PROPERTY.	DETAILS OF INJURED PERSON 1		
Name	MUHAMMAD HANAFI BIN ABDUL MOLOK		
Approximate Age			
Injuries Sustain	LEFT RIBCAGE, ABRASION ON LEFT ELBOW, LEFT KNEE & RIGHT KNEE		
Injured person in which vehicle?	FBG4568S		
Were seat belts worn?			
Was this injured conveyed to hospital by ambulance?	YES		
Address	BLK 628 BEDOK RESERVOIR ROAD #02-1672		

S470628

Accident Sketch Plan

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
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- 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
- 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)

Lunderstand, 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.

Date & Time

Of driver is not the a

Date & Time:

Reporting Centre Perso

NRIC/FIN No

Accident Sketch Plan

ETCH PLAN A: FBG 4588 S	B: SLL 6816T
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Salan Tenage	12
CRIBE CIRCUMSTANCES OF THE ACCIDENT	Jud 12
Please refer to 1	Police report attached.
	is there is FWD
	FIFTH 4568 S DAME OF ACCOUNTY 9/07/2018
	Reporting Only Due Damage Claim Trud Party Claim
Ival	lestop: - Brofia Motor Trading OIL
CLARATION	
Ve declare the foregoing particulars are true in every respec	1 1
icyholder sienature Driver's Signature	TULY 2018 Reporting Centre Personne's Signature
licyholder's Signature Driver's Signature te & Time If driver is not the poli	

Police Report Pg. 1





Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999 1 of 3 Report No. T/20180709/2153

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/07/2018 18:31			Vide Report No.:	Station Diary No.: 42		
Informa	nt's Particu	ulars				
Name of Informant: MUHAMMAD HANAFI BIN ABDUL MOLOK ID Type / ID No.; NRIC NO / S9138561I Nationality: SINGAPORE CITIZEN			Address: APT BLK 628 BEDOK RESERVOIR ROAD #02-1672 SINGAPORE 470628			
			Contact No.: 'Home/Office:	Mobile: 82335864		
			Email:			
Sex: Age: Date of Birth: Male 26 29/10/1991 Race: Malay Occupation: DESPATCH RIDÉR			Type of Informant: Rider			
			Language:	Institution / School Name:		
			Driving Licence Information: Class: 2B	Date of Expiry:		

Type of Accident:	Injury Attended by Police	Drink Drive:	Date/Time of Accident: 09/07/2018 15:00	Type of Location Straight Road	
JALAN TENA KAKI BUKIT I ALONG JALA CARPARK Weather:	ROAD 3	S KAKI BUKIT ROA	D 3 BEFORE BLK 655	JALAN TENAGA Road Speed Limit:	
Clear		Dry Traffic Control:		Traffic Volume:	
Traffic Flow: Two Way		Not Controlled		Light	

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBG4568S	Motorcycle	PIAGGIO	GILERA RUNNER ST 200	White	Seriously Damaged	1
SLL6816T	Car	NISSAN	QASHQAI 2.0 CVT ABS D/AIRBAG 2WD 5DR S/R		Slightly Damaged	1

Police Report Pg. 1





Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999 2 of 3 Report No. T/20180709/2153

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
FBG4568S	FWD Singapore Pte. Ltd	PNMC2018- 00000593	12/02/2018	11/02/2019	

Any Pedestrian Ir	rvolved: No					
No. of Pedestrians Injured: NIL Use of Pe				edestrian Crossing: NA		
Rider						
Name	MUHAMMAD HANAFI BIN ABDUL MOLOK			ID No.		S9138561I
Related Vehicle	FBG4568S (Motorcycle)			Conta	ct No.	82335864
Hospital/Clinic	CHANGI GENERAL HOSPITAL			Class Driving Licent Expiry	g ce &	Class: 2B Date of Expiry: NIL
Date Treatment	09/07/2018 Date Disc		Date Disc	harge	09/07	/2018
No. of Days granted Medical Leave 06 Degree			Degree of	Injury	Sligh	

Brief Details.

On 09/07/2018 at about 1500hrs, I was riding my motorcycle bearing license plate number FBG4568S along Jalan Tenaga towards Kaki Bukit Road 3 at about 30 to 40km/hr. I saw that there was a white in color car in front of me. However, she was driving more towards the left side of the lane. All of a sudden, she made a right turn towards the carpark of blk 655 Jalan Tenaga. I was unable to stop my motorcycle in time and I then collided on to the right side of her vehicle. Due to the impact, I flew about 4 meter away from the accident location and I landed on the grass patch on the opposite side. I wish to inform that I do not have any in-car camera. I was then subsequently conveyed by ambulance to Changi General Hospital and I was granted 6 days of medical leave. I wish to inform that I sustained fracture on my left ribcage, abrasion on my left elbow, left knee, right knee. I wish to inform that she did not indicate her intention to make a right turn and I believe that she did not check her blind-spot before making the right turn.

Police Report Pg. 1





Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999 3 of 3 Report No. T/20180709/2153

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 2 CHOO YOU CHENG, EUGENE	Signature of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 1 09/07/2018 18:31
Officer In Charge Of Case: TP / GIT / Insp MOHAMMED FADZLY BIN ABDUL AZIZ Contact No.: 65476355	Classification Of Case:
Authentication Stamp NP168 SIGNATURE	E



YOUR THIRD PARTY MOTORCYCLE INSURANCE SUMMARY

Please call +65-6322-2072 for FWD Emergency Assistance if Your Motorcycle breaks down or is involved in an accident. All accidents must be reported within 24 hours or the next working day of the incident regardless of whether it will lead to a claim.

POLICY NUMBER

PNMC2018-00000593

About this policy

Premium paid

S\$174.26

Coverage start date : 12/02/2018

(Inclusive of GST)

Coverage end date

11/02/2019

Who is insured to ride:

You Only

About you (As the policyholder)

Your name

Muhammad Hanafi Bin Abdul Molok

Address

628 Bedok Reservoir Road #02-1672 Singapore 470628

Email

sehazin@ymail.com

NRIC/FIN

591385611

Current no claims discount

10%

Gender

Male

Years of riding experience

82335864

Mobile Number

Date of birth

29/10/1991

Certificate of merit

About your motorcycle

Motorcycle make and model:

Piaggio Other Models 126-205cc

Motorcycle plate number

FBG4568S

Year of first registration: 2012

Issued on:

09/02/2018

Abhishek Bhatia

Chief Executive Officer 4 FWD Singapore Pte Ltd

Shrtie

Please refer to contract for specific terms, conditions and exclusions of this policy.

Please immediately inform us at +65-6820-8888 or email us to contact.sg@fwd.com if any details in this Motorcycle Insurance Summary need to be changed.

FWD Singapore Pte. Ltd. 6 Temasek Boulevard, # 18-01 Suntec Tower 4, Singapore 038986. T: (65) 6820 8888. Company Registration No. 200501737H | www.fwd.com.sg Copyright © 2017 FWD Singapore Pte. Ltd. All Rights Reserved.

Driver IC & Licence Pg. 1

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$91385611





MUHAMMAD HANAFI BIN ABDUL MOLOK

محمد هانافی بن عبدامولوك

MALAY

. 13856

29-10-1991 M

SINGAPORE





