

## 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 willful 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	25/06/2018 10:50
Date Of Accident	23/06/2018 13:15
Exact Location Of Accident	TPE TOWARDS CHANGI AIRPORT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP2030K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	AHMAD FADHLI BIN MOHAMED
NRIC No	S8736982Z
Email Address	PIDIDIPI6@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90097074
Alternative Phone No	OFFICE-80000000
<b>Vehicle Particulars</b>	
Manufacturer	NISSAN
Model	SYLPHY
Exact Purpose for which vehicle was being used at time of accident	
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	PRIVATE CAR
<b>Insurance Company</b>	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29064833 QMX
Cover Note Number	
<b>Driver</b>	
Name of Driver	AHMAD FADHLI BIN MOHAMED
NRIC No	S8736982Z
Date Of Birth	14/11/1987
Occupation	INDOOR
Date Of Driving Pass	24/09/2007
Driving Experience	10 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90097074
Fax Number	
Contact Number	OFFICE-80000000
Email Address	PIDIDIPI6@GMAIL.COM

Address 11  
Postcode  
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 - HEAD TO REAR  
Weather Conditions RAINING  
Road Surface WET

**Other Information**

Was any foreign vehicle involved in this accident? YES  
Foreign Vehicle Registration Number JRX6476 (MOTORCYCLE)  
Number of vehicles involved in the accident  
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) 3  
Passenger 1  
NAME: : RAFIDAH BINTE MOHDARON  
GENDER: : FEMALE  
Passenger 2  
NAME: : ADLEA MAGHFIRAH BINTE AHMAD FADHLI  
GENDER: : FEMALE

**Details of Police Action**

Was the accident reported to the police? YES  
If Yes, Please state which Police Station  
Police Station Name TAMPINES NEIGHBOURHOOD POLICE CENTRE  
Police Station Address ROAD: 6 TAMPINES AVE 4 , POSTCODE: 529682 , COUNTRY: SINGAPORE  
Police Station Contact TEL NO: 1800-5871999 - FAX NO: 65871699  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

**Circumstances of Accident**

REFER TO POLICE REPORT - T/20180623/2101

**Attachment(s)**

Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? YES  
Remarks/ Reasons: FILE TOO BIG  
Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number FBE2325A  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category MOTORCYCLE

Name of Driver . ABDUL MUHAIMIN  
NRIC/Passport Number S9214988I  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number FBF299A  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category MOTORCYCLE  
Name of Driver MD DZULFIKIR  
NRIC/Passport Number S9215288Z  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number JRX6476  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category MOTORCYCLE  
Name of Driver LEE  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name ABDUL MUHAIMIN  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle?  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? YES  
Address  
Postcode

**DETAILS OF INJURED PERSON 2**

Name LEE  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? JRX6476  
Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

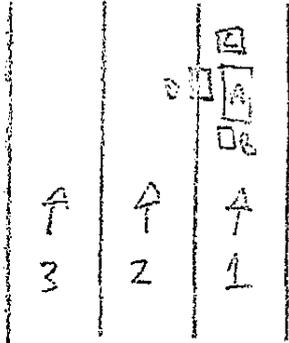
YES

Address

Postcode

Sketch Plan

SKETCH PLAN



A - SKP 20301K

B - FBE 2325A

C - FBF 2999A

D - JRN 6476

TPE (downhill change)

near ECP EXIT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As stated in police statement made on 23/6/18

DECLARATION

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

*Sadiq*  
Policyholder's Signature  
Date & Time: 25/6/18

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

*[Signature]*  
25/6/2018  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## SKETCH PLAN

### IMPORTANT NOTICE

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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.
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5. Any false reporting may be referred to the Police for investigation.
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7. By the lodging 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)**

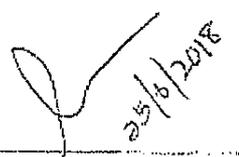
I understand, acknowledge, agree and consent that:

- (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: 25/6/18

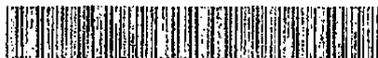
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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





**SINGAPORE  
POLICE FORCE**



T/20180623/2101

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

2 of 4

Report No. T/20180623/2101

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKP2030K	MSIG INSURANCE (SINGAPORE) PTE. LTD.	A29084833QMX	10/12/2017	09/12/2018

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Rider			
Name	ABDUL MUHAIMIN	ID No.	S9214988I
Related Vehicle	FBE2325A (Motorcycle)	Contact No.	98418404
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

Rider			
Name	MD DZULFIKIR	ID No.	S9215288Z
Related Vehicle	FBF299A (Motorcycle)	Contact No.	97654020
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

Rider			
Name	MR LEE	ID No.	NIL
Related Vehicle	JRX6476 (Motorcycle)	Contact No.	94729788
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



**SINGAPORE  
POLICE FORCE**



T/20160523/2101

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

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Report No. T/20160523/2101

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	AHMAD FADHLI BIN MOHAMED	ID No.	S8736982Z
Related Vehicle	SKP2030K (Car)	Contact No.	90097074
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the above-mentioned date and time, I was driving along the TPE towards Changi Airport, adjacent KPE exit. I was driving V1 along lane 1 of a 4 lane road. It was raining heavily and I noticed in front of me that the two motorcyclist(V2 and V3) had fallen and were on the road. I did not see what happened which caused them to fall off their bikes.

I slammed my brakes to avoid hitting them however as I did not managed to stop in time. I collided into the motorcycle which was on the road. At that point of time, the two riders of said motorcyclist had managed to ran to the side of the expressway. As such, I only collided into V2 and not to anyone.

V4 did not managed to stop in time and collided into the rear of my vehicle.

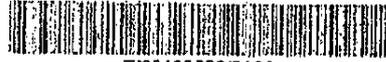
We all alighted and exchanged particulars.

Police and Ambulance were at scene. I have CCTV covering the front of my vehicle and it was recording when the accident happened. I am not sure of the estimated cost of repairs for my vehicle. Riders of V3 and V4 was conveyed to the hospital. I wish to state that my speed prior to accident was below 80km/h.

V1: SKP2030K  
V2: FBF299A  
V3: JRX6476  
V4: FBE2325A



**SINGAPORE  
POLICE FORCE**



T/20180623/2101

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

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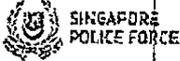
Report No. T/20180623/2101

**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 NURFAIZ BIN NOORDIN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 23/06/2018 16:10
Officer In Charge Of Case: TP / GIT / SI NORASHIKIN BINTE DAUD Contact No.: 65476439	Classification Of Case:
Authentication Stamp NP156	  SIGNATURE



**SINGAPORE  
POLICE FORCE**



T/20180623/2116

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

1 of 3

Report No. T/20180623/2116

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 23/06/2018 17:47		Vide Report No.:		Station Diary No.: 60	
<b>Informant's Particulars</b>					
Name of Informant: LEE TED FUJ			Address:		
ID Type / ID No.: FIN NO / G8353478N			Contact No.: Home/Office:		Mobile: 94729788
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 31	Date of Birth: 11/05/1987	Type of Informant: Rider		
Race: Chinese			Language:		Institution / School Name:
Occupation: Bus driver			Driving Licence Information: Class: 2B,3,4A		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 23/06/2018 13:30	Type of Location:
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBF299A	Motorcycle				Slightly Damaged	0
JR86476X	Motorcycle				Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20180623/2116

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

2 of 3

Report No. T/20180623/2116

**CONTINUATION OF REPORT**

Rider			
Name	LEE TED FUI	ID No.	G8353478N
Related Vehicle	JR86476X (Motorcycle)	Contact No.	94729788
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3,4A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	20	Degree of Injury	Slight

**Brief Details.**

On the above mentioned date, time and location, I was traveling along PIE when the car in front me jam braked. I then braked and prevented a collision. However, the motorcycle (FBF299A) had hit me from behind causing my motorcycle to skid.

I am lodging this report for insurance claim.



**SINGAPORE  
POLICE FORCE**



T/20180623/2116

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

3 of 3

Report No. T/20180623/2116

**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 THIVYASHINI D/O PANNIRSELVAM	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 23/06/2018 17:47
Officer In Charge Of Case: TP / GIT / SI NORASHIKIN BINTE DAUD Contact No.: 65476439	Classification Of Case:
Authentication Stamp NP168	



T/20180623/2144

1 of 3

Report No. T/20180623/2144

### Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No T/20180623/2116

Report Number T/20180623/2144

Vide Report Number T/20180623/2116

Date/Time of Report Made 23/06/2018 21:16

Place Report Lodged Traffic Police Division HQ

Type of Informant Rider

Name of Informant Lee Ted Fui

ID Type / ID No. FIN NO / G8353478N

Home/Office

Mobile 94729788

Email

Type of Accident Injury / Conveyed By Ambulance

Drink Drive No

Anyone conveyed by ambulance No

Date/Time of Accident 23/06/2018 13:30

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JRX6476X	Motorcycle				Slightly Damaged	0

Handwritten signature and official stamp area.



T/20180623/2144

2 of 3

Report No. T/20180623/2144

## Continuation of CSF For NP168

### Brief Facts.

On the abovementioned date, time, location, I was travelling along TPE, not as stated in the earlier report T/20180623/2116. My correct vehicle number is JRX6476X: *h*



T/20180623/2144

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Report No. T/20180623/2144

### Continuation of CSF For NP168

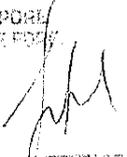
**Sketch Plan**

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.

Case Sensitivity	No
Officer-In-Charge of Case	TP / GIT / NORASHIKIN BINTE DAUD
Classification of Case	1) INJURY / CONVEYED BY AMBULANCE

SINGAPORE  
POLICE FORCE



SIGNATURE



**SINGAPORE  
POLICE FORCE**



T/20180623/2131

2 of 4

Report No T/20180623/2131

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

**CONTINUATION OF REPORT**

FBF299A	AXA INSURANCE SINGAPORE PTE LTD	VMZ/P1701370	08/02/2018	07/02/2019
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Any Pedestrian Involved: No  
No. of Pedestrians Injured: NIL  
Use of Pedestrian Crossing: NA

Name	ABDUL MUHAIMIN	ID No.	NIL
Related Vehicle	FBE2325A (Motorcycle)	Contact No.	96418404
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

Name	MUHAMMAD DZUL FIKRI BIN YAAKOB	ID No.	S9215288Z
Related Vehicle	FBF299A (Motorcycle)	Contact No.	97654020
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	23/06/2018	Date Discharge	23/06/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Name	LEE	ID No.	NIL
Related Vehicle	JRX6478 (Motorcycle)	Contact No.	94729788
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



**SINGAPORE  
POLICE FORCE**

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

CONTINUATION OF REPORT

Report No: 1/20180605/2131  
3 of 4

Name	AHMAD FADHIL		ID No	NIL
Related Vehicle	SKP2030K (Car)		Contact No	90097074
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	

Tampines NPC  
No. 6 Tampines Avenue 4  
Singapore 529682  
Tel: 1800-5871999

**Brief Details.**

On 23/06/2018 at about 1310hrs I was riding along Lane 1 of TPE towards Changi Airport proceeding to work at Changi Airport. While I was riding just before Lor Halus exit, one Malaysian motorcycle bearing registration number JRX6476 fell on the road. Due to the sudden fall, I was not able to avoid his motorcycle and I later collided into his motorcycle resulting me to overthrown from my motorcycle. *And I also wish to add on that suddenly there is a car*

*came and hit my motorcycle.*  
I then got up and realized there were a total of 3 motorcycles and 1 car involved in the accident. After exchanging particulars, I then proceeded to Changi General Hospital to seek medical attention and was given 3 days MC.

*braking*  
I would like to state that prior to the accident, I was riding behind the Malaysian bike and I observed one red in colour Mercedes car was driving dangerously and keep on ~~breaking~~ continuously for no reason even though there were no vehicle in front of the Mercedes car. I however was unable to see the vehicle registration number of the car due to the heavy rain.

Tampines NPC  
No. 6 Tampines Avenue 4  
Singapore 529682  
Tel: 1800-5871999  
25 JUN 2018