

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 liability.
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	24/09/2018 09:43
Date Of Accident	20/09/2018 16:40
Exact Location Of Accident	ALONG BKE TOWARDS SLE (EXITING BKE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE2240K
Insured/Policyholder	
Name Of Registered Owner	ABDUL MAJID RIDZUAN BIN ABDULLAH @NOEL DAVIES
NRIC No	S2001957C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91173342
Alternative Phone No	OTHERS-91173342

Vehicle Particulars

Manufacturer	YAMAHA
Model	Y125Z-124CC
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY HOME
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	5093878888-01
Cover Note Number	

Driver

Name of Driver	ABDUL MAJID RIDZUAN BIN ABDULLAH @NOEL DAVIES
NRIC No	S2001957C
Date Of Birth	27/11/1950
Occupation	OUTDOOR
Date Of Driving Pass	27/01/1978
Driving Experience	40 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91173342
Fax Number	
Contact Number	OTHERS-91173342
Email Address	NOEMAIL

Address	BLK 786F WOODLANDS DRIVE 60 #09-07
Postcode	736786
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	DRIZZLING
Road Surface	OILY

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	WOODLANDS NPC
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , 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 POLICE REPORT T/20180920/2150

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	SFW2286L
Vehicle Make/Model/Colour	TOYOTA COROLLA ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KHOO TECK YEE
NRIC/Passport Number	S1563923G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GZ7750C
Vehicle Make/Model/Colour	NISSAN NV350
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIM LEONG ENG
NRIC/Passport Number	S1557600F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	GBE8059D
Vehicle Make/Model/Colour	TOYOTA DYNA
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ELAYAPERUMAL KANNAN
NRIC/Passport Number	G6855695W
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	ABDUL MAJID RIDZUAN BIN ABDULLAH @NOEL DAVIES
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBE2240K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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:

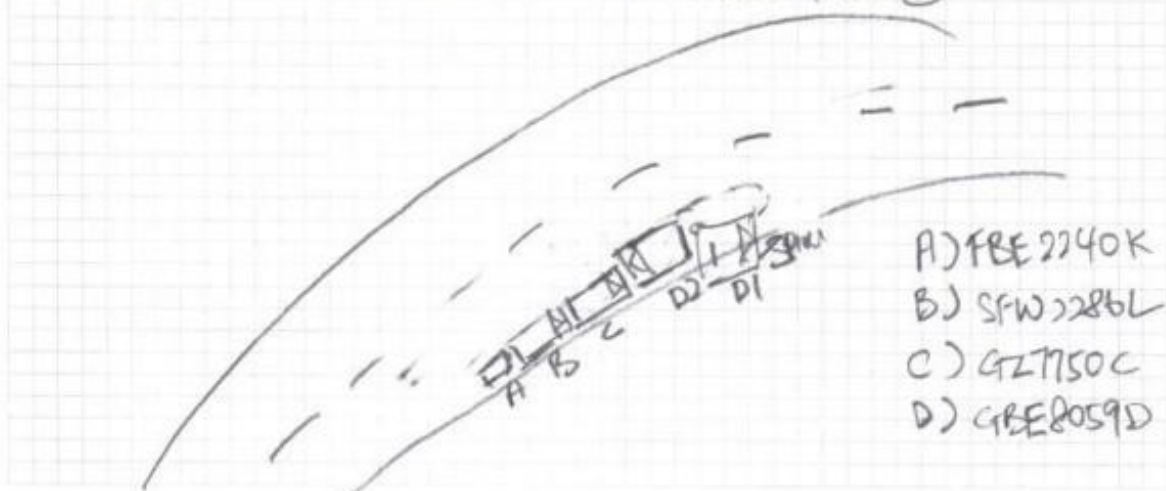
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Accident Sketch Plan

SKETCH PLAN Along BKE Towards SUE (EXITING BKE)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten note: Refer to Police Report 7/20180920/2150

DECLARATION

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

Signature: *[Signature]*
Date & Time:

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

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180920/2150

1 of 3

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20180920/2150

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/09/2018 18:47		Vide Report No.:		Station Diary No.: 225
Informant's Particulars				
Name of Informant: ABDUL MAJID RIDZUAN BIN ABDULLAH		Address: APT BLK 786F WOODLANDS DRIVE 60 #09-07 SINGAPORE 736786		
ID Type / ID No.: NRIC NO / S2001957C		Contact No.: Home/Office:		Mobile: 91173342
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 67	Date of Birth: 27/11/1950	Type of Informant: Rider	
Race: Indian		Language:		Institution / School Name:
Occupation: Bus driver		Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/09/2018 16:50	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 BUKIT TIMAH EXPRESSWAY SELETAR EXPRESSWAY Along BKE towards SLE (exiting BKE).				
Weather: Drizzling		Road Surface: Oily		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE2240K	Motorcycle	YAMAHA	YBR125	Black	Seriously Damaged	0
GBE8059D	Lorry				Seriously Damaged	0
GZ7750C	Van				Seriously Damaged	0
SFW2286L	Car				Slightly Damaged	1

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180920/2150

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

2 of 3

Report No. T/20180920/2150

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE2240K	NTUC Income Insurance Co-Operative Limited	5093878888-01	30/08/2018	17/07/2019

Brief Details.

On the 20/09/2018 at about 1650hrs, I was riding my motorcycle bearing plate no: FBE2240K, along BKE to SLE (exiting BKE) and travelling on the outer lane, there was a lorry bearing plate no: GBF8059D, which in front of my motorcycle suddenly spin and caused the van (behind of the lorry) bearing plate no: GZ7750C, to hit onto the lorry front part. And the car (behind of the van) bearing plate no: SFW2286L, hit onto the right side of the van. Subsequently, I skidded and hit onto the rear side of the car and I fell onto the road.

After which, I picked myself up and I inspect my motorcycle, the body kit of my motorcycle was broken and I suffered abrasion on my right elbow, right knee, right toe and left middle finger, pain my on right chest area due to the fall. The front part of the lorry and the van was seriously dented, the right bumper of the car was scratched.

I wish to state that I make this report are for my insurance company purpose. I also wish to state that the van driver namely: Elayaperumal Kannan, FIN: G6855695W, lorry driver namely: Lim Leong Eng, IC: S1557600F and the car driver namely: Khoo Teck Yee, IC: S1563923G.

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999



T/20180920/2150

3 of 3

Report No. T/20180920/2150

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:

J/
Sgt 2 CHOON EE SHEN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
20/09/2018 18:47

Officer In Charge Of Case:
TP / GIT /
SI NG CHWEE THENG
Contact No.: 65476397

EN 130

Classification Of Case:



Authentication Stamp

NP168

Signature:

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 - 17:00
UEN: S863300200 / GST Reg. No.: M400017738

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: NHAY18123270 Vehicle Registration No: FGF2280K
Name (as shown in NRIC): ABDUL MAJID PIDZIAN BIN ABDULLAH NRIC/FIN/Passport No: 82001957C
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address: _____ Singapore ()
Contact (Tel): _____ Mobile No.: 91173342
Email Address: _____
Date of Accident: 20/09/2018 Time of Accident: 16:40
Place of Accident: Away from Road Towards SR (Exit) BKK
Insurance Company: NHUL

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Vehicle O number to GBE8059D on skid marks

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Rafiq
NRIC/FIN No.: 8810/2018
Date: