

## 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 20:07
Date Of Accident	20/09/2018 15:25
Exact Location Of Accident	BUGIS JUNCTION BASEMENT 2 CARPARK OFFICE TOWER
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBJ7481Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SOPHI BIN JAMALUDDIN
NRIC No	S8134108G
Email Address	EZZA_FLICKY@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91053717
Alternative Phone No	OTHERS-90033827

### Vehicle Particulars

Manufacturer	YAMAHA
Model	FZ16-153CC (M)
Exact Purpose for which vehicle was being used at time of accident	BIKE WAS PARKED
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	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	
Cover Note Number	MT2017TR01668

### Driver

Name of Driver	NORISMALIZA BINTE ISMAIL
NRIC No	S8931569G
Date Of Birth	10/09/1989
Occupation	INDOOR
Date Of Driving Pass	14/09/2017
Driving Experience	1 YEAR AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91053717
Fax Number	
Contact Number	OTHERS-90033827
EEmail Address	EZZA_FLICKY@HOTMAIL.COM

Address	BLK 56 COMMONWEALTH DRIVE #08-81
Postcode	141056
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KOLAM AYER NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 72 GEYLANG BAHRU #01-3038 , <b>POSTCODE:</b> 330072 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2969999 - <b>FAX NO:</b> 62937659
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT A/20180922/2072

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

# Accident Sketch Plan

## SKETCH PLAN

### IMPORTANT NOTICE

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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 interested parties.
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:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 24 September 2018  
4:08 PM

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

Accident Sketch Plan

SKETCH PLAN

UNKNOWN BIKE WAS  
PARKED.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT.  
A/20180922/2072

DECLARATION

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

Policyholder's Signature  
Date & Time:

*Ferna*  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:  
24 sept 2018  
4:08 pm

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

POLICE REPORT



**SINGAPORE  
POLICE FORCE**



A/20180922/2072

1 of 2

Report No. A/20180922/2072

**POLICE REPORT (NP299)**

Police Station Of Origin  
Kolam Ayer NPP  
72 Geylang Bahru #01-3088 SINGAPORE  
330072  
Tel No: 1800-2969999

Date/Time Report Made 20/09/2018 15:26		Vide Report No.		Station Diary No. 7	
Name Of Informant NOR. MALIZA BINTE ISMAIL		Address APT BLK 56 COMMONWEALTH DRIVE #08-81 SINGAPORE 141056			
ID Type / ID No. NRIC NO / S8931569G		Contact No. Home/Office		Mobile 90033827	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation OFFICE ADMIN ISTRATION		Sex Female	Age 29	Date of Birth 10/09/1989	Race Boyanese
Institution/School Name		Language			
Date/Time Of Incident 20/09/2018 13:00 - 20/09/2018 15:25		Location Of Incident 230 VICTORIA STREET BUGIS JUNCTION TOWERS SINGAPORE 188024 Basement 2 nearer to the entrance			

**Brief details.**

On the 20/09/2018 at about 1300hrs, I went with my friend namely Zaidah Hp: 93391631 for some leisure at Bugis Junction. At about 1524hrs we went back to the parking lot located at basement 2 office tower area, nearer to the entrance where we had parked our motorcycles. When we reached our motorcycles we discovered that there was a motorcycle part underneath my motorcycle FBJ 7481Y. I made a check and realized that the part doesn't belong to my motorcycle, Zaidah then checked her motorcycle.

Signature Of Officer Recording The Report:

A / Sgt 2 ANAND KUMAR S/O SASITARAN

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
A / Marina Bay N.P.C /  
SI SNG LAK HUA, JOHN  
Contact No.: 64359152.

Authentication Stamp

Signature Of Informant:

Date/Time:  
22/09/2018 15:26

Classification Of Case:



POLICE REPORT



SINGAPORE  
POLICE FORCE



A/20180922/2072

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POLICE REPORT (NP299)

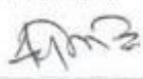
CONTINUATION OF REPORT

Report No. A/20180922/2072

FBG5326S, and saw that the dislodged part was actually her radiator guard, she then made a check on her motorcycle and there were no other damages. Upon further inspecting my motorcycle I discovered that the handle bar was out of alignment and there are scratches on the left side to my motorcycle, I also had difficulty starting my motorcycle, both my side mirror was bent.

We approached the security office and he took down our details and went to take a look at the area where we had parked our motorcycle, the security officer then took some pictures and told us that they will look into it and will call us back. On the 21/09/2018 Zaidah received a call Mr. Azhar Tel: 64325173 from the Bugis Junctions management stating that they had viewed the CCTV and saw that a subject was seen parking beside one of our motorcycles and when he fell it caused a chain reaction which ended in one motorcycle falling and it hit the other motorcycle, the subject was then seen picking up the fallen motorcycle and straightening the slanted motorcycle, the subject was then seen riding off. I would like to state that the management had refused to provide us with the footage or the license plate number of the subject, as such I am lodging this report as they would only release it to the authorities, and for insurance claim.

That's all.

Signature Of Officer Recording The Report: A / Sgt 2 ANAND KUMAR S/O SASITARAN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 22/09/2018 15:26
Officer In-Charge Of Case: A / Marina Bay N.P.C / SI SNG LAK HUA, JOHN Contact No.: 64359152	Classification Of Case:
Authentication Stamp	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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: S645500200 / GST Reg. No.: M40001738

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 : M11A418124668 Vehicle Registration No: FBJ 7481 Y.  
Name (as shown in NRIC) : NORISMAJIZA BINTI ISMAIL NRIC/FIN/Passport No : S8931569C  
(\* Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore ( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 90033827  
Email Address : \_\_\_\_\_  
Date of Accident : 20/09/2008 Time of Accident : 15:25  
Place of Accident : Bukit Juncuon B2 Carpark Office Tower  
Insurance Company : Great American Insurance Co

(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:

Policy number to claim MT2017TR01668  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Policyholder / Driver's Signature  
Date:

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