

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	15/10/2018 20:52
Date Of Accident	12/10/2018 17:15
Exact Location Of Accident	ALEXANDRA RD(JUNCTION TOWARDS AYE TUAS)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBL3401U
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD THOIFIN BIN HANNABI
NRIC No	S8236472B
Email Address	NERD.MADHORSE82@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90466353
Alternative Phone No	OTHERS-90466353

Vehicle Particulars

Manufacturer	YAMAHA
Model	YZF-R3-321CC ABS
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	REPORTING ONLY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/18-388113-CA
Cover Note Number	

Driver

Name of Driver	MUHAMMAD THOIFIN BIN HANNABI
NRIC No	S8236472B
Date Of Birth	22/10/1982
Occupation	OUTDOOR
Date Of Driving Pass	03/03/2011
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90466353
Fax Number	
Contact Number	OTHERS-90466353
E-Mail Address	NERD.MADHORSE82@GMAIL.COM

Address	BLK 906 JURONG WEST STREET 91 #04-173
Postcode	640906
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	NO COLLISION
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?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : WIFE GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG N.P.C
Police Station Address	ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181013/2080

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBD7971G
Vehicle Make/Model/Colour	HONDA CBR 400
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	82182411

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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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: 15/10/2018
1730 Hrs

Driver's Signature

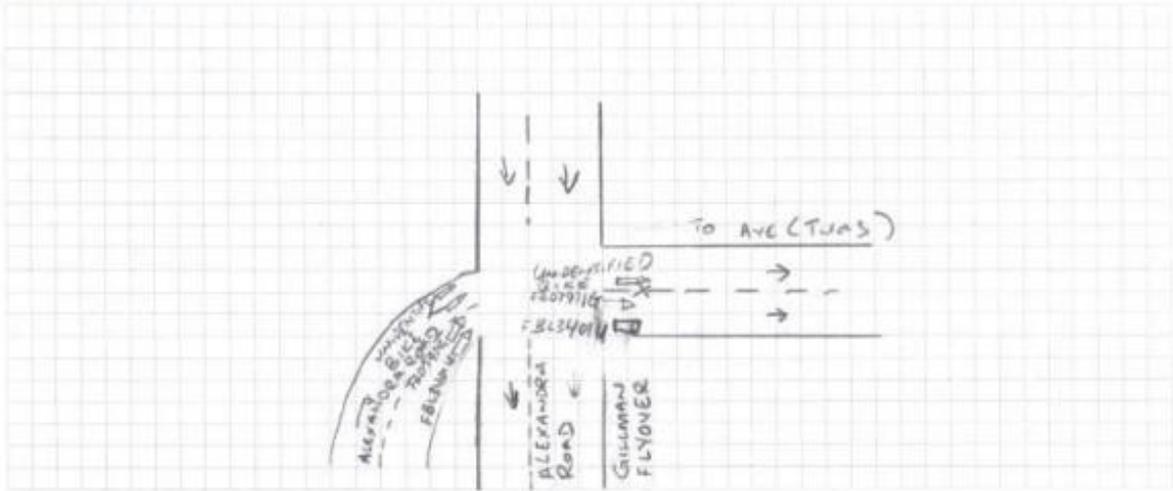
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name: [Signature]
NRIC/FIN No.: [Signature]

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
7/2018/10/3/2000

DECLARATION

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


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.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181013/2080

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

1 of 4
Report No. T/20181013/2080

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/10/2018 13:30	Vide Report No.: D/20181012/0087	Station Diary No.: 47
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Informant's Particulars

Name of Informant: MUHAMMAD THOIFIN BIN HANNABI		Address: APT BLK 906 JURONG WEST STREET 91 #04-173 SINGAPORE 640906	
ID Type / ID No.: NRIC NO / S8236472B		Contact No.:	Mobile: 90466353
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 35	Date of Birth: 22/10/1982	Type of Informant: Rider
Race: Malay		Language:	Institution / School Name:
Occupation: ASSISTANT SUPERINTENDENT		Driving Licence Information: Class: 2B,2A,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/10/2018 17:15	Type of Location: Y-Junction
Location: Along Road 1 AYER RAJAH EXPRESSWAY AYE towards Tuas, at Gillman Flyover				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBD7971G	Motorcycle	HONDA	CB400	Black	Seriously Damaged	0
FBL3401U	Motorcycle	YAMAHA	YZF-R3 ABS	Grey	No Damage	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBL3401U	MSIG INSURANCE (SINGAPORE) PTE. LTD.	MSDSMT18388113	07/09/2018	06/09/2019

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20181013/2080

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Report No. T/20181013/2080

Station Of Origin:
Ang N.P.C
ong West Avenue 5 SINGAPORE
82
lo: 1800-7929999

CONTINUATION OF REPORT

Details of Person Involved

Type of Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
Rider			
Name	Unknown Rider	ID No.	NIL
Related Vehicle	FBD7971G (Motorcycle)	Contact No.	82182411
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	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	Serious
Pillion			
Name	MUHAMMAD THOIFIN BIN HANNABI	ID No.	S8236472B
Related Vehicle	FBL3401U (Motorcycle)	Contact No.	90466353
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
Pillion			
Name	NORAZRIYANA BINTE BAZURI	ID No.	S8208195Z
Related Vehicle	FBL3401U (Motorcycle)	Contact No.	97625754
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

Brief Details.

On 12/10/2018 at about 1715hrs, I was riding my motorcycle registration number: FBL3401U on the right lane of the 02 lanes road along Gillman Flyover towards AYE. My wife was my pillion. We stopped at the traffic junction and there were another 03 motorcycle beside me. When the traffic turned to my favor, I continued to ride forward to perform a right turn. As I was riding forward, I took a glance on my left side and I noticed that there was a Honda CB400 motorcycle registration number: FBD7971G riding closely to another motorcycle (I did not notice the registration number). Subsequently the CB400 rider fell down in front of my motorcycle and I applied emergency brake and avoided him, I immediately alighted my motorcycle to render aid. There is no CCTV on my motorcycle and I am not aware of what caused the

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20181013/2080

Police Station Of Origin:
Nanyang N.P.C
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649482
Tel No: 1800-7929999

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Report No. T/20181013/2080

CONTINUATION OF REPORT

accident.

My wife who was my pillion observed that both the CB400 rider and another rider were riding very closely. And it seems like the CB400 rider was trying to avoid collision with the other rider, thus he fell down onto the road. I suffered a burn at the back of my thigh as my leg contacted with my exhaust pipe while trying to avoid collision with the CB400 rider. My pillion suffered pain at the back and pelvis area but none of us were conveyed to hospital.

Vide incident: D/20181012/0087, TP IO - in charge: IO Hong Lee, contact number: 6547 6438

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20181013/2080

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Report No. T/20181013/2080

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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 3 CHEN JIANDA

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
13/10/2018 13:30

Officer In Charge Of Case:
TP / GIT /
Sgt 2 LIM HONG LEE
Contact No.: 65476438

Classification Of Case:

Authentication Stamp



Singapore Police Force

ID

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8236472B



Name
MUHAMMAD THOIFIN BIN HANNABI

Race
MALAY

Date of birth
22-10-1982

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENSE



License Number: S8236472B
Name
MUHAMMAD THOIFIN BIN HANNABI

Birth Date: 22 Oct 1982
Issue Date: 01 Feb 2010



NRIC No. S8236472B

Date of issue
01-02-2010

APT BLK 008 JURONG WEST STREET #1 #04-173
SINGAPORE 640808

NRIC No: S8236472B Date: 10/08/2018

NOT LICENCED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIFIED

	PASS DATE
Class 1B Motorcycles \leq 200 CC	06 Aug 2001
Class 2A Motorcycles between 201 CC and 400 CC	03 Mar 2011
Class 3 Motor cars \leq 2000 kg with \leq 7 passengers, exclusive of the driver; and motor tractors/vehicles \leq 2500 kg	18 Nov 2007

S/No. 9000144461

58236472B

NP 425A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



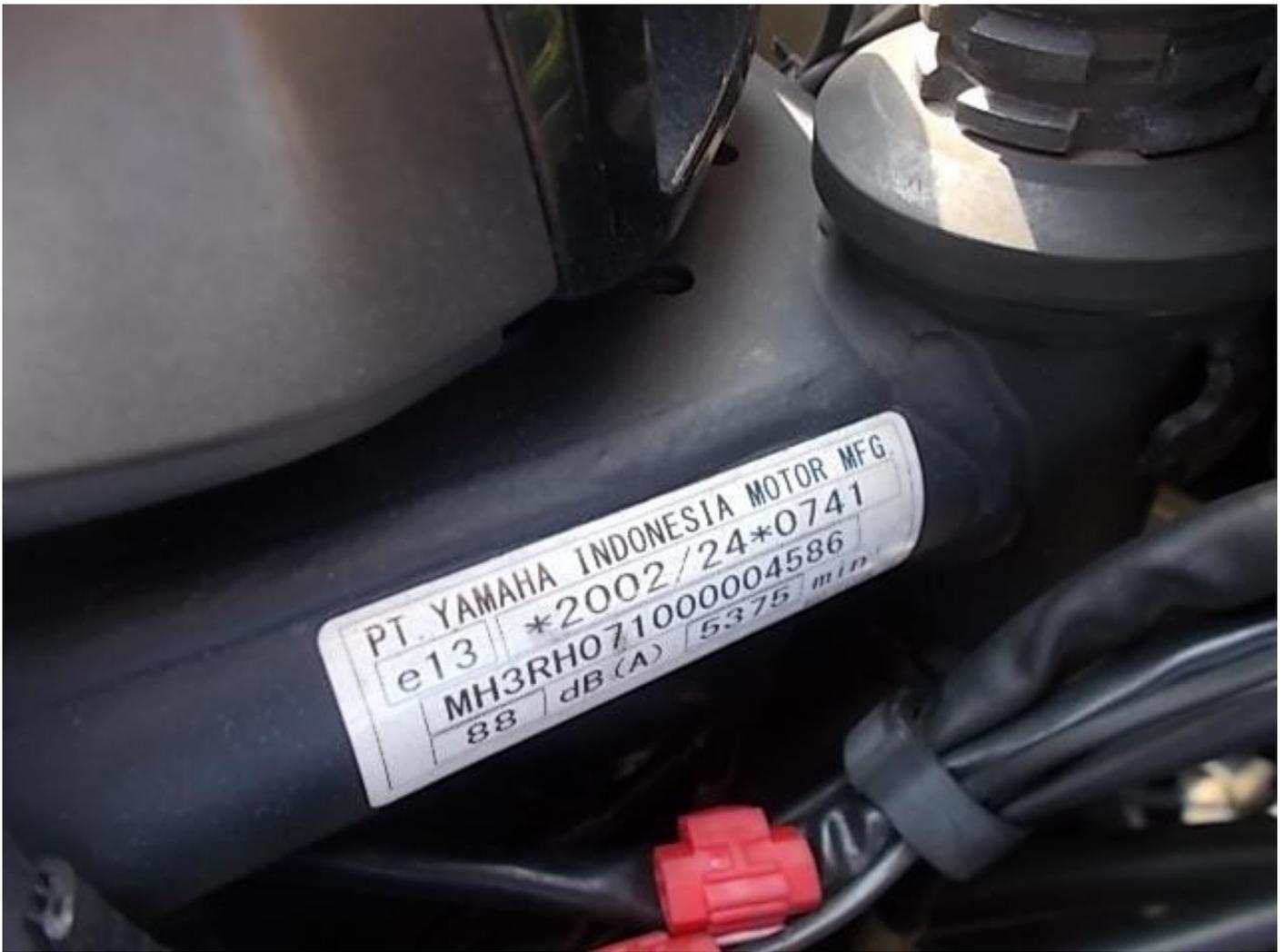
Accident Photo



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: S665500200 / GST Reg. No.: M400017795

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 : 29 MAY 18 134129 Vehicle Registration No: FBL34014
Name (as shown in NRIC) : MUHAMMAD THOIFIN BIN HANIMATI NRIC/FIN/Passport No : S82364728
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Singapore ()
Contact (Tel) : Mobile No. : 90466353
Email Address :
Date of Accident : 12/10/2018 Time of Accident : 17:15
Place of Accident : ALYANORA (JUNCTION TOWARDS AYR TUNN)
Insurance Company : MLC

(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:

Incorrect Vehicle number FBL34014 on search form

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.
Date: 26/10/2018