

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 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	01/10/2018 12:15
Date Of Accident	30/09/2018 16:20
Exact Location Of Accident	TAMPINES AVE 10
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN3589B
Insured/Policyholder	
Name Of Registered Owner	SHAWAL SHUKRI BIN MOHAMED BASRI
NRIC No	S9508901A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88087948
Alternative Phone No	HOME-88087948

Vehicle Particulars

Manufacturer	YAMAHA
Model	XABRE TFX150
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	AN3168267
Cover Note Number	

Driver

Name of Driver	SHAWAL SHUKRI BIN MOHAMED BASRI
NRIC No	S9508901A
Date Of Birth	21/03/1995
Occupation	INDOOR
Date Of Driving Pass	06/09/2018
Driving Experience	0 YEAR AND 0 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-88087948
Fax Number	
Contact Number	HOME-88087948
EEmail Address	NOEMAIL

Address	64 WOODLANDS DRIVE 16 #01-30 SINGAPORE 737894
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	SIDE SWIPE
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?	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	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT/ SKETCH PLAN

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	SLG4299A
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	TAN PANG KWANG
NRIC/Passport Number	
Contact Number	81139323
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	SHAWAL
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBN3589B
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan Pg. 1

AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01 AXA Tower
 Singapore 068811
 Customer Service Centre #B1-01
 Tel: 6338 7288 Fax: 6338 2522
 Website: www.axa.com.sg
 GST Registration Number: 199903512M



Original

A/c No: 03375
Policy No (if any): New Business
SmartDrive Quote Ref:

MOTOR COVER NOTE

No. **AN3168267 ()**

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189) – Republic of Singapore; or
- The Road Transport Act 1987 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
- And any subsequent revisions to the above Acts and Agreements

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

THE COMPANY	AXA INSURANCE PTE LTD
INSURED	SHAWAL SHUKRI BIN MOHAMED BASRI
MAKE AND DESCRIPTION OF VEHICLE	YAMAHA XABRE TFX150
VEHICLE REGISTRATION NO.	FBN3589B
YEAR OF MANUFACTURE	2017
ENGINE NO.	G3G8E0037076
CHASSIS NO.	MH3RG3710JK027438
ENGINE CAPACITY/TONNAGE	150
COVER TYPE	COMPREHENSIVE
HIRE PURCHASE	LOOI'S MOTOR ENTERPRISE PTE LTD
VALUE (\$)	MARKET VALUE
PERIOD OF INSURANCE	FROM: 14-Sep-2018 TO: 13-Sep-2019
EXCESS (\$)	800
AXA PREMIUM WORKSHOP?	Yes

I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).

AXA INSURANCE PTE LTD

Authorised Signature

Issued by ANDA INSURANCE AGENCIES PL on 14-Sep-2018 4:23:03 PM

- Note: This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.
- Premium for time on risk will be charged subject to minimum S\$53.50 (inclusive of GST) if the policy is cancelled after the inception date.
 - An administrative fee of \$26.75 (inclusive of GST) will be charged:
 - Cover note issued and cancelled before inception.
 - Retaining the old registration number for a new vehicle insuring with AXA.

PREMIUM WARRANTY

For Individual Customers:

Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid.

For Non-Individual Customers:

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception/renewal/endorsement. For all other cases, the premium in full should be paid before inception.

MT/C/NOTE/01/01

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9508901A



Name

SHAWAL SHUKRI BIN
MOHAMED BASRI

Race

JAVANESE

Date of birth

21-03-1995

Sex

M

Country of birth

SINGAPORE

S9508901A

REPUBLIC OF SINGAPORE DRIVING LICENCE

S9508901A



SHAWAL SHUKRI BIN
MOHAMED BASRI

Issue Date: 21 Mar 1995

Expiry Date: 24 Apr 2015



002419952J



4551814



NRIC No. S9508901A

Date of issue

25-03-2010

64 WOODLANDS DRIVE 16 #01-30
SINGAPORE 737894

NRIC No: S9508901A

Date: 18/05/2017

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Cl:

Class 3B

Motorcycles <= 300 CC

06 Sep 2018

Class 3A

Motor cars without clutch pedals <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles without clutch pedals <= 2500 kg

24 Apr 2015

S / No.9000283861

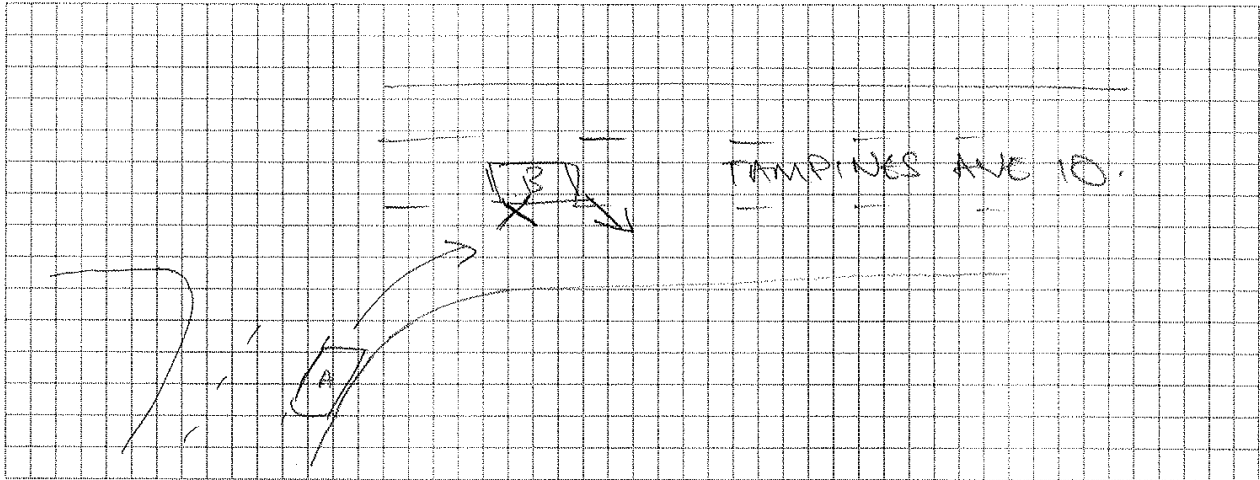
S9508901A

NP 428A



Licence No: S9508901A

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

3RD PART LEFT

- INJURY ON KNEE & RIGHT SHOULDER.
- BIKE FRAME SHIPPED IN POSITION.
- EXTERNAL SCRATCHES ON BIKE.
- INTERNAL PARTS UNSURE.

Important: You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.		- Reporting Only
		- Claim OD
		- Claim TP
	✓	- Claim OD/TP at other workshop


DECLARATION

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

[Signature] 01/10/18

Policyholder's signature
Date & Time

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



Reporting Centre Personnel's Signature
Name:
Nric/Fin No.

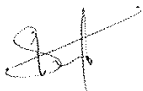
SKETCH PLAN

IMPORTANT NOTICE

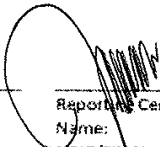
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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded 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: 01/10/18

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


Reporting Centre Personnel's Signature
Name: RIC/FIN/NC



**SINGAPORE
POLICE FORCE**



G/20180930/7044

1 of 2

POLICE REPORT (NP299)

Report No. G/20180930/7044

Police Station Of Origin
Bedok Police Divisional HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 30/09/2018 23:34	Vide Report No.	Station Diary No.
Name Of Informant SHAWAL SHUKRI BIN MOHAMED BASRI	Address 64 WOODLANDS DRIVE 16 #01-30 SINGAPORE 737894	
ID Type / ID No. NRIC NO / S9508901A	Contact No. Home/Office: Mobile: 88087948	
Nationality SINGAPORE CITIZEN	Email Address shawals22@gmail.com	
Occupation Immigration Officer	Sex Male	Age 23
Institution/School Name	Date of Birth 21/03/1995	Race Javanese
Date/Time Of Incident 30/09/2018 16:20	Location Of Incident TAMPINES AVENUE 10	

Brief details.

I, S9508901A, Shawal Shukri was riding (FBN3589B) towards Tampines Avenue 10 aft exiting TPE. I was riding on the 1st lane and there was a breakdown on the 3rd lane which caused a congestion at the 3rd and 2nd lane. As I was entering Tampines Ave 10, a car inched out and attempt to abruptly change from 2nd lane to 1st lane when I was beside it. I then jam braked and collided into a car , SLG4299A. The car side swiped my bike causing me to swerve and fell of my bike. The car has a dent on the side bumper above the right rear wheel. After the fall , I realised that I had injury on my left knee and a pain on my right shoulder. After the fall, the driver stepped out of the car and ask me what happened and how to

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 30/09/2018 23:34
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



G/20180930/7044

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20180930/7044

settle this accident. We then moved our vehicles to the road side and exchanged information (driving licenses). He then told me that he will send the vehicle to his workshop and I will bear the cost quoted by the workshop. After we part ways , I told him that I don't want to bear the cost and told him I will lodge a report and claim from insurance. I then proceed to the Tampines West NPC to request for assistance. The officer then told me to lodge a police report which I've done so. Following that , I went to OneCare Clinic Tampines for a check up on my injuries. I received 3 days MC and have a to a follow up X-ray check on my injuries. Therefore I proceed to do a police report.

Subjects Involved			
Victim			
Person Name	SHAWAL SHUKRI BIN MOHAMED BASRI		
ID Type	NRIC NO	ID No	S9508901A
Gender	Male	Age	23
Race	Javanese	Language	English
Occupation	Immigration Officer	Address Type	
Address	64 WOODLANDS DRIVE 16 #01-30 SINGAPORE 737894		Mobile No
			88087948
Is Informant A Victim?	Yes		
Person Name	SHAWAL SHUKRI BIN MOHAMED BASRI (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required. Date/Time: 30/09/2018 23:34 Classification Of Case:
Signature Of Interpreter: Not applicable	
Officer In-Charge Of Case:	
Authentication Stamp	

OneCare Clinic Tampines MRT

20 Tampines Central 1, #01-27 Tampines MRT Station Singapore 529538
Tel: 67853702 | Fax: 67853762

MEDICAL CERTIFICATE

This is to certify that **SHAWAL SHUKRI BIN MOHAMED BASRI (S9508901A)** is under treatment by me.

Unfit For Duty

Outpatient Leave: 3 Days From 30-09-2018 To 02-10-2018

Certified By:

Dr. Ammar Angullia (M61615Z)

Dr. Ammar Ayoob Angullia
MB BCH BAO (Ireland)
MCR No: 61615Z

Certificate No: MC/210101


Date of Visit: 30-09-2018

Date of Issue: 30-09-2018

Note:

This certificate is not valid for absence from court

This certificate is electronically generated. No signature is required.

 OneCare Clinic Tampines MRT Pte Ltd

20 Tampines Central 1 TEL 6785 3702
Tampines Mrt Station FAX 6785 3762
#01-27, S'pore 529538

OneCare Clinic Tampines

20 Tampines Central 1, #01-27 Tampines MRT Station Singapore 529538

Tel: 67853702 | Fax: 67853762

Co. Reg: 201709811R | GST. Reg: 201709811R

TAX INVOICE

SHAWAL SHUKRI BIN MOHAMED	Invoice No:	OCTM2018_11426
BASRI	Visit Date:	30-09-2018
(S9508901A)	Attending Doctor:	Dr. Ammar Angullia
64 01-30 WOODLANDS DRIVE 16		
SINGAPORE 737894		

Items :	Amount
Consultation	\$ 0.00
Consultation	\$ 0.00
Medication	\$ 77.90
ETORICOXIB TAB (ARCOXIA) 5 Tablet 120MG	\$ 14.00
FAMOTIDINE TAB (FAMODINE) 10Tablet 20MG	\$ 3.00
ORPHENADRINE/PARACET TAB (SUNITON) 450MG 20Tablet	\$ 5.00
FORSUDERM/FUSIDIC OINT 5G 1 Tube	\$ 5.90
DPT (BOOSTRIX) VACCINE 0.5ML 1 1 Vial	\$ 50.00
Investigation	\$ 20.00
DRESSING- SIMPLE 1	\$ 20.00
Others	\$ 0.00
Total :	\$ 97.90
GST 7% :	\$ 6.85
Subsidy Amount :	\$ 20.00
	\$ 20.00
Rounding :	\$ 0.00
Grand Total :	\$ 84.75

This receipt has been billed
to the Government via
MBS@Gov.

MBS@Gov

Sketch Plan Pg. 9

Items :

Paid By:
\$84.75 NETS
\$0.00

Amount Outstanding :

Amo.
\$ 0.00

(This is a computer-generated invoice. No Signature is required.)

Transfer Fee Enquiry

Page 1 of 1

> Back to OneMotoring

Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	FBN3589B		
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	YAMAHA		
Vehicle Model :	XABRE TFX150		
Chassis No. :	MH3RG3710JK027438		
Propellant :	Petrol		
Engine No. :	G3G8E0037076		
Engine Capacity :	150 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	285 kg		
Unladen Weight :	135 kg		
Year Of Manufacture :	2017		
Original Registration Date :	14 Sep 2018		
Lifespan Expiry Date :	-		
COE Category :	D - Motorcycle		
Quota Premium :	\$4,390.00		
COE Expiry Date :	13 Sep 2028		
Road Tax Expiry Date :	13 Mar 2019		
Inspection Due Date :	13 Sep 2021		
Intended Transfer Date :	02 Oct 2018		
CO2 Emission :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

You may print this page for reference.

OK

Print

Accident Photo



Accident Photo



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