

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	22/10/2018 19:46
Date Of Accident	16/10/2018 14:40
Exact Location Of Accident	ALONG JALAN EUNOS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBL300Y
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Insured/Policyholder

Name Of Registered Owner	MOHAMMAD NIDHAR BIN TAIB
Co Reg No	-
Email Address	AS5150@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-90293441
Alternative Phone No	OFFICE-93807723

Vehicle Particulars

Manufacturer	HONDA
Model	CBF1000-998CC (M)
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI18V05318/VMS/R2
Cover Note Number	

Driver

Name of Driver	MOHAMED AFFINO BIN MOHD AMIN
NRIC No	S7700626E
Date Of Birth	12/01/1977
Occupation	OUTDOOR
Date Of Driving Pass	12/04/2005
Driving Experience	13 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93807723
Fax Number	
Contact Number	OTHERS-90293441
Email Address	AS5150@HOTMAIL.COM

Address	BLK 543 PASIR RIS STREET 51 #04-06
Postcode	510543
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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	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?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	YES
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	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181017/2072

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJX4527B
Vehicle Make/Model/Colour	HYUNDAI LM TUCSON
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ABU BAKAR BIN ALIAS
NRIC/Passport Number	S1297048Z
Contact Number	94509636
Address	

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	MOHAMED AFFINO BIN MOHD AMIN
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBL300Y
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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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.

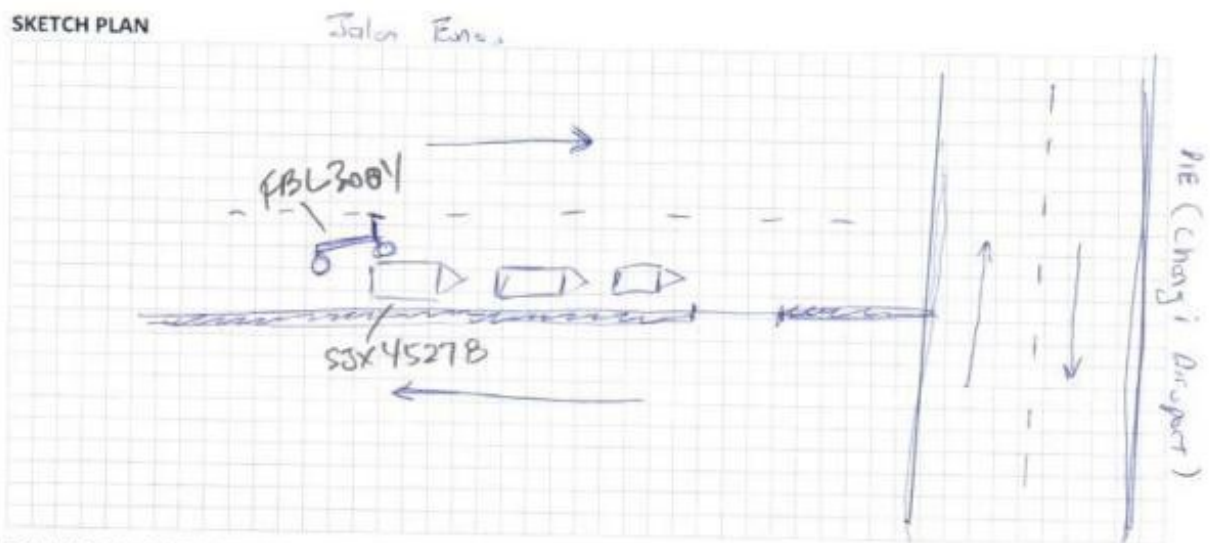
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 22/10/18

Reporting Centre Personnel's Signature
Name: *Joshua Nathan*
NRIC/FIN No. *9001 2345 6789*

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in the description area:

PLS REFER TO POLICE REPORT
7/2018/1017/2072

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.:

GLA/MS, SketchPlanForm, 5/18

22/10/18

22/10/2018

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181017/2072

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20181017/2072

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/10/2018 13:16	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: MOHAMED AFFINO BIN MOHD AMIN			Address: APT BLK 543 PASIR RIS STREET 51 #04-06 SINGAPORE 510543		
ID Type / ID No.: NRIC NO / S7700626E			Contact No.: Home/Office: Mobile: 93807723		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 41	Date of Birth: 12/01/1977	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: SCDF			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 16/10/2018 14:40	Type of Location:
Location: Along Road 1 JALAN EUNOS				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBL300Y	Motorcycle	HONDA	CRF1000A	Red		1
SJX4527B	Car	HYUNDAI	LM TUCSON 2.0L AUTO ABS D/AB 2WD 5DR	White		0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181017/2072

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20181017/2072

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMED AFFINO BIN MOHD AMIN	ID No.	S7700626E
Related Vehicle	FBL300Y (Motorcycle)	Contact No.	93807723
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	16/10/2018	Date Discharge	17/10/2018
No. of Days granted Medical Leave	08	Degree of Injury	NIL
Driver			
Name	ABU BAKAR BIN ALIAS	ID No.	S1297048Z
Related Vehicle	SJX4527B (Car)	Contact No.	94509636
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 16/10/2018 AT ABOUT 1442HRS AT JALAN EUNOS,

I WAS TRAVELLING BEHIND A CAR WHEN IT SUDDENLY JAMMED BRAKE. I THEN SWERVED TO THE LEFT TO AVOID IT BUT WAS UNABLE TO COMPLETELY AVOID IT. MY RIGHT FOOT REST GRAZED ALONG THE SIDE OF THE LEFT REAR BUMPER OF THE CAR UNTIL THE TYRE AREA. I MANAGED TO REGAIN CONTROL OF MY BIKE AND PARKED IT AT THE SIDE. I THEN EXCHANGED PARTICULARS WITH THE OTHER DRIVER AND HE EXPLAINED THAT SEVERAL CARS IN FRONT JAMMED BRAKE AS WELL. AMBULANCE WAS THEN CALLED AND I WAS CONVEYED TO CHANGI HOSPITAL.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20181017/2072

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20181017/2072

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:
TP /
LEE KWANG HONG KENDRICK

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt NOR FAIZAL BIN YAHYA
Contact No.: 65476202

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
17/10/2018 13:16

Classification Of Case:



ID

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7700626E



Name
MOHAMED AFFINO BIN MOHD AMIN
محمد الفينو بن محمد أمين
Place
MALAY
Date of birth
12-01-1977
Sex
M
Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number
S7700626E
Name
MOHAMED AFFINO BIN MOHD AMIN
Date of Birth
12 Jan 1977
Issue Date
09 Dec 2003



NRIC No. S7700626E



Date of issue
18-12-2003

APT BLK 543 PASIR RIS STREET 51 #04-08
SINGAPORE 510543
NRIC No: S7700826E Date: 04/04/2017

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class	Description	Pass Date
Class 2B	Motorcycles < 200 CC	24 Oct 1998
Class 2A	Motorcycles between 201 CC and 400 CC	09 Dec 2003
Class 3	Motorcycles > 400 CC	12 Aug 2005
Class 3	Motor cars < 2000 kg with < 7 passengers, exclusive of the driver, and motor tractors/trucks < 2000 kg	11 Nov 1998
Class 4	Heavy motor cars and motor tractors > 2000 kg	16 Jul 2013

S7700626E

S / No. 9000109023

NP426A

License No: S7700826E



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

