

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	28/11/2018 10:45
Date Of Accident	22/11/2018 09:55
Exact Location Of Accident	BRADDELL RD TWDS BARTLEY RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE4524D
Insured/Policyholder	
Name Of Registered Owner	HARON BIN ABDUL MALIK
NRIC No	S2162697Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96578484
Alternative Phone No	OFFICE-96578484

Vehicle Particulars

Manufacturer	HONDA
Model	FJS400A
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	THIRD PARTY
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/18-387793-CA
Cover Note Number	

Driver

Name of Driver	HARON BIN ABDUL MALIK
NRIC No	S2162697Z
Date Of Birth	30/12/1956
Occupation	INDOOR
Date Of Driving Pass	21/08/1978
Driving Experience	40 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96578484
Fax Number	
Contact Number	OFFICE-96578484
Email Address	NOEMAIL

Address	BLK 302A WOODLANDS STREET 31 #24-315
Postcode	731302
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	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.	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 EAST N.P.C
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

REFER TO POLICE REPORT - T/20181126/2093.

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 Witness 1

Name	
Phone Number	91007414
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD6137U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	

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

DETAILS OF INJURED PERSON 1	
Name	HARON BIN ABDUL MALIK
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	FBE4524D
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.

X 

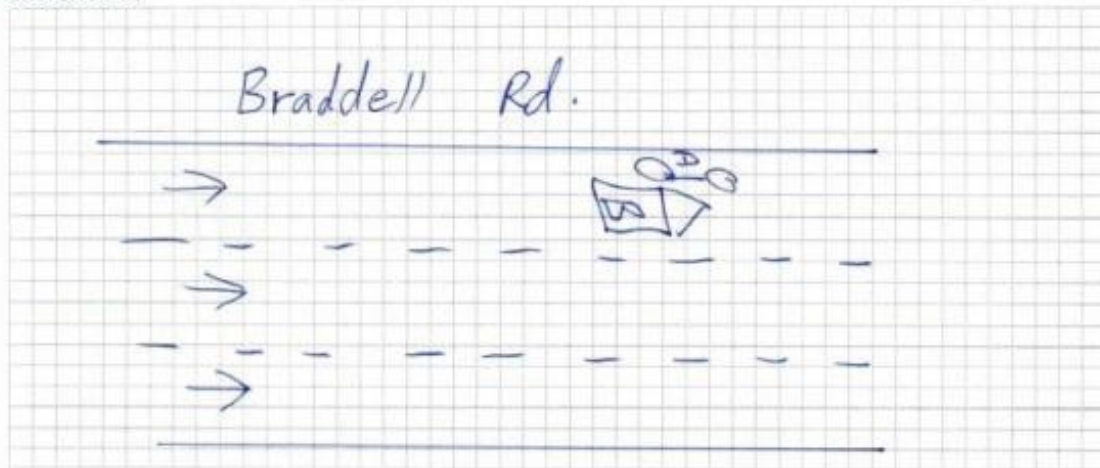
Policyholder's Signature
Date & Time:

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


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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As a police Report T/2018/1126/2093

DECLARATION

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

X

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/20181126/2093

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

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Report No. T/20181126/2093

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/11/2018 14:58	Vide Report No.:	Station Diary No.: 89
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Informant's Particulars

Name of Informant: HARON BIN ABDUL MALIK			Address: APT BLK 302A WOODLANDS STREET 31 #24-315 SINGAPORE 731302		
ID Type / ID No.: NRIC NO / S2162697Z			Contact No.: Home/Office: Mobile: 96578484		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 61	Date of Birth: 30/12/1956	Type of Informant: Rider		
Race: Malay			Language:	Institution / School Name:	
Occupation: Technical executive			Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/11/2018 09:35	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 BRADDELL ROAD BARTLEY ROAD				
Weather: Clear		Road Surface: Dry		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: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBE4524D	Motorcycle	HONDA	FJS400A	Silver	Seriously Damaged	0
XD6137U	Rubbish Truck					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE4524D	MSIG INSURANCE (SINGAPORE) PTE. LTD.	MSDSMT18387793	22/10/2018	21/10/2019

Police Report



**SINGAPORE
POLICE FORCE**



T/20181126/2093

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

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Report No. T/20181126/2093

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	HARON BIN ABDUL MALIK	ID No.	S2162697Z
Related Vehicle	FBE4524D (Motorcycle)	Contact No.	96578484
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	22/11/2018	Date Discharge	26/11/2018
No. of Days granted Medical Leave	18	Degree of Injury	Serious

Brief Details.

On 22nd November 2018 at about 0930hrs, I was riding along Braddell Road towards Bartley Road on the most left lane of 3 roads. Out of sudden, I felt a hard impact on my rear and I fell to the side. I am not sure what had happened. Passerby assist me and send me to the nearest clinic and subsequently I went to Khoo Teck Puat Hospital for further check ups. One of the witness Hp: 91007414 sent me a video of a footage of the incident and the video show that I was hit from the rear by a rubbish truck. I was given 18days of medical certificate and suffered from abrasions on right side of body and pain on back.

Police Report



**SINGAPORE
POLICE FORCE**



T/20181126/2093

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

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Report No, T/20181126/2093

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:

L/

Staff Sgt SITI SUFEA BINTE SA'ADON

SN 130

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt ONG YONG HOCK

Contact No.: 65476436

Signature Of Informant:

Date/Time:

26/11/2018 14:58

Classification Of Case:

Authentication Stamp

NP168

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

