

**NATIONAL Assessment Centre Services** (wef 1 Jan 2005)

Date In <b>03/01/18</b>	Job description	Date & Time Completed	Done by
Ref No <b>NA/MSG19000125/13</b>	SAS e-filing		
Veh No: <b>FU8075A</b>	E-mail (within 8hrs. A/C 2hrs)		
D.O.A <b>06/12/18</b> <b>2125</b>	i-Motor Claim Form		
OD <b>(TP)</b> Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: ( ) Tel: ( ) Fax: ( )

TP Particulars: Veh No: **SGK1192G** INC ( ) / Non-INC ( )

Owner / Driver: ( ) Tel: ( )

Policy No: ( ) Period: ( ) Cover Type: ( )

Confirmed by: ( ) Date: ( ) Time: ( )

Insured/Driver Liability: ( ) % [Note-Est. Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: (\$ ) Loading: \$1,000 ( ) / \$2,000 ( )

**General Remarks:-**

( ) Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co. ( )

Remarks:- (INC hotline: 6788 6616)	Date&Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

**Injury :** \_\_\_\_\_

Date/Time	Actions

NA1900124		Invoice Preparation Checklist		Amt (\$)	Amt (\$)
				1st Bill	Add Bill
<b>Claimant's Particulars :-</b>		1) AR : Accident Reporting (\$30);			
Driver/Owner:		2) DA : Damage Assessment (\$100); INC (\$80)			
Contact No:		3) TF : Towing Fee \$40/\$45			
Damaged Portion:		4) FT : Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):		5) FT : Follow-Through Survey (Resurvey) \$30			
Auditors' Comments :-		For claiming against INC Only (wef 10 Jan 2005)			
Cat. 1:		6) TR : Re-inspection \$75			
Cat. 2 / 3:		7) N1 : Idac DA + SMRT Survey \$160			
		8) NTUC Additional Services:-			
		OD*			
		*N5: Courtesy Car / Tpt Allowance \$5			
		*N6: Repair Co-ordination \$10			
		*N7: Post Repair Inspection \$25			
		*N8: DV / Collect Excess Coordination \$5			
		TP (N11) : TP (Non INC) against INC \$20			
		9) N12: Idac Mobile \$0			
		Invoice dated		Fee Charged	
		Invoice dated		Fee Charged	

### 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	03/01/2019 12:27
Date Of Accident	06/12/2018 21:25
Exact Location Of Accident	JUNC OF WOODLANDS AVE 4 & WOODLANDS DR 40
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FU8075A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RADUAN
NRIC No	S7330770H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84213867
Alternative Phone No	OTHERS-84213867

#### Vehicle Particulars

Manufacturer	YAMAHA
Model	RXZ
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
Fleet Policy	NO
Policy Number	MSD/VMT/18-377510-CA
Cover Note Number	

#### Driver

Name of Driver	MUHAMMAD NAZRUL BIN MOHD NOOR
NRIC No	S9323817F
Date Of Birth	11/07/1993
Occupation	INDOOR
Date Of Driving Pass	23/03/2017
Driving Experience	1 YEAR AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91014314
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 204 YISHUN ST 21 #02-275
Postcode	760204
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - SUB-RIDER
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 (including own vehicle) 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)	2
Passenger 1	NAME: : NUR HAWA BINTE NOOR DIN 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
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

PLS REFER TO THE POLICE REPORT:T/20181207/2042

#### 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	SGK1192G
Vehicle Make/Model/Colour	TOYOTA WISH
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	STEPHEN PANG
NRIC/Passport Number	S7220802A
Contact Number	98310826

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name MUHAMMAD NAZRUL BIN MOHD NOOR

Approximate Age

Injuries Sustain SLIGHT

Injured person in which vehicle? FU8075A

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

**DETAILS OF INJURED PERSON 2**

Name NUR HAWA BINTE NOOR DIN

Approximate Age

Injuries Sustain

Injured person in which vehicle? FU8075A

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

## SKETCH PLAN

### 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. 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:

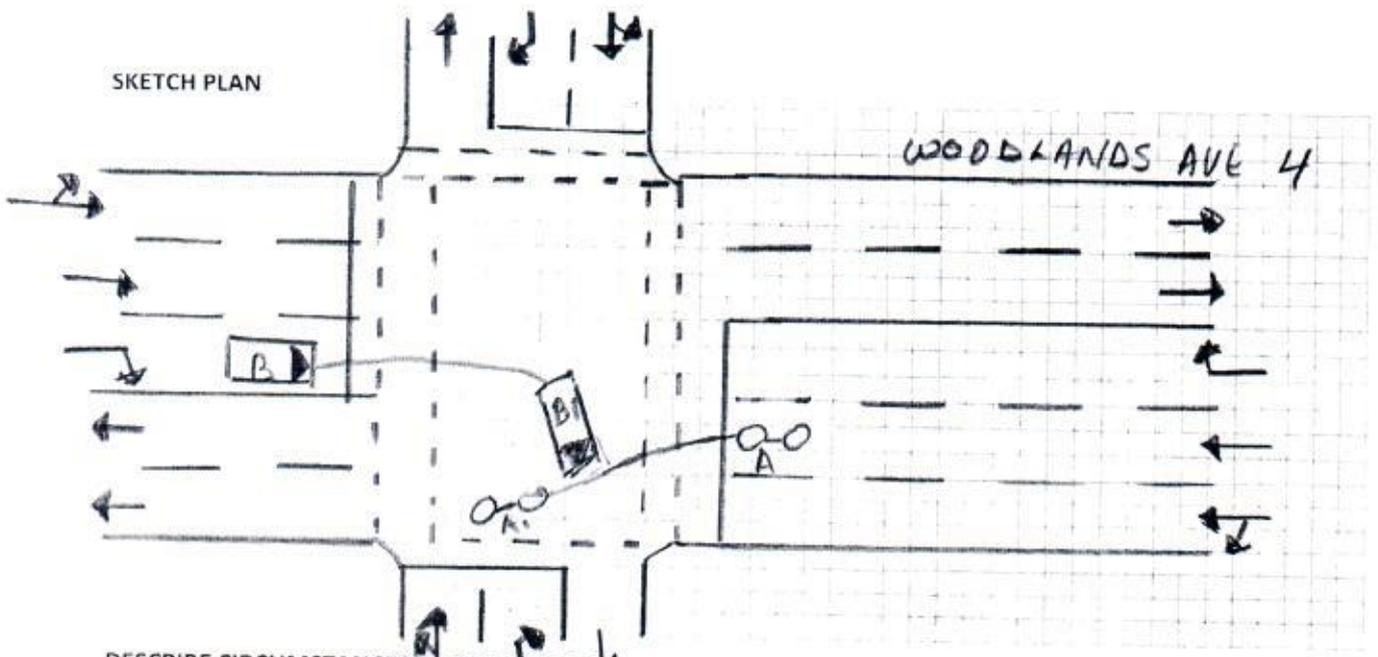
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

 03/01/19  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

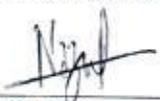
WOODLANDS DRIVE 40

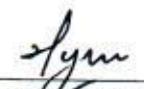
Pls refer to the police report: 5/2018/207/2042

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:

 03/01/19  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**



T/20181207/2042

1 of 3

Report No. T/20181207/2042

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

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 07/12/2018 11:47	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: MUHAMMAD NAZRUL BIN MOHD NOOR		Address: 204 YISHUN STREET 21 #02-275 SINGAPORE 760204	
ID Type / ID No.: NRIC NO / S9323817F		Contact No.: Home/Office: Mobile: 91014314	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 25	Date of Birth: 11/07/1993	Type of Informant: Rider
Race: Malay		Language: English	Institution / School Name:
Occupation: ENGINEER		Driving Licence Information: Class: 2B	Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/12/2018 21:25	Type of Location: X-Junction
Location: WOODLANDS AVENUE 4 WOODLANDS AVE 4 X WOODLANDS DR 40				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: SELF SKIDDED				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FU8075A	Motorcycle	YAMAHA	RXZ	Purple		1
SGK1192G	Car	TOYOTA	WISH 1.8 A	Grey		0

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20181207/2042

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Report No. T/20181207/2042

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

**CONTINUATION OF REPORT**

Rider			
Name	MUHAMMAD NAZRUL BIN MOHD NOOR	ID No.	S9323817F
Related Vehicle	FU8075A (Motorcycle)	Contact No.	91014314
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	06/12/2018	Date Discharge	07/12/2018
No. of Days granted Medical Leave	02	Degree of Injury	NIL
Pillion			
Name	NUR HAWA BINTE NOOR DIN	ID No.	S9322664Z
Related Vehicle	FU8075A (Motorcycle)	Contact No.	NIL
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	06/12/2018	Date Discharge	07/12/2018
No. of Days granted Medical Leave	04	Degree of Injury	NIL

**Brief Details.**

ON THE ABOVE MENTIONED DATE TIME AND LOCATION, I WAS RIDING ALONG THE SAID LOCATION. I WAS AT THE CENTER LANE OF 3 LANES GOING STRAIGHT TO WOODLANDS AVENUE 4. TRAFFIC LIGHT WAS GREEN FOR ME SO I HAVE THE RIGHT OF WAY. WHEN REACHING IN THE MIDDLE OF THE CROSS JUNCTION, SUDDENLY A CAR FROM THE OPPOSITE SIDE OF THE ROAD MAKE A SUDDEN RIGHT TURN. SO I JAM BRAKE AND SWERVED TO THE LEFT TO AVOID COLLISION WITH THE VEHICLE OF (SGK1192G) BUT END UP I FELL ON MY LEFT SIDE AND SKID FORWARD. FROM MY SIDE THERE WAS NO COLLISION BETWEEN ME AND THE SAID VEHICLE. THAT'S ALL.



**SINGAPORE  
POLICE FORCE**

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



T/20181207/2042

3 of 3

Report No. T/20181207/2042

**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 / MUHAMMAD HAZIQ BIN SAIFUDDIN
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIT / Sgt 3 RASHIDAH BINTE AZMAN Contact No.: 65476216

Signature Of Informant: 
Date/Time: 07/12/2018 11:47
Classification Of Case: 

Authentication Stamp  
NP168

# ACCIDENT STATEMENT

ACCIDENT DATE: (06 / 12 / 2018) (DD/MM/YYYY), TIME: (21 : 25) (HH:MM)

LOCATION: WOODLANDS AVENUE 4  
WOODLANDS AVE 4 - X WOODLANDS DR 4D

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FV 8075A  
b) INSURANCE COMPANY: MSIG  
c) POLICY NUMBER: \_\_\_\_\_  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: YAMAHA RYZ  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: \_\_\_\_\_ (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: MUHAMMAD NAZRUL BIN MOHD NOOR (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S9323817F CONTACT: 9101 4314  
c) ADDRESS: Block 204 #02-275 YISHUN ST 21

\*d) DATE OF BIRTH: (11 / 07 / 1993) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 23 MAR 2017

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: SUB RIDER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO) CONVEYED

7. a) REPORTED TO POLICE (YES / NO)  
IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SGK 1192G MODEL: WISH 1.8 A  
b) DRIVER'S NAME: STEPHEN PANG  
c) NRIC/FIN/PASSPORT: S7220802A CONTACT: 9831 0826

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

\*No of passenger  
(including driver)  
(2)

\*No of passenger  
(including driver)  
( )

\*No of passenger  
(including driver)  
( )

14/12/18  
waiting for  
veh & owner  
particulars

Email = nazrul.noor@gmail.com

fax =

video =

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9323817F



Name  
**MUHAMMAD NAZRUL BIN MOHD NOOR**

Race  
**MALAY**

Date of birth  
**11-07-1993**

Country of birth  
**SINGAPORE**

Sex  
**M**



REPUBLIC OF SINGAPORE DRIVING LICENCE



Identity Number  
**S9323817F**

Name  
**MUHAMMAD NAZRUL BIN MOHD NOOR**

Birth Date: **11 Jul 1993**

Issue Date: **23 Mar 2017**



4261826



NRIC No. **S9323817F**

Date of issue  
**11-08-2008**

Address  
**APT BLK 204 YISHUN STREET 21  
#02-275  
SINGAPORE 760204**

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

Class 2B Motorcycles =< 200 cc

EFFECTIVE DATE

**23 Mar 2017**

NP 428A





CA 500138

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)  
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6827 7800  
msig.com.sg

**CERTIFICATE OF INSURANCE**

Road Transport Act, 1987 (Malaysia)  
The Motor Vehicles (Third Party Risks) Rules, 1959 (Federation of Malaysia)  
The Motor Vehicles (Third Party Risks and Compensation) Act (CAP. 189 of the Revised Edition) (Republic of Singapore)  
The Motor Vehicles (Third Party Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)  
Or any Amendment, Act or Acts passed in substitution thereof.

CERTIFICATE NO : MSD/VMT/18-377510-CA A0074-001/10223

SUM INSURED : TPL  
EXCESS : NIL

1. Index mark and Registration Number of Vehicle : FJ8075A  
2. Name of Policyholder : YAMARA RADUAN 133 c.c.

3. Effective date of the Commencement of Insurance for the purposes of the Act : 1201AM 10/01/2018  
4. Date of Expiry of Insurance : 09/01/2019

5. Persons or Classes of Persons entitled to drive  
a. The Policyholder.

b. MUHAMMAD NABBU BIN MOHD NOOR ONLY  
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitation as to Use

Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

7. The Policy does not cover

1. Use for hire or reward.
  2. Use for racing, pace-making, reliability trial or speed-testing.
  3. Use for the carriage of goods (other than samples) in connection with any trade or business.
  4. Use for any purpose in connection with the Motor Trade.
- \* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Repl CN: 72061910  
18/01/2018 (KP)  
CACI-03 (05/13)

COMMERCIAL AGENCY PTE. LTD.  
Underwriting Agent  
For MSIG Insurance (Singapore) Pte. Ltd.

IK: 573307704  
HP: 84213867