

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	23/01/2019 12:43
Date Of Accident	22/01/2019 15:05
Exact Location Of Accident	ALONG BALESTIER RD TWDS THOMSON RD AFTER JLN DUSUN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG3948K
Insured/Policyholder	
Name Of Registered Owner	MUHAMAD AZRI BIN SUBARI
NRIC No	S8507897F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98397857
Alternative Phone No	OTHERS-98397857

Vehicle Particulars

Manufacturer	SYM
Model	GTS 200-172CC
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	P1923936
Cover Note Number	

Driver

Name of Driver	MUHAMAD AZRI BIN SUBARI
NRIC No	S8507897F
Date Of Birth	09/03/1985
Occupation	INDOOR
Date Of Driving Pass	20/03/2017
Driving Experience	1 YEAR AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98397857
Fax Number	
Contact Number	OTHERS-98397857
Email Address	NOEMAIL

Address	BLK 140C COPORATION DRIVE #07-70
Postcode	613140
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 (including own vehicle) 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	KAMPONG JAVA NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 KAMPONG JAVA ROAD , POSTCODE: 228892 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2959999 - FAX NO: 63918499
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

KINDLY REFER TO ATTACH POLICE REPORT NO.T/20190122/2148.

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	SFQ101G
Vehicle Make/Model/Colour	TOYOTA WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HUM MAN CHONG
NRIC/Passport Number	S0024345J
Contact Number	98183370
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	MUHAMAD AZRI BIN SUBARI
Approximate Age	
Injuries Sustain	4 DAYS MC
Injured person in which vehicle?	FBG3948K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN


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
B. 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.

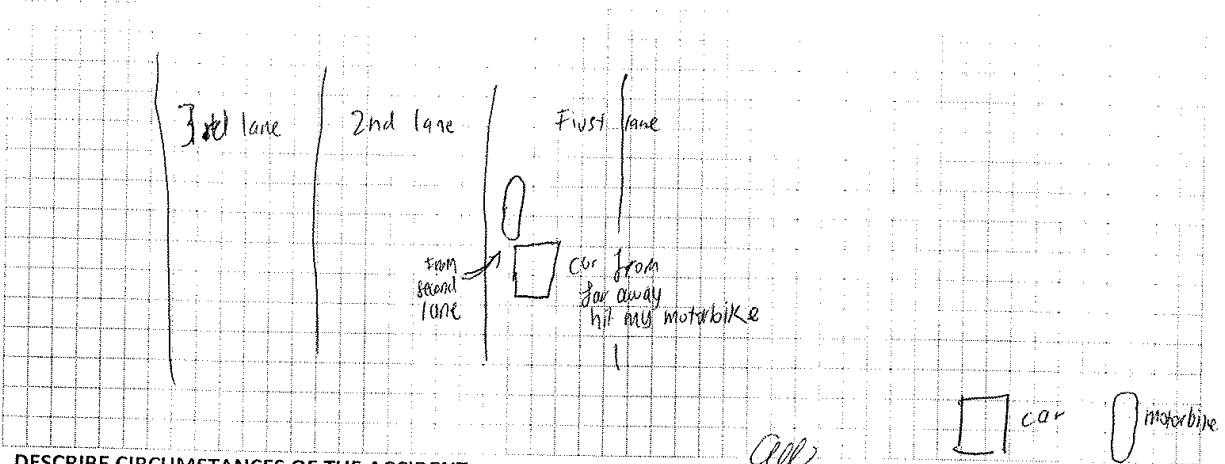
 23/11 1230 hours
 Policyholder's Signature
 Date & Time:

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


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

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22/1/2019 at about 1505 hours, I was riding my motorbike along Balestier Road towards Thompson Road. At that point of time I was driving on the center lane and after the junction of Balestier Road and Jalan Durian I decided to perform lane change. I then made a check on my right and I noticed that there was a car vehicle far apart, as such I signalled right and performed the lane change.

After successfully performed the lane change, I was already riding at the left side of the lane. Suddenly I felt a collision from the rear of my motorbike and at the next moment I lost balance and fell on the floor. Subsequently my motorbike fell and rested on me and I felt that my shoulder was resting on the dent of the vehicle that collided onto me.

Allu Police report as per attached.

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.

Allu 23/1/2020 hours

Policyholder's signature
Date & Time

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

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



**SINGAPORE
POLICE FORCE**



T/20190122/2148

1 of 4

Police Station Of Origin:
Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-2959999

Report No. T/20190122/2148

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/01/2019 21:07	Vide Report No.:	Station Diary No.: 347
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Informant's Particulars

Name of Informant: MUHAMAD AZRI BIN SUBARI			Address: APT BLK 140C CORPORATION DRIVE #07-70 SINGAPORE 613140		
ID Type / ID No.: NRIC NO / S8507897F			Contact No.: Home/Office: Mobile: 98397857		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 33	Date of Birth: 09/03/1985	Type of Informant: Rider		
Race: Indonesian			Language: English		Institution / School Name:
Occupation: Nurse			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/01/2019 15:05	Type of Location: Straight Road
Location: Along Road 1 BALESTIER ROAD				
Along Balestier Road towards Thomson Road, after the junction of Jalan Dusun				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No. of Passenger
FBG3948K	Motorcycle	SYM	GTS200	Silver	Slightly Damaged	0
SFQ101G	Car	TOYOTA		White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
FBG3948K	AXA INSURANCE SINGAPORE PTE LTD	P1923936	29/03/2018	28/03/2019



**SINGAPORE
POLICE FORCE**



T/20190122/2148

Police Station Of Origin:
Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-2959999

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Report No. T/20190122/2148

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMAD AZRI BIN SUBARI	ID No.	S8507897F
Related Vehicle	FBG3948K (Motorcycle)	Contact No.	98397857
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	04	Degree of Injury	Slight
Driver			
Name	Hum Mian Chong	ID No.	S0024345J
Related Vehicle	NIL	Contact No.	98183370
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 22/1/2019 at about 1505hrs. I was riding my motorbike (FBG3948K) along Balestier Road towards Thomson Road. At that point of time I was driving on the center lane and after the junction of Balestier Road and Jalan Dusun I decided to perform a lane change. I then made a check on my right and I noticed that there was a car vehicle far apart, as such I signalled right and performed the lane change.

After successfully perform the lane change, I was riding at the left side of the lane. Suddenly I felt a collision from the rear of my motorbike and at the next moment I lost balance and fell on the floor. Subsequently my motorbike fell and rested on me and instantly I felt that my shoulder was resting on the dent of the vehicle that collided onto me. After the accident, both parties exchanged particulars and no one requires immediate medical attention.

On the same day I felt pain on my right knee, right foot and right chest, as such I visited Tan Tock Seng Hospital for medical treatment and I was subsequently given 4 days of MC from the Doctor.

I would like to state that my vehicle sustained scratches on the front region, before the front wheel and my car was not installed with in-car camera.



**SINGAPORE
POLICE FORCE**



T/20190122/2148

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Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
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Tel No: 1800-2959999

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Report No. T/20190122/2148

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20190122/2148

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Kampong Java N.P.C
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4 of 4

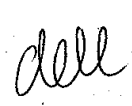
Report No. T/20190122/2148

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: E / Sgt 1 JANSON CHEW	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 22/01/2019 21:07
Officer In Charge Of Case: TP / AEIT / SSI 2 YEO GEAK ENG CECILIA Contact No.: 65476404	Classification Of Case:
Authentication Stamp NP168	SN 167
SIGNATURE	



redefining / insurance

Date: 23/01/2019

To: Owner of Vehicle Number: FBG3948K

The following has been advised to you via your workshop, ETHOZ PROTECT PTE LTD through their staff, JACKSON TEO.

Please tick the applicable box if you had been advice on the content as seen below:

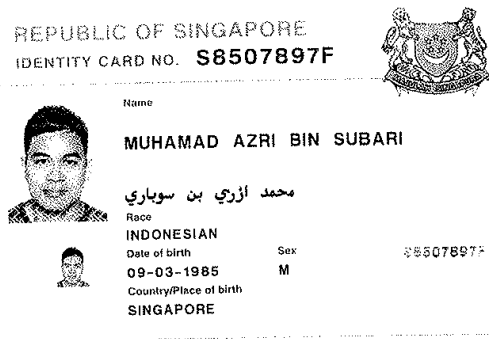
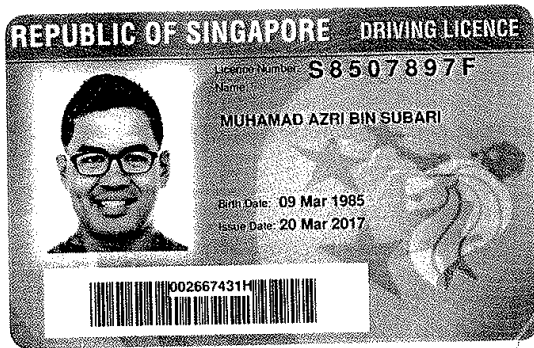
- () You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- (✓) You had been advised by the workshop on the liability and merits of the case accordingly.
- (✓) You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- () There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- () There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- () The estimated waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- () You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.
- () For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to repair your vehicle.
- For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using **any combination** of genuine original parts and/or original equipment manufacturer (OEM) parts.
- () You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- () For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- () Others _____

Signed and acknowledge by:

MUHAMMAD AZRI BIN SUKMANI OLL

Name and signature of policyholder/authorised driver

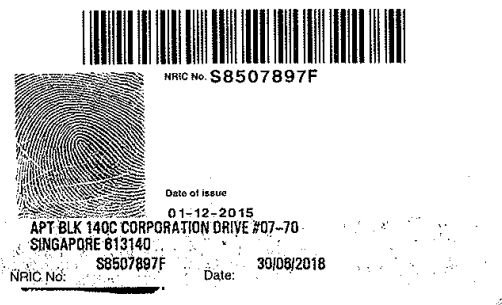
[Signature]
Name and signature of workshop personnel including company stamp



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

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	20 Mar 2017

NP 428A



AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Service Centre #B1-01
 Tel:(65)63387288 Fax:(65)63382522
 Website:www.axa.com.sg
 GST Registration Number: 199903512M
 customer.service@axa.com.sg

**CERTIFICATE OF INSURANCE**

■ Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) ■ Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 ■ Road Transport Act, 1987 (Malaysia) ■ Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO. : VMZ/P1923936 Account No. : 03375
 Coverage : Third Party Fire & Theft Only
 Sum Insured : Market Value At The Time Of Loss
 Name of Policy Holder : MUHAMAD AZRI BIN SUBARI
 Vehicle Registration No. : FBG3948K
 Period of Insurance : From 29/03/2018 To 28/03/2019 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

- (a) The Policyholder
 (b) 1. MUHAMAD AZRI BIN SUBARI

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.

LIMITATIONS AS TO USE*

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

The Policy does not cover:

- a) Use for hire and reward
- b) Use for racing, pace-making, reliability trial or speed-testing
- c) Use for the carriage of goods (other than samples) in connection with any trade or business
- d) Use for any purpose in connection with the Motor Trade

(11)


Fire&Theft - Insured&Named Dr. : SGD 300.00

THEFT OUTSIDE SINGAPORE : SGD 600.00

* 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 Part IV of the Road Transport Act, 1987 (Malaysia).

AXA INSURANCE PTE LTD


 Authorized Signature

Issued by - SGRAN03 on 14/02/2018

IMPORTANT :

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.

WARRANTED ALL
 ACCIDENT REPAIRS
 MUST BE CARRIED
 OUT ONLY AT OUR
 AUTHORISED
 WORKSHOPS

ANDA INSURANCE AGENCIES PTE LTD
 (MOTOR DEPARTMENT)
 190 MacPherson Road
 #03-01 Wisma Gulab
 Singapore 348543
 Tel: 6554 2288 Fax: 6453 4466
 Email: thomson@anda.com.sg

Accident Photo



Accident Photo



Accident Photo



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