

## 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	16/02/2019 10:36
Date Of Accident	15/02/2019 14:20
Exact Location Of Accident	PIE TOWARDS JURONG
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FW231H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MOHAMAD HAFIZ BIN HAMZAH
NRIC No	S7232191Z
Email Address	HAFIZ.H@ME.COM
Mobile Phone No	(LOCAL) +65-94301800
Alternative Phone No	OTHERS-94301800

### Vehicle Particulars

Manufacturer	TRIUMPH
Model	SPEED TRIPLE R MANUAL
Exact Purpose for which vehicle was being used at time of accident	GOING HOME FROM WORK
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	SI18V15451/VMS/R06
Cover Note Number	

### Driver

Name of Driver	MOHAMAD HAFIZ BIN HAMZAH
NRIC No	S7232191Z
Date Of Birth	12/09/1972
Occupation	INDOOR
Date Of Driving Pass	17/01/2013
Driving Experience	6 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94301800
Fax Number	
Contact Number	OTHERS-94301800
EEmail Address	HAFIZ.H@ME.COM

Address	BLK 462 CLEMENTI AVENUE 3 #02-628
Postcode	120462
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 (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	NO
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO 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	SJU6563Z
Vehicle Make/Model/Colour	TOYOTA VIOS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SEAH YEOW MENG
NRIC/Passport Number	S7383738C
Contact Number	97825389
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: :  
GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration NumberSJD8456B  
Vehicle Make/Model/ColourTOYOTA HARRIER  
Details Of Properties  
Vehicle CategoryPRIVATE CAR  
Name of DriverZHAO FUQIANG  
NRIC/Passport NumberS6962753F  
Contact Number81881276  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)2  
Passenger 1  
NAME: :  
GENDER: :

## Accident Sketch Plan


### SKETCH PLAN

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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.

 15/2/19 1740hrs

Policyholder's Signature  
Date & Time:

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

 16/02/2019  
Reporting Centre Personnel's Signature  
Name:   
NRIC/FIN No.:

# Accident Sketch Plan

## SKETCH PLAN

P1E TOWARDS JERONG

A) FW231H

B) SJU6563Z

C) SJD8456B



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 150219 at 1420hrs I was travelling along P1E Bt Timah, I was overtaking vehicle number SJU6563Z a Toyota Vios. The above mentioned car suddenly swerved to the right and hit my left side of the handlebar and made me veered off unexpectedly and that time my motorcycle hit the vehicle SJD8456B Toyota Harrier's bumper but I did not fall or hit any part of my body. My right side footpeg hit the bumper and it got damaged.

## DECLARATION

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

*[Signature]* - 150219 1740hrs

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

*[Signature]* 16/02/2019  
Reporting Centre Personnels Signature


Name:

NRIC/FIN No.:



ID

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7232191Z



Name  
MOHAMAD HAFIZ BIN HAMZAH  
محمد هافيز بن حمزه

Race  
JAVANESE

Date of birth  
12-09-1972

Sex  
M

Country of birth  
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S7232191Z

Name  
MOHAMAD HAFIZ BIN HAMZAH

With Date 12 Sep 1972

Issue Date 04 Aug 2003

9000170371

387167



NRIC No. S7232191Z



Date of issue  
08-12-2005

APT BLK 462 CLEMENTI AVENUE 3 #02-02B  
SINGAPORE 120462

NRIC No. S7232191Z Date 07-02-2007 No. 5680994

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

Class	Description	Valid Until
Class 1B	Motorcycles <= 200 CC	25 Jul 2011
Class 1A	Motorcycles between 201 CC and 400 CC	05 Nov 2002
Class 2	Motorcycles > 400 CC	17 Jan 2013
Class 3	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor tractors <= 2500 kg	01 Oct 1993
Class 4	Heavy motor cars and motor tractors > 2500 kg	13 Mar 2006

S / No. 9000170371

97232191Z

License No. S7232191Z

NP 4204

Accident Photo



Accident Photo





Accident Photo



Accident Photo



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