

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	18/03/2019 17:19
Date Of Accident	16/03/2019 13:00
Exact Location Of Accident	ALONG JURONG WEST STREET 73
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBA881U
Insured/Policyholder	
Name Of Registered Owner	RIZAM BIN JASRI
NRIC No	S8911199D
Email Address	SUGEHRIZAM64@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93200964
Alternative Phone No	OTHERS-93200964

Vehicle Particulars

Manufacturer	YAMAHA
Model	YZF-R6-599CC (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	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5106792424
Cover Note Number	

Driver

Name of Driver	RIZAM BIN JASRI
NRIC No	S8911199D
Date Of Birth	31/03/1989
Occupation	OUTDOOR
Date Of Driving Pass	24/11/2017
Driving Experience	1 YEAR AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93200964
Fax Number	
Contact Number	OTHERS-93200964
E-Mail Address	SUGEHRIZAM64@GMAIL.COM

Address	BLK 751 JURONG WEST STREET 73 #06-187
Postcode	640751
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	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	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2689999 - FAX NO: 62672438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190317/2084

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	SJC2698P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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 RIZAM BIN JASRI

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? FBA881U

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

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:

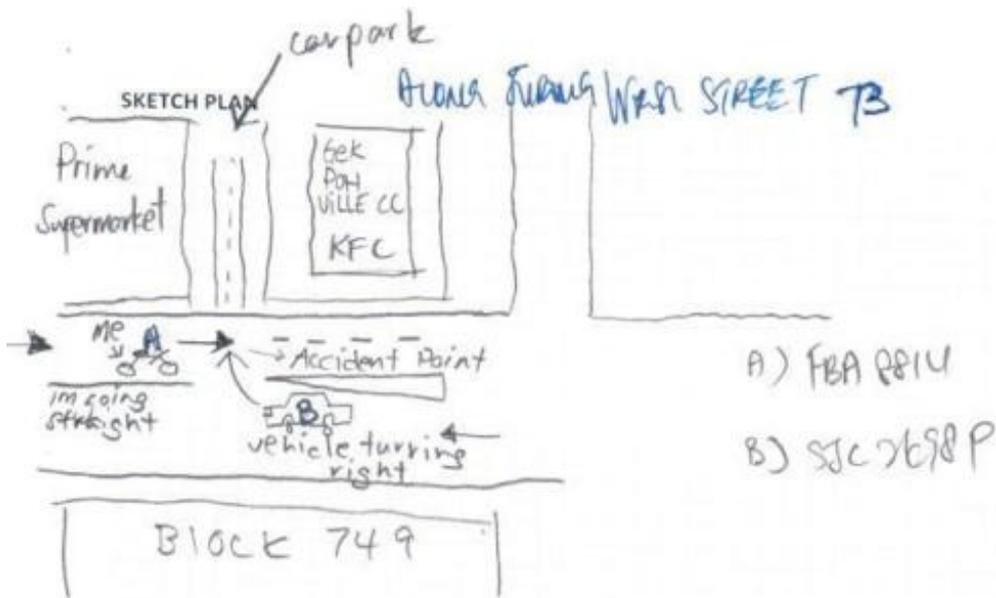
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


18/03/19 1420
Policyholder's Signature
Date & Time:

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


18/03/2019
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

Accident Sketch Plan



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pol REF no 2 police report

1/20190317/2024

DECLARATION

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

[Signature] 18/03/19 1428

Policyholder's Signature
Date & Time:

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

[Signature]

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20190317/2084

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Report No. T/20190317/2084

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/03/2019 21:13	Vide Report No.:	Station Diary No.: 74
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Informant's Particulars

Name of Informant: RIZAM BIN JASRI		Address: APT BLK 751 JURONG WEST STREET 73 #06-187 SINGAPORE 640751	
ID Type / ID No.: NRIC NO / S8911199D		Contact No.: Home/Office: Mobile: 93200964	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 29	Date of Birth: 31/03/1989	Type of Informant: Rider
Race: Chinese		Language:	Institution / School Name:
Occupation: BOATMAN		Driving Licence Information: Class: 2B,2A,2 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/03/2019 13:45	Type of Location: T-Junction
Location: Along Road 1 JURONG WEST STREET 75 towards Jurong West Street 74				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBA881U	Motorcycle	YAMAHA	YZF600	Blue	Seriously Damaged	0
SJC2698P	Car				Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBA881U	NTUC Income Insurance Co-Operative Limited	5106792424	03/01/2019	02/01/2020

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190317/2084

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20190317/2084

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	RIZAM BIN JASRI	ID No.	S8911199D
Related Vehicle	FBA881U (Motorcycle)	Contact No.	93200964
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2 Date of Expiry: NIL
Date Treatment	16/03/2019	Date Discharge	16/03/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 16/03/2019 at about 1345hrs I was riding my motorcycle (plate no: FBA881U) along Jurong West Street 75 towards Jurong West Street 74. I was on the right lane. As I was nearing the T- Junction of the carpark BLK 763 Jurong West Street 75, a car (plate no: SJC2698P) from the oncoming lane made a right turn towards the carpark. I made an emergency brake, however I collided on the rear left side of the car. I sustained injuries on my left finger. Ambulance and traffic police came however I was not conveyed to hospital as the injuries were minor. We exchanged particulars and subsequently left. I went to Ng Teng Fong General hospital and received 03 days of MC.

POLICE REPORT



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20190317/2084

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Report No. T/20190317/2084

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:
J/
SCSGT(1) IMRAN SYUKRI BIN JUMARI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/03/2019 21:13

Officer In Charge Of Case:
TP / GIT /
Staff Sgt MA JUNXIANG

Classification Of Case:

Contact No.: 65476251 SN 126

Authentication Stamp
NP168
Signature:
Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



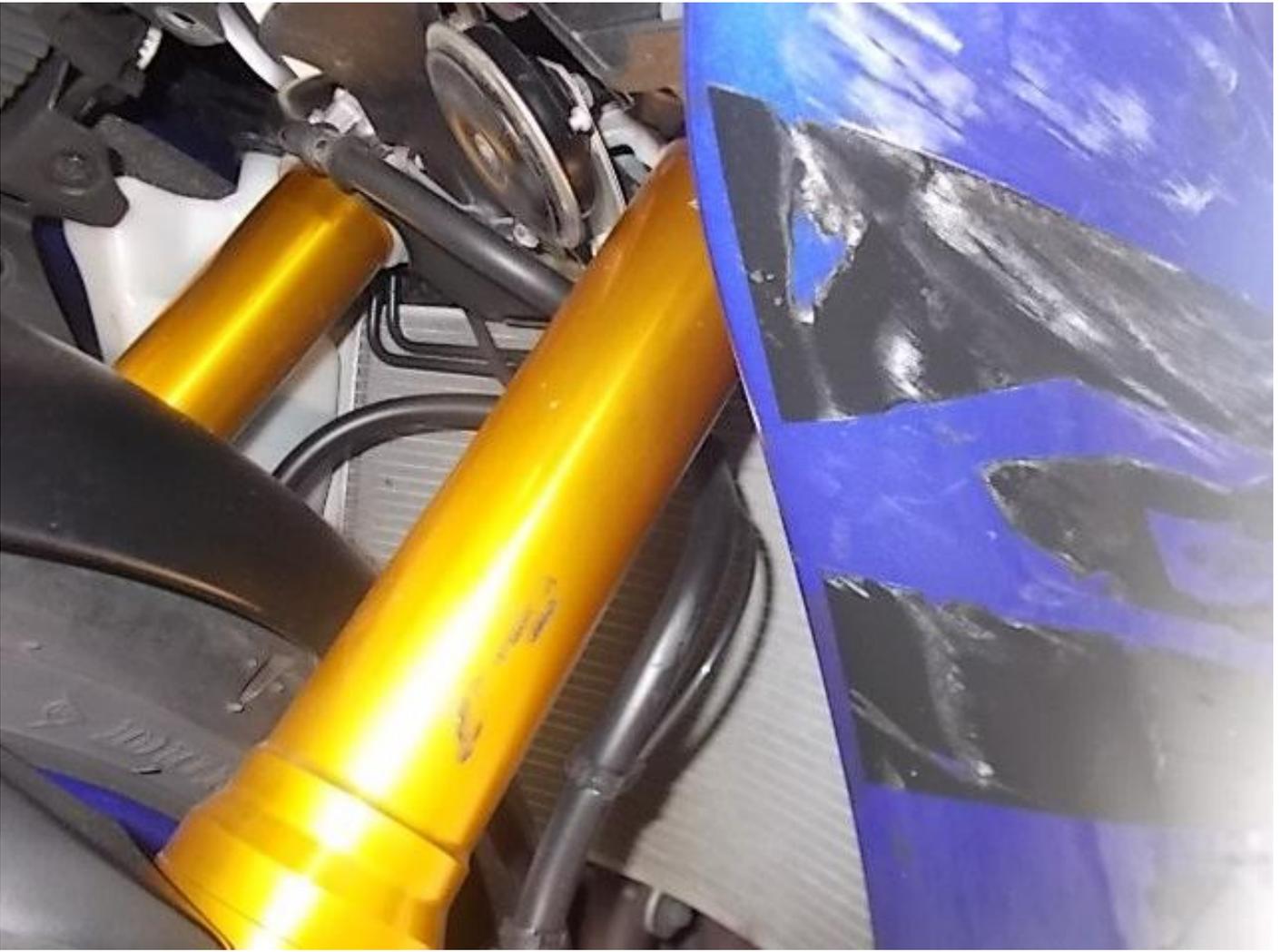
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