

(over 1 Jan'03)

29/04/19044507

Ass't Report by Fax / Hand to Owner / Wks

Toll:

Fak1

Date: _____

Times

1

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

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

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

() 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: ()

[illegible]

1) Apply for 'Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time:

NA/902529

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engt-In-Charge):

Authors' Contribution:

291.1:

213

1) AR: Accident Reporting (530)

2) DAI Damage Assessment (\$100)	IND (\$50)
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3) TV: Towing Fee	\$40.00
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4) PT: Follow-Through Survey

5) FT: Follow-Through Survey (Resurvey)

For claims against INC Only, (see 10/1/80)

6) TR: Re-inspection

7) NI: IDAU DA + SMRT Survey

8) NTUC Additional Services: _____

Q114

*NS: Courtesy C-7 TPT Allowance

44. Repair Co-ordination 28028829

Post Repair Inspection

✓ No DV / Collect Excess Compensation

TE(NU) : TP (Nin INC) • 9-13-1960

9) NIT: Idao Mobile Free Charged

Invoice dated	2008-07-26
	Rate charged

Invoices dated 12/15/19 Per Charly

1C-DEC-2018 MON 08:09

FOR:

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	05/04/2019 16:00
Date Of Accident	05/04/2019 08:50
Exact Location Of Accident	SLIP ROAD FROM CLEMENTI FLYOVER AND AYE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN4751S
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD HAIQAL BIN ABU SAMAH
NRIC No	S9236692H
Email Address	HAIQAL_1992@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-81001320
Alternative Phone No	OTHERS-81001320

Vehicle Particulars

Manufacturer	HARLEY-DAVIDSON
Model	FAT BOB 2018
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	REPORTING ONLY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	M087947

Driver

Name of Driver	MUHAMMAD HAIQAL BIN ABU SAMAH
NRIC No	S9236692H
Date Of Birth	14/10/1992
Occupation	INDOOR
Date Of Driving Pass	21/09/2018
Driving Experience	0 YEAR AND 6 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81001320
Fax Number	
Contact Number	OTHERS-81001320
EMail Address	HAIQAL_1992@HOTMAIL.COM

Address	BLK 613 CLEMENTI WEST STREET 1 #06-340
Postcode	120613
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?	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	SLS9665E
Vehicle Make/Model/Colour	TOYOTA AXIO
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	LAW KOK CHOI
NRIC/Passport Number	S7575283J
Contact Number	96488237
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: :

GENDER: :

SKETCH PLAN

IMPORTANT NOTICE

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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: 5/4/19 @ 12:45 hrs

Driver's Signature

(If driver is not the policyholder)

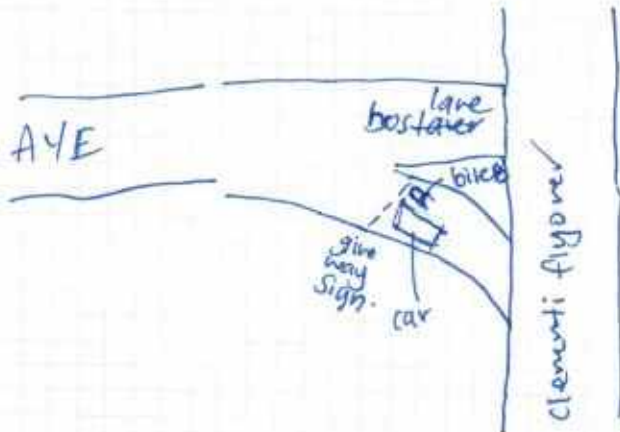
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



BIKE: FBN 4751S

CAR: SLS 9665 E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 5/4/18 @ 0850hrs was ^{riding} driving along slip road of Clementi flyover towards AYE, driver saw that there was no oncoming traffic from the bus lane however driver stopped at the give way line. I did not manage to stop on time & swerved and hit the left bumper. I side swiped the vehicle and was to stop. My left gear shaft broke as it was stuck to the right side near bumper of the vehicle. I did not drop from my bike. The car is a grab car with a driver & passenger in the vehicle. The vehicle has scratches on the bumper and a punctured tyre.

DECLARATION

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

Policyholder's Signature

Date & Time: 5/4/18 @ 1255hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: (5 / 4 / 2019) (DD/MM/YYYY), TIME: (08 : 50) (HH:MM)

LOCATION: slip road from Clementi flyover @ AYE

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBN 4751S
 b) INSURANCE COMPANY: Liberty
 c) POLICY NUMBER: M087947
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Harley Davidson Fat Bob 2018
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: personal
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Muhammad Haikal Bin Abu Samah (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S12366924 CONTACT: 8100/320
 c) ADDRESS: Blk 613 Clementi West St 1 #06-340 S 120613

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Aspore (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* d) DATE OF BIRTH: (14 / 10 / 1992) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 21/6/18

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) NO

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

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

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

6. WAS ANYBODY INJURED (YES/NO) NO

7. a) REPORTED TO POLICE (YES/NO) NO

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLS 9665E MODEL: Toyota Axio
 b) DRIVER'S NAME: Law kok choi
 c) NRIC/FIN/PASSPORT: S7575283J CONTACT: 9646 8237

9. THIRD PARTY VEHICLE

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

* No of passenger
(including driver)
(1)

* No of passenger
(including driver)
(2)

* No of passenger
(including driver)
()

Email = Haikal - 1992 @ hotmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9236692H



Name
MUHAMMAD HAIQAL BIN ABU SAMAH

Race
MALAY

Date of birth
14-10-1992

Sex
M

Country of birth
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S9236692H



MUHAMMAD HAIQAL BIN ABU SAMAH

Birth Date: 14 Oct 1992

Issue Date: 18 Dec 2013

002256029C



412049



NRIC No. S9236692H



Date of issue
26-10-2007

Address
**APT. BLK 613 CLEMENTI WEST STREET 1
#06-340
SINGAPORE 120613**

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

	EFFECTIVE DATE
Class 1B Motorcycles < 200 CC	10 Mar 2015
Class 2A Motorcycles between 201 CC and 400 CC	28 Apr 2017
Class 2 Motorcycles > 400 CC	21 Sep 2018
Class 3 Motor cars < 3000 kg with < 7 passengers, exclusive of the driver; and motor tractor/vehicles < 2500 kg	16 Dec 2013

S9236692H

S / No. 9000309354

NP 428A

Licence No: S9236692H





**Liberty
Insurance.**

51445/-
Liberty Insurance Pte Ltd


Registered No. 119002791D

51 Club Street # 03-00 Liberty House
Singapore 069428

Tel: (65) 6221 8611 Fax: (65) 6225 6890

http://www.libertyinsurance.com.sg

MOTOR COVER NOTE

Intermediary: 	Date of Issue: 13/10/15	CNM NO: M 087947
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"MUHAMMAD HANIF BIN ABU SAMAH having proposed for Insurance in respect of the Motor Vehicle described in the Schedule below the risk is hereby HELD COVERED in the terms of the Company's usual form of Comprehensive; Third Party Fire & Theft; Third Party: Policy applicable thereto for the period from 08:00 a.m./p.m. on 13-10-15 to midnight on 12-10-15 unless the cover be terminated by the company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk".

SCHEDULE

Make:	<u>HARLEY - DAVIDSON</u>		
Registration No.:	<u>FBN47515</u>	Type of Body:	<u>FAT BOB</u>
Hp/cc/tonnage:	<u>1745CC</u>		
Year of Manufacture:	<u>2015</u>	Year of Registration:	<u>2015</u>
Sum Insured:	<u>MARKET VALUE</u>		
Engine No.:	<u>YC15013169</u>		
Chassis No.:	<u>5HD1YKJL4JL013669</u>		
Excess:	<u>\$1200 (SECTION 1) & \$3000 (THEFT & VANDALISM)</u>		
Finance Co.:			

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 OF INSURANCE

I/We hereby certify that this Cover Note 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)

Purpose Issued: ADD RIDER: MUHAMMAD HANIF BIN MUHAMMAD RASHID

Policy No:

IMPORTANT NOTICE

- Subject to Premium Payment Warranty Clause (see overleaf)
- This Cover Note is issued for temporary use only and is valid for 30 days from the date of issue, unless replaced by a Certificate of Insurance issued by the Company


For Liberty Insurance Pte Ltd

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	FBN4751S	Vehicle Scheme:	Normal
Vehicle Type:	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	HARLEY DAVIDSON	Vehicle Model:	FAT BOB
Chassis No.:	5HD1YKJC4JC073669	Engine No.:	YKJJ073669
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Petrol	Passenger Capacity:	1
Engine Capacity:	1745 cc	Power Rating:	-
Maximum Power Output:	-		
Unladen Weight:	306 kg	Maximum Laden Weight:	526 kg
Primary Colour:	Black	Secondary Colour:	-
First Registration Date:	13 Oct 2018	Original Registration Date:	13 Oct 2018
Manufacturing Year:	2018	Open Market Value:	\$13,913.00
PARF Eligibility:	No	Minimum PARF Benefit:	\$0.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$5,000.00 (15%), next \$5,000.00 (50%), next \$3,913.00 (100%)
Actual ARF Paid:	\$7,163.00		

Owner Particulars

Owner Name:	MUHAMMAD HAIQAL BIN ABU SAMAH
Owner ID Type:	Singapore NRIC
Owner ID:	S9236692H
Registered Address Type:	HDB / HUDC
Registered Block/House No.:	613
Registered Street Name:	CLEMENTI WEST STREET 1
Registered Unit No.:	# 06 - 340
Registered Building Name:	-
Registered Postal Code:	120613
COE No. / Expiry Date:	2018110106000710E / 12 Oct 2028
COE Bid Category:	D - Motorcycle
QP Paid:	\$4,109.00

Transaction Details

Business Transaction Ref. No.:	20181013120017904553
Business Transaction Date:	13 Oct 2018
Business Transaction Time:	12:00:17

Message

The above vehicle has been successfully registered.

Please note that \$11,592.00 will be deducted from your GIRO account.

OK

Save as PDF