

NATIONAL Assessment Centre Services			
Date In: 05/07/2019 09:29	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NBA/24P19011651/4	E-mail (within 8hrs, AIC 2hrs):		
Veh No: FS 7647S	i-Motor Claim Form		
D.O.A: 18/04/2019 18.30	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OD: TP: Reporting Only	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ()		Tel: ()	Fax: ()
TP Particulars:	Veh No: SGV 5256G	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

NA1904967		Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Claimant's Particulars:		1) AR: Accident Reporting (\$30);		In Bill	Add. Bill
Driver/Owner:		2) DA: Damage Assessment (\$100); INC (\$40)			
Contact No:		3) TP: Towing Fee \$40/\$45			
Damaged Portion:		4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):		5) RT: Follow-Through Survey (Resurvey) \$30			
Auditors' Comments:		For claiming against INC Only (wef 10 Jan 2009)			
Cat. 1:		6) TR: Re-inspection \$75			
Cat. 2/3:		7) NI: Idan DA + SMRT Survey \$160			
		8) NTUC Additional Services:			
		9) NI: Idan Mobiles \$30			
		10) NI: Idan Mobiles \$30			
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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	02/07/2019 09:29
Date Of Accident	18/04/2019 18:30
Exact Location Of Accident	ALONG BUKIT BATOK EAST AVENUE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FS7647S
Insured/Policyholder	
Name Of Registered Owner	JAFFRI BIN KASSIM
NRIC No	S6832140I
Email Address	CHOPPAJOOP@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81632635
Alternative Phone No	OTHERS-81632635

Vehicle Particulars

Manufacturer	HARLEY-DAVIDSON
Model	XL883N IRON-883CC
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	M 087890

Driver

Name of Driver	JAFFRI BIN KASSIM
NRIC No	S6832140I
Date Of Birth	28/07/1968
Occupation	INDOOR
Date Of Driving Pass	04/04/1997
Driving Experience	22 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81632635
Fax Number	
Contact Number	OTHERS-81632635
Email Address	CHOPPAJOOP@YAHOO.COM

Address	BLK 133A CASHEW ROAD #01-161
Postcode	671133
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	NO COLLISION
Weather Conditions	UNKNOWN
Road Surface	UNKNOWN

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?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG POLICE DIVISIONAL HQ ('J' DIVISION)
Police Station Address	ROAD: NO. 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7910000 - FAX NO: 68965649
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT J/20190604/7029

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	SGY5256G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

SKETCH PLAN

IMPORTANT NOTICE


1. Please report **correctly** the details of the accident to speed up the claims process.
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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**.
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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:

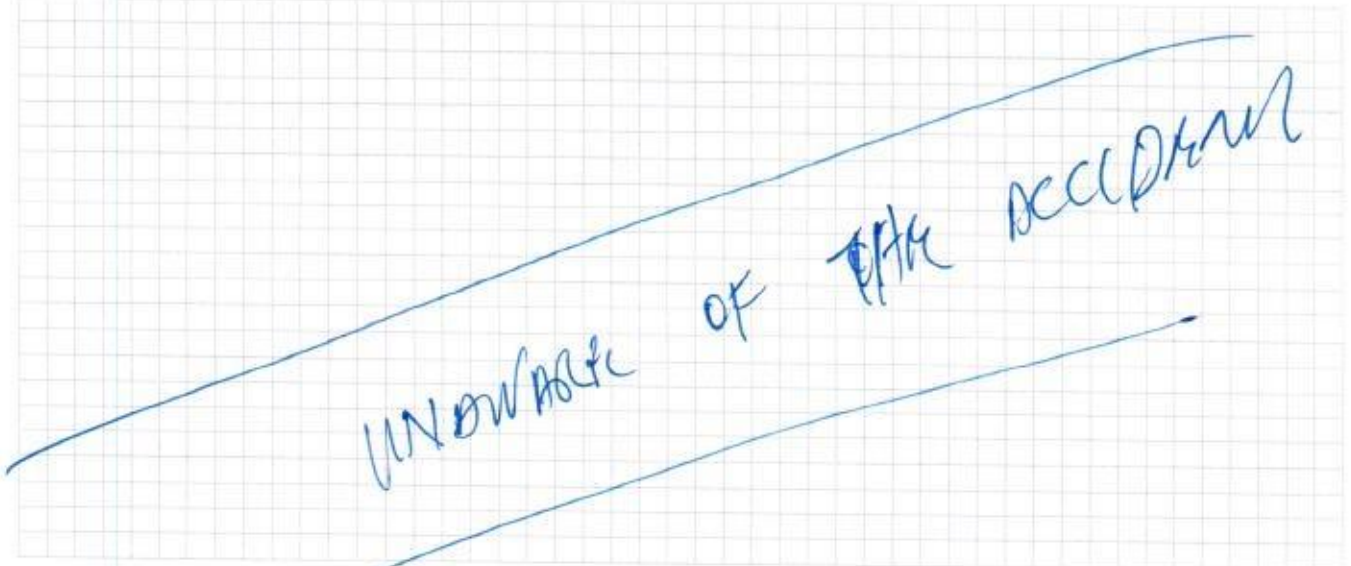
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

Policyholder's Signature
Date & Time:

 010719
(12:40)
Driver's Signature
(If driver is not the policyholder)
Date & Time:

 02/07/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Area for describing the circumstances of the accident, crossed out with a diagonal blue line. The text "P/L HAS REFID TO POLICE REPORT 5/20190604/7028" is written in blue ink across the middle of the section.

DECLARATION

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

Policyholder's Signature
Date & Time:

 01 07 19
(1240)
Driver's Signature
(If driver is not the policyholder)
Date & Time:

 01/07/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: 



**SINGAPORE
POLICE FORCE**



J/20190604/7029

1 of 3

POLICE REPORT (NP299)

Report No. J/20190604/7029

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 04/06/2019 17:26	Vide Report No.	Station Diary No.
Name Of Informant JAFFRI BIN KASSIM	Address APT BLK 133A CASHEW ROAD #01-161 SINGAPORE 671133	
ID Type / ID No. NRIC NO / S6832140I	Contact No. Home/Office:	Mobile: 81632635
Nationality SINGAPORE CITIZEN	Email Address choppajoop@yahoo.com	
Occupation Other health professionals nec	Sex Male	Age 50
Institution/School Name	Date of Birth 28/07/1968	Race Malay
Date/Time Of Incident 18/04/2019 18:00 - 18/04/2019 20:00	Location Of Incident BUKIT BATOK EAST AVENUE 3	

Brief details.

ALLEGED HIT-AND-RUN ACCIDENT INVOLVING FS7647S AND SGY5256G ALONG BUKIT BATOK EAST AVENUE 3 ON 19 APRIL @ 12.55AM (SIDE SWIPE WITH WING MIRROR)

I, Jaffri Bin Kassim of NRIC S6832140I, was the rider of the vehicle FS7647S, on the above mentioned date.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 04/06/2019 17:26
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20190604/7029

Unfortunately I am unaware of my involvement in the alleged hit-and-run incident.

As the letter from Traffic Police stated that it was in the early morning of 19 April (12.55am), I recall being home by 10.30pm on 18 April and deny being involved with any traffic incidents. First assumption in my mind is that it could be a mistaken identity.

After speaking to IO Imran Mohamad Said on 24 May, I was told that the incident happened between 6.30pm to 7.30pm of 18 April not 19 April 1255am.

As mentioned by IO Imran, a driver allegedly claim that my vehicle side-swept the right side wing mirror of his/her vehicle. I did a check on my vehicle for damages after my conversations with IO Imran but could not find any scratches or damages, a slight chip of the clutch lever's black paint, similar paint chip on the brake lever too. No visible damages on the rubber hand grip or the left foot peg.

As it have already been almost a month, I have to check through my phone for messages prior to the week of 19 April to refresh my memory. I saw in my messages that I went to a friend's workshop to collect an item at Bukit Batok after work (6.00pm) on 18 April and used Avenue 3 after exiting the Pan Island Expressway (PIE). I left the workshop before 8.00pm. Nothing unusual happened en route to the workshop. But I did recall after a junction when exiting the PIE I noticed my foot peg was slightly on an upright position, but brushed it aside as it always happens as my foot would accidentally lift it up. If I had accidentally side swept a car wing mirror I may not have been aware as I might be wearing a full-face helmet and it may have slightly blocked my view of the wing mirror.

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

04/06/2019 17:26

Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20190604/7029

I am generally a safe and careful rider riding a new motorcycle, and I would have stopped, acknowledged my mistake, apologised and try to settle it with the involved vehicle there and then if I did hit it and was aware of it. As we all know, it is impossible to run from a hit-and-run incident in Singapore as there are cameras everywhere, in-vehicle (front and back) and even at junction on every traffic lights.

I sincerely and apologetically am unaware of hitting the wing mirror of the said vehicle.

And I sincerely hope that Traffic Police will take into account my near clean record throughout almost 25 years of riding and driving experience, and have some leniency before taking any action against me, if I really did side-swipe as I am truly not aware of the incident.

I am willing to send my vehicle or photographs (tried to attach a photo but failed) for police investigation if needed.

Yours Sincerely
Jaffri Kassim

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 04/06/2019 17:26
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

ACCIDENT STATEMENT

ACCIDENT DATE: 18 / 04 / 2019 (DD/MM/YYYY), TIME: 00 : 00 (HH:MM)
 LOCATION: Along Bukit Timah Ave 3

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FS 7647 S
 b) INSURANCE COMPANY: LIBERTY INSURANCE
 c) POLICY NUMBER: SD18V14822
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: HARLEY-DAVIDSON / 1883 IRON
 f) TYPE: (SEDAN / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: TRANSPORT
 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: JAFFRI KASSIM (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S68321401 CONTACT: 81632635
 c) ADDRESS: BLOCK 133A CASHUE ROAD
#01-161 S671133

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE
 b) NRIC/FIN/PASSPORT: _____ (MALE / FEMALE)
 c) ADDRESS: _____
 d) DATE OF BIRTH: (____/____/____) (DD/MM/YYYY)
 e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

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

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

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

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: S9Y 5256 G MODEL: _____
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

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)
()

* No of passenger
 (including driver)
()

Email = choppypoop@yahoo.com
 VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S68321401

Name
JAFFRI BIN KASSIM

Race
MALAY

Date of Birth
28-07-1968

Sex
M

Country of Birth
SINGAPORE

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number
S68321401

Name
JAFFRI BIN KASSIM

Birth Date
28 Jul 1968

Issue Date
31 Oct 2003

For LKK/NAC Use Only

000968567H

0203760

NRIC No. S68321401

For LKK/NAC Use Only

Blood Group
B+

Date of issue
13-12-1991

APT BLK 133A CASHW ROAD #01-161
SINGAPORE 671133

NRIC No: S68321401 Date: 19-07-2004 No: 1987873

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

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	18 Nov 1992
Class 2A Motorcycles between 201 cc and 400 cc	13 Sep 1994
Class 2 Motorcycles exceeding 400 cc	04 Apr 1997
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	24 Aug 2001

For LKK/NAC Use Only

Licence No: S68321401

ID 425A



**Liberty
Insurance**

Liberty Insurance Pte Ltd

Registered No. 199002791D

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:

CNM NO:

M 087890

" **JAFFRI BIN FASSIM** 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 **27.6.19** a.m./p.m. on **27.6.19** to midnight on **27.6.19** 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:	HARLEY-DAVIDSON		
Registration No.:	F570475	Type of Body:	IRON 883
Hp/cc/tonnage:	883cc		
Year of Manufacture:	2017	Year of Registration:	2018
Sum Insured:	MARKET VALUE		
Engine No.:	1E2H433837		
Chassis No.:	7H04LE2C6HC433837		
Excess:	67 (SECTION 2) & 1250 (NET OUTSIDE SW)		
Finance Co.:	MAYBANK		

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)

ADD RES: MUHAMMAD TAUFIQ BIN FASSIM



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