

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	14/06/2019 10:57
Date Of Accident	16/03/2019 00:30
Exact Location Of Accident	BKE TWDS WOODLANDS CHECK POINT (BUKIT TIMAH EXPRES
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBM4088D
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD RAZI BIN AHMAD
NRIC No	S9002549Z
Email Address	RAZI.AHMAD90@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-92388837
Alternative Phone No	OFFICE-92388837

Vehicle Particulars

Manufacturer	HONDA
Model	CB400X
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/18-390104-CA
Cover Note Number	

Driver

Name of Driver	MUHAMMAD RAZI BIN AHMAD
NRIC No	S9002549Z
Date Of Birth	24/01/1990
Occupation	INDOOR
Date Of Driving Pass	09/12/2017
Driving Experience	1 YEAR AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92388837
Fax Number	
Contact Number	OFFICE-92388837
Email Address	RAZI.AHMAD90@HOTMAIL.COM

Address	BLK 980 JURONG WEST STREET 93 #07-343
Postcode	640980
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?	YES
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	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT

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	SMD9322L
Vehicle Make/Model/Colour	REFER POLICE REPORT
Details Of Properties	REFER POLICE REPORT
Vehicle Category	PRIVATE CAR
Name of Driver	IMRAN
NRIC/Passport Number	
Contact Number	88184439
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

REFER POLICE REPORT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

MUHAMMAD RAZI BIN AHMAD

Approximate Age

Injuries Sustain

REFER POLICE REPORT

Injured person in which vehicle?

FBM4088D

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

BLK 980 JURONG WEST STREET 93
#07-343

Postcode

640980



Peri-


SKETCH PLAN

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. 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:

Driver's Signature
(If driver is not the policyholder)



Reporting Centre Personnel's Signature
Name:



**SINGAPORE
POLICE FORCE**



T/20190326/7019

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20190326/7019

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/03/2019 17:09		Vide Report No.: L/20190316/0110		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMMAD RAZI BIN AHMAD			Address: APT BLK 980 JURONG WEST STREET 93 #07-343 SINGAPORE 640980		
ID Type / ID No.: NRIC NO / S9002549Z			Contact No.: Home/Office: Mobile: 92388837		
Nationality: SINGAPORE CITIZEN			Email: razi.ahmad90@hotmail.com		
Sex: Male	Age: 29	Date of Birth: 24/01/1990	Type of Informant: Rider		
Race: Malay			Language: English		Institution / School Name:
Occupation: Biological technician			Driving Licence Information: Class: 2A		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 00:30	Type of Location: BKE
Location: BUKIT TIMAH EXPRESSWAY				
Weather: Sunny		Road Surface: Dry		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBM4088D	Motorcycle	HONDA	CB400X	Silver	Seriously Damaged	0
SMD9322L	Motorcycle					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBM4088D	MSIG INSURANCE (SINGAPORE) PTE. LTD.	MSD/VMS/17-373917-CA	05/10/2018	05/10/2019



**SINGAPORE
POLICE FORCE**



T/20190326/7019

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20190326/7019

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD RAZI BIN AHMAD	ID No.	S9002549Z
Related Vehicle	SMD9322L (Motorcycle)	Contact No.	92388837
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2A Date of Expiry: NIL
Date Treatment	16/03/2019	Date Discharge	18/03/2019
No. of Days granted Medical Leave	21	Degree of Injury	Serious

Brief Details.

While rider, FBM4088D, was travelling at BKE towards Woodlands Checkpoint, a red car, SMD9322L, was intending to cut cue go get into the first lane hence blocking other road users. After some time and being honked at multiple times by other vehicles, SMD9322L, changed his mind and decided to go further up. The Driver found an opening on the first lane and decided to cut in resulting on the accident. Only rider of FBM4088D was injured at the time of the incident. Rider was still conscious and unable to get up due to sustained injury. Rider was assisted by other road users while waiting for the ambulance to arrive and was admitted to Khoo Teck Puat Hospital.



**SINGAPORE
POLICE FORCE**



T/20190326/7019

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20190326/7019

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / TPIB / THABAGESH JEYATHESH Contact No.: 65476232

Authentication Stamp
NP168

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 26/03/2019 17:09
Classification Of Case:



CA 514401
MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)
4 Shenton Way, # 21-01, SGX Centre2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
msig.com.sg

CERTIFICATE OF INSURANCE

Road Transport Act, 1987 (Malaysia)
The Motor Vehicles (Third Party Risks) Rules, 1959 (Federation of Malaysia)
The Motor Vehicles (Third Party Risks and Compensation) Act (CAP. 189 of the Revised Edition) (Republic of Singapore)
The Motor Vehicles (Third Party Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)
Or any Amendment, Act or Acts passed in substitution thereof.

CERTIFICATE NO : MSD/VMS/18-390104-CA A0074-001/10147

SUM INSURED : PMV

EXCESS : \$500(FIRE&THEFT) \$1000(ENDT 2K)

1. Index mark and Registration Number of Vehicle FRM4088D 399 c.c.
HONDA
2. Name of Policyholder MUHAMMAD RAZI BIN AHMAD
3. Effective date of the Commencement of Insurance
for the purposes of the Act 1201AM 25/10/2018
4. Date of Expiry of Insurance 24/10/2019
5. Persons or Classes of Persons entitled to drive
a. The Policyholder.

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. And provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitation as to Use

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

7. The Policy does not cover

1. Use for hire or reward.
2. Use for racing, pace-making, reliability trial or speed-testing.
3. Use for the carriage of goods (other than samples) in connection with any trade or business.
4. Use for any purpose in connection with the Motor Trade.

* 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 the Road Transport Act, 1987 (Malaysia).

Repl CN: 72128550

12/10/2018 (KP)

CA/CI-03 (05/13)

COMMERCIAL AGENCY PTE. LTD.

Underwriting Agent

For MSIG Insurance (Singapore) Pte. Ltd.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9002549Z



Name

MUHAMMAD RAZI BIN AHMAD

محمد رازي بن احمد

Race
MALAY

Date of birth
24-01-1990

Sex
M

S9002549Z

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
Name S9002549Z

MUHAMMAD RAZI BIN AHMAD

Birth Date: 24 Jan 1990

Issue Date: 29 May 2013

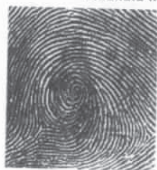


002185726C



3668419

NRIC No. S9002549Z



Date of issue

27-01-2005

Address

APT BLK 980 JURONG WEST STREET 93
#07-343
SINGAPORE 640980

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

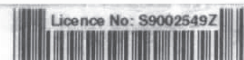
EFFECTIVE DATE

Class 2B Motorcycles <= 200 CC
Class 2A Motorcycles between 201 CC and 400 CC

29 May 2013
19 Oct 2017

S9002549Z

S / No.9000310723



Licence No: S9002549Z

NP 428A



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 6259
www.police.gov.sg

Our Ref : TP/IP/15535/2019
Date : 12 April, 2019

MUHAMMAD RAZI BIN AHMAD
BLK 980 JURONG WEST STREET 93
#07-343
SINGAPORE 640980

Dear Sir/Madam

**ACCIDENT INVOLVING FBM4088D & SMD9322L ALONG BKE TOWARDS
WOODLANDS ON 16 MARCH 2019 AT 1232 HRS**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that driver of SMD9322L had committed an offence of Inconsiderate Driving under Section 65(b) of the Road Traffic Act, Chapter 276. Action has been initiated against the said driver for the said offence.
3. If you have any queries, please contact the Investigation Officer, Yus Mastari at 65476214 or via email Yus_Mastari_I_Khazali@spf.gov.sg

Yours faithfully

Perlin Chong
for Head Investigation
Traffic Police
Singapore Police Force