#### 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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
25/07/2019 12:18
24/07/2019 06:35
ENTRANCE INTO MANDAI LAKE ROAD
SINGAPORE
DETAILS OF OWN VEHICLE
FBM8245R
MUHAMMAD AMINURASHID BIN JA'AFAR
S9210092H
SUCC33DISHALL@GMAIL.COM
(LOCAL) +65-85222564
OTHERS-85222564
KTM
390 DUKE-390CC
WORKING PURPOSES
NO
REPORTING ONLY
MOTORCYCLE
NTUC INCOME INSURANCE CO-OPERATIVE LTD
COMPREHENSIVE
NO
5099487612-01

Name of Driver MUHAMMAD AMINURASHID BIN JA'AFAR

NRIC No S9210092H
Date Of Birth 29/03/1992
Occupation INDOOR
Date Of Driving Pass 12/10/2016

Driving Experience 2 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-85222564

Fax Number

Contact Number OTHERS-85222564

EMail Address SUCC33DISHALL@GMAIL.COM

Address BLK 712 JURONG WEST STREET 71

#12-165

Postcode 640712

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

indurance company of briver 3 Own Vernole

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NO

**General Information of the Accident** 

Type Of Accident COLLISION - CHANGE/CROSS LANE

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

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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 SKETCH AND POLICE REPORT J/20190724/7026

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 UNKNOWN

Vehicle Make/Model/Colour MALAYSIAN BIKE

**Details Of Properties** 

Vehicle Category MOTORCYCLE

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Page 2 of 24

#### **DETAILS OF INJURED PERSON 1**

MUHAMMAD AMINURASHID BIN JA'AFAR Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address Postcode SLIGHT INJURY

FBM8245R

NO

#### Accident Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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.
- 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 :
  - 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: 24/67/19

11.01am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

## **Accident Sketch Plan**

KETCH PLAN		
_	RIDER	
	E R A	
_		
	1/A MED	1. Cost
	12	A ) FBM 82451
	D	D. ) trade was to
		B) UNKNOWN MOLOYSIA
	MANDAI LAKK ROAM	Bikh
ESCRIBE CIRCUMSTANCES OF THE A		MIKE
Turning right from in	ner pocket towards Mondai Lake	Road Malaysian rider
	to the front I let him move o	
Thought he would o	so straight to the end of the roo	ad but shortly after
turned sharp left	without signalling . I could no	st broke in time and
collided with him.	9 9	V
		-6711.1
		fully
		fully
Police Culow St.	2018 prox/2018	fully
Police Empor 5/	2005/4020	-fully
Polick fulger 5/	2005/4026	fully
Polick fafor 5/	2005/4026	Hally
Polick fulger 5/	2005/46209	fully
Polick fulger 5/	2005/462030	-fully
Polick fapor 5/	2005/4c2a510c	-fully
Polick fulger 5	20190724/7026	-fully
Polick fapoll 5	2005/462030	-fully
Polick fulger 5	2005/462030	-fully
Polick fulger 5	2005/462030	-fully
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Polick fulger 5	2005/4class	-fully
Polick fulger 5	2015/1026	-fully
CLARATION		-FAIIY
		- Fally
CLARATION		Sholook
CLARATION  We declare the foregoing particulars are true.	ue in every respect.	Bloy/2008

#### POLICE REPORT





1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No:1800-7910000 Report No. J/20190724/7026

	Station Diary No
Address APT BLK 712 JURONG WEST STREET 71 #12-16 SINGAPORE 640712	
Mobile: 85222564	
gmail.com	
Date of Bir	th Race
29/03/1992	2 Malay
dent JURONG WEST ST	REET 71 #12-165
J	

#### Brief details.

Accident with a Malaysian rider. Turned right into Mandai Lake Road heading towards the zoo, with the rider shortly in front of me. Earlier, he had cut the queue, as most Malaysian riders do to be in front of the right turn pocket (cutting me). I let him go first when the green right turn arrow flashed, and stayed behind him. I thought he would be going all the way straight on the road towards the very end. He made a sudden sharp left turn without signalling, not into a proper road, but one of the many alleys/entrances along the construction sites for the new parks/attractions. I could not brake fully in time and hit his rear

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this
Not applicable	report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/07/2019 20:08
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

#### POLICE REPORT





POLICE REPORT (NP299) CONTINUATION OF REPORT

Report No. J/20190724/7026

wheel, causing both of us to fall off our bikes.

Victim Person Name	MULIANANAD ANDRUGACIUS S		
The state of the s	MUHAMMAD AMINURASHID B	IN JA'AFAR	
ID Type	NRIC NO	ID No	S9210092H
Gender	Male	Age	27
Race	Malay	Language	English
Occupation	Other finance dealers and brokers	Address Type	
Address	APT BLK 712 JURONG WEST STREET 71 #12-165 SINGAPORE 640712	Mobile No	85222564
Is Informant A Victim?	Yes		

Signature Of Officer Recording The Report:	Signature Of Informant:	
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.	
Signature Of Interpreter: Not applicable	Date/Time: 24/07/2019 20:08	
Officer In-Charge Of Case:	Classification Of Case:	
Authentication Stamp		

































