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Date In: 14/8/8019 16, 49 Job description	Date & Time C	ompteted	Done by
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D.O.A : 1408 2019 07-20 1-Motor Chilm	orm M1/105	767/100/	14/08/29
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i-Photo Upload	4		
TP Insurer: Assessment/Surv	Report		- (4.17. 47.4
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Preferred Wksp /HNC Assign Wksp / QW: [-	Telt	Faxi	
TP Particulars: Veh No: SML3933X	INC()/Non-INC	:()	
Owner / Driver: (}
Policy No: () Period: () Cover Type:		
113-3-3-3-1-4-1-3-3-3-3-3-3-3-3-3-3-3-3-	Date: Tim		1
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() Total Loss Case : to e-mail Insurer URGENTLY.			
Drive-In()/Towed-In(); Invoice: YES()/ NO	(); Towing Co: ()
		PRINCES PROPERTY.	Donally
Remarks (INC horling 6788 6616)	Date&Tune(sompto: out of 1241	
1) Apply for Transport Allowance () / Courtesy Cor ()			
2) QC Check / Post Repair Inspection ()			
3) Upload Resurvey Photo [Repair Cost > \$3000] ()			
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Gender

Mobile Number

Fax Number Contact Number

EMail Address

- 1. Please report correctly the details of the accident to appeal up the claims process.
- 2. This Form must be completed by the Policyholder end/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate 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 todgement 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

ACCIDENT STATEMENT

Date Of Report	14/08/2019 16:49
Date Of Accident	14/08/2019 07:20
Exact Location Of Accident	ALONG JALAN BOON LAY
Country/State of Loss	SINGAPORE
West of the second seco	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBG9252U
Insured/Policyholder	
Name Of Registered Owner	SOUTHERN MOTOR:
Co Reg No	23414700L
Email Address	HASYASAIS123@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91810104
Alternative Phone No	OFFICE-91810104
Vehicle Particulars	
Manufacturer	YAMAHA
Model	JUPITER LC135-135CC
Exact Purpose for which vehicle was being used at time of accident	
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5109280207
Cover Note Number	
Driver	
Name of Driver	MOHAMED HASSAN S/O MOHAMED YOUNUS
NRIC No	T0071182E
Date Of Birth	27/12/2000
Occupation	OUTDOOR
Date Of Driving Pass	16/07/2019
Driving Experience	0 YEAR AND 0 MONTH
HOUSE STATE OF THE	

MALE

(LOCAL) +65-91810104

HASYASAIS123@GMAIL.COM

OTHERS-91810104

Address

BLK 608 JURONG WEST STREET 65

#12-560

Postcode

640608

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own Vehicle

.

0. 5. 50

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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

YES

ambulance?

YES

Was any other material or property damaged?

1 ---

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

QUEENSTOWN N.P.C.

Police Station Address

ROAD: 3 QUEENSWAY #01-03, POSTCODE: 149073, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4719999 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190814/2120

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

SML3933X

Vehicle Make/Model/Colour

BMW

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

JASWANT SINGH S/O GURMEJ SINGH

NRIC/Passport Number

S7639631J

Contact Number

97601610

Address

Postcode

Insurance Company Name

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name

MOHAMED HASSAN S/O MOHAMED YOUNUS

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBG9252U

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

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

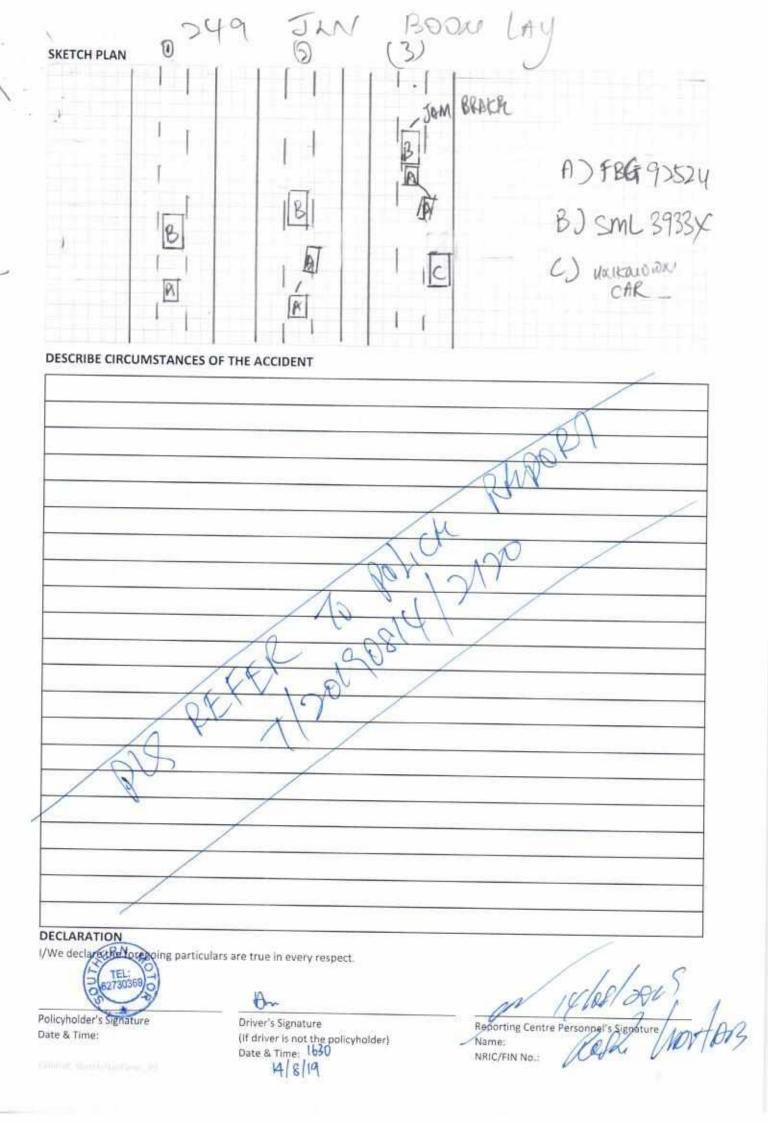
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

Date & Time: 1630







1 of 3

Report No. T/20190814/2120

Police Station Of Origin: Queenstown N.P.C

3 Queensway #01-03 SINGAPORE 149073

Tel No: 1800-4719999

A TRAFFIC	ACCIDENT		Out - Diam No
Report M 9 16:01	ade:	Vide Report No.: J/20190814/0047	Station Diary No.: 57
t's Particu	ilars		
nformant: D HASSA	N S/O .	Address: APT BLK 608 JURONG WEST SINGAPORE 640608	T STREET 65 #12-560
ID No.:		Contact No.: Home/Office:	Mobile: 91810104
y:	UTHER.	Email:	
Age:	Date of Birth: 27/12/2000	Type of Informant: Rider	, a
		Language: English	Institution / School Name: NANYANG POLYTECHNIC
on:		Driving Licence Information: Class: 2B	Date of Expiry:
֡֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜	Report M 9 16:01 P's Particu nformant: D HASSA D YOUNG ID No.: / T007118 y: DRE CITIZ Age: 18	r's Particulars nformant: D HASSAN S/O D YOUNUS ID No.: / T0071182E y: DRE CITIZEN Age: Date of Birth: 18 27/12/2000	Report Made:

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/08/2019 07:20	Type of Location: Straight Road
JALAN BOOI JURONG PIE			10 +1	
Weather: Clear	TEAN DOON BY	Road Surface: Dry	146	Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	1	Fraffic Volume: Heavy
Type of Colli	sion: ving Vehicles - Head To Re	ear		Anyone conveyed by ambulance: Yes

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
FBG9252U	Motorcycle	YAMAHA	JUPITER	Blue	Slightly Damaged	0
SML3933X	Car	BMW		Red	Slightly	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



T/20190814/2120

2 of 3

Report No. T/20190814/2120

Police Station Of Origin: Queenstown N.P.C

3 Queensway #01-03 SINGAPORE 149073

Tel No: 1800-4719999

CONTINUATION OF REPORT

Rider		NAME OF TAXABLE PARTY.		-10	
Name	MOHAMED HASSAN S/O MOH YOUNUS	IAMED	ID No.		T0071182E
Related Vehicle	hicle FBG9252U (Motorcycle) Contact No.		t No.	91810104	
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL			Class of Class: 2 Driving Date of I Licence & Expiry Date	
Date Treatment	14/08/2019	Date Dis		-	/2019
No. of Days gran	ted Medical Leave 03	Degree o	of Injury	Slight	
Driver			ID No.	-	
Name	JASWANT SINGH S/O GURN	JASWANT SINGH S/O GURMEJ SINGH			S7639631J
Related Vehicle	SML3933X (Car)		Contact No.		97601610
Hospital/Clinic	NIL		Class Drivin Licens Expir	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Dis	scharge	NIL	
Date Heading	nted Medical Leave NIL	Dograp	of Injury	NIL	

Brief Details.

On 14/08/2019 at about 0715hrs, I was riding m/cycle FBG9252U along Jalan Boon Lay towards Jurong Pier Road. I was on centre lane of said road near 249 Jalan Boon Lay. While travelling, I wanted to lane change to the right most lane. I have checked the right mirror and blind spot, and it was clear to proceed. While lane changing, there was a car on my right which drove past me quickly. As it was not safe, I lane changed back to the middle lane and car in front of me SML3933X applied emergency brake. While doing so I tried to stop my vehicle however the m/cycle front portion had collided with the rear portion of the car.

Due to the accident, I fell and injured myself. Said driver had assisted me to move m/cycle and we exchanged particulars. Ambulance was scene and I was conveyed to Ng Teng Fong Hospital.





3 of 3

Report No. T/20190814/2120

Police Station Of Origin: Queenstown N.P.C 3 Queensway #01-03 SINGAPORE 149073 Tel No: 1800-4719999

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: D / Staff Sgt MOHAMMED HARIS BIN MOHAMED PAHORASI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 14/08/2019 16:01
Officer In Charge Of Case:	Classification Of Case:
Sr Staff Sgt CHONG GUAN FATT Contact No.: 65476083	RE SN 50
Authentication Stamp NP168	
	SIGNATURE

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icy No.	5309780207	Venicle Ro.	recs2520		SST Registration No.	224147000	
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start No.(Mobile)	V1810104	Contact No.(Office)			Contact No (Home)	- Consideration	
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nif. No.	13-561	,					
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4	NAC_BLINTT_MERAH, BOOKTO(NAY) S (BLINTT MERAH))	IONAL ASSESSMENT CENTRE SERVICE on 14 Aug 2018 17-08	Prictor	Doctor wil	Pho	nus 2019-8-14	
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EV.	NAC_BURTT_MERAH_BIDS76(NAT) S (BURTT MERAH))	DNAL ASSESSMENT CENTRE SERVICE un 14 Aug JULY 17:06	Photos	Normal		us 2019-8-34	
20	NAC_BURIT_MENON_BODGTS[NATH S (BURIT HEXAM)]	ONAL RESESSIONET CENTRE SERVICE DE 14 Aug 2019 17/28	Protos	Numerical	Phot	or 2019-8-14	
1	NAC BUNIT MERAN SUGGYGI KATI S (SURIT MERAN)) (DNAL ASSESSMENT CENTRE SERVICE on 14 Aug 2019 17:08	Photos	Normal		ns 2019-8-14	
	NAC_BURTT_MERAH_RODEFE(NATIO = (BURTT HERAH)) =	DNAL ASSESSMENT CENTRE SERVICE IN 14 Aug 2019 7:09	Photos	Normal	Phot	ns 3010-0-14	
46	NAC BUNIT MERAH 800676(NATIO S (BÜKIT MERAH)) 0	DNA: ASSESSMENT CENTRE SERVICE by 14 Aug 2018 17:08	Photos	Narroad	Photo	ne 2019-8-14	
	NAC_MINIT_MERAH_MIDE76; NATIG 5 (BURIT MERAH)) a	DNAL ASSESSMENT CENTRE SERVICE o 14 Aug 2019 17:00	Profits	Normal	Photo	on 3019-0-14	
1							
1412010					11/1-21803-2007 193		

ACCIDENT STATEMENT

ACCIDENT DATE: 14 08 100/MM/	YYY), TIME: (07 20) (HH:MM
LOCATION: 249 Jalan Boon Lay	/ Infamm
T. DETAILS OF VEHICLE	1
a) VEHICLE NUMBER: FBG 9252 V	• 35 €
DINSURANCE COMPANY: NTUC	
C)POLICY NUMBER:	
d)POLICY TYPE: (COMPREHENSIVE / THIRD I	7.1.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7
OMAKE & MODEL: Yamaha Jupiter	ARTY THIRD PARTY FIRE &THEFT
DTYPE:(SALOON / COURE (ARM WANTED	35,
[]TYPE:(SALOON / COUPE / MPV /VAN / LO	RRY / MOTORCYCLE YOTHERS)
DARE YOU GO AT ACCIDENT TIME:	
I) ARE YOU CLAIMING UNDER YOUR OWN IN	Joing to Mork
THE COURT OF THE PROPERTY OF T	SURANCE (YES/NO)
THE THE PARTY OF T	KEPOKTING ONLY)
AINAME: Southern Motor	Market American
b/NRIC/FIN/PASSPORT:	(MALE / FEMALE)
c)ADDRESS:	CONTACT:
(I) MARKOTO III	
* CONTINUE TO 3.d IF DRIVER ALSO POLICY I	- OLDEB
1 Stantage Onliver	
(Including driver) CINAME: Mohamed Hussan slo mohamed	Younus (MALE) FEMALE)
OINRIC/FIN/PASSPORT: 100+11826	CONTACT: 9181 9104
CIADORESS: BIK 608 #12-560 Juy	ong west st.65
COLDATE OF SIRVING 22 . 12	9
PLOCCUPATION (NICE - 12 2000)(DD	/MM/YYYY) .
e)OCCUPATION: (INDOOR / OUTDOOR)	Lo
FIDATE OF DRIVING PASS 16/07	10
4. WAS DRIVER AN EMPLOYEE OF THE INSUIT	RED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WIT	TH INSURED:
WINCAU SUNFACE: HORY / WET / ATLIENT	OTHERS
2 TYPO WINTER THE TOTAL TOTAL	
7. d) REPORTED TO POUCE (YES) NO)	* = 4
IF YES, PLEASE STATE WHICH POLICE STATION	Queency in Police of the
8. THIRD PARTY VEHICLE	- Ancens and Lance Standa
of passanaer of Vehicle tuninem (MI ac as)	MODEL: BMW
Including driver) b) DRIVER'S NAME: Jas Hant Singh	_MODEL:
CI NICOTINIPASSPORT: 576576217	CONTACT: 97601610
9. THIRO PARTY VEHICLE	
No of passinger of VEHICLE NUMBER:	_MODEL:
Industria distant	water a second of the second o
NRIC/FIN/PASSPORT:	_CONTACT:
III and	

email = hasyasais 123@gmail.com

REPUBLIC OF SINGAPORE IDENTITY CARD NO. T0071182E

Early MACH

MOHAMED HASSAN S/O MOHAMED



INDIAN

Dere or sirth

27-12-2000

INDIA



5512401



HIIC No. T0071182E

For LKK/NAC Use Only

13-08-2015

Attitrees

APT BLK 508 JURONG WEST STREET 65 #12-560 SINGAPORE 640608 MOHAMED HASSAN SIO MOHAMED VOUNUS FOR LKK/NAC Use Only

Birth Date: 16 Jul 2019

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

EFFECTIVE DATE

Class 28 Motorcycles =< 200 cc

16 Jul 2019

For LKK/NAC Use Only

NF 426A



Continue

eBaoTech GeneralClaim Hello, NAC_BUKIT_MERAH_800676 · Change Language Change Password · Log Out My Desktop **Policy Query** Notice of Loss Policy No. 5109280207 Date of Accident 14/08/2019 16:48 Vehicle No.(For Motor) FBG9252U Certificate Number Search Policyholder Name Policyholder NRIC Certificate Vehicle No. Insured Object Commence Date Select Policy No. Product Cover Type Expiry Date Number 5109280207-000029 SOUTHERN MOTOR 5109280207 23414700L GFM Third Party FBG9252U FBG9252U 07/05/2019 06/05/2020



Certificate of Insurance

		1959 (MALAYSIA)	
Certificate Number: 5109280207-0		Cover : Third Party	
 Index mark and Registration Nu 	imber of Vi		
Chassis Number		: MH3555002CK099434 : SOUTHERN MOTOR	
Name of Policyholder Seffective Date of Insurance		: 07 May 2019	
Expiry Date of Insurance		: 06 May 2020	
 Persons or Classes of Persons er 	ntitled to o		
(a) The Policyholder.			
	riving on th	Policyholder's order or with his/her permissi	on.
the Motor Vehicle or has be	een so per	sitted in accordance with the licensing or oth tted and is not disqualified by order of a Cou rom driving the Motor Vehicle.	er laws or regulations to drive irt of Law or by reason of any
6. Limitations as to Use#			
57-07	f pleasure	rposes and in connection with the Policyhok	der's or Hirer's business.
This Policy does not cover			
(a) Use for racing, pace-making	-	75	
(b) Use for the carriage of good(c) Use for any purpose in cont		n samples) in connection with any trade or b	ousiness.
EXCESS (SECTION 1) EXCESS (SECTION 2)		N/A S1,500 N/A	
NAMED DRIVER (1) NAMED DRIVER (2)	•	N/A N/A	
NAMED DRIVER (2) HIRE PURCHASE COMPANY SUM INSURED	***************************************	N/A N/A N/A	
NAMED DRIVER (1) NAMED DRIVER (2) HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Policy Vehicles (Third Party Risks and Com	pensation	N/A N/A N/A Certificate relates is issued in accordance v act (Chapter 189) and Part IV of the Road Tra 20000572842) hrs	