

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	17/09/2019 11:15
Date Of Accident	15/09/2019 20:10
Exact Location Of Accident	LOR 6, GEYLANG TOWARD GEYLANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FT2239P
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Insured/Policyholder

Name Of Registered Owner	MUHAMMAD A'ZRUL IZZATI BIN HAMZAH
NRIC No	S9612581Z
Email Address	AZRUL_IZZATI@ICLOUD.COM
Mobile Phone No	(LOCAL) +65-92779512
Alternative Phone No	OFFICE-92779512

Vehicle Particulars

Manufacturer	YAMAHA
Model	RXZ
Exact Purpose for which vehicle was being used at time of accident	GOING HOME
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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	AN3173050
Cover Note Number	

Driver

Name of Driver	MUHAMMAD A'ZRUL IZZATI BIN HAMZAH
NRIC No	S9612581Z
Date Of Birth	07/04/1996
Occupation	OUTDOOR
Date Of Driving Pass	04/08/2015
Driving Experience	4 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92779512
Fax Number	
Contact Number	OFFICE-92779512
EEmail Address	AZRUL_IZZATI@ICLOUD.COM

Address	BLK 403 BEDOK NORTH AVE 3 #10-243 SINGAPORE
Postcode	460403
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	SKW2570G
	-
	-
Insurance Company of Driver's Own Vehicle	AIG ASIA PACIFIC INSURANCE PTE. LTD.
	-
	-

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	3
Was any body injured in the Accident?	YES
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 [OTHER]	G/20190916/7003
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT NO.G/20190916/7003

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 Witness 1

Name	MOHAMED SANI BIN JUMALI
Phone Number	90684883
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC2981U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKW2570G
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

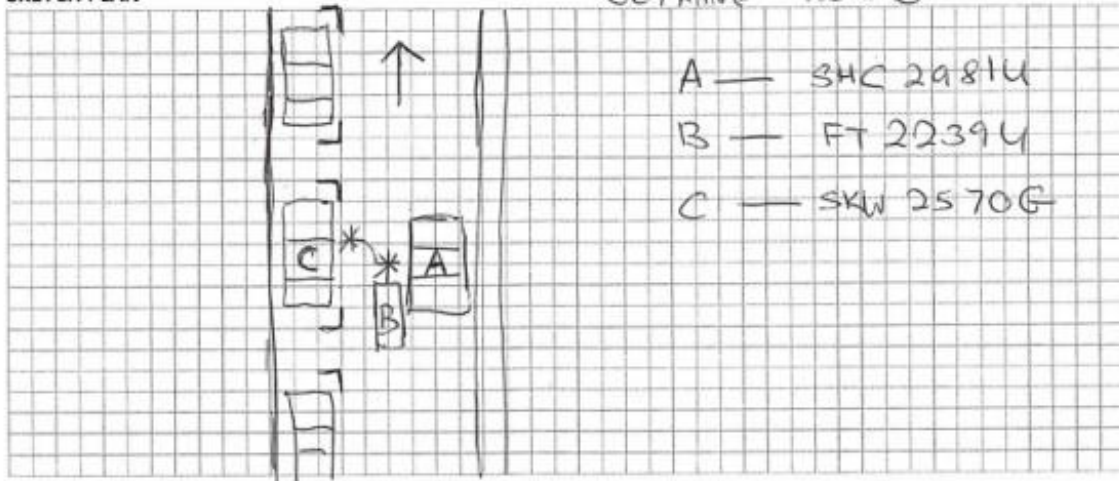
DETAILS OF INJURED PERSON 1

Name MUHAMMAD A'ZRUL IZZATI BIN HAMZAH
Approximate Age
Injuries Sustain
Injured person in which vehicle? FT2239P
Were seat belts worn? NO
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Sketch Plan

SKETCH PLAN

GEYLANG LOR 6



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report number G/20190916/7003

DECLARATION

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

Policyholder's Signature
Date & Time:

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



SANFU MOTOR CYCLE LTD.
TEL: 6744 7753

Reporting Centre Personnel's Signature
Name: LILIAN CHIA
NRIC/FIN No.: S8001094Z

Sketch Plan #2

SKETCH PLAN

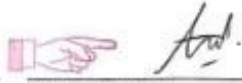
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8. **Consent under the Personal Data Protection Act (PDPA)**


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)
Date & Time:




Reporting Centre Personnel's Signature
Name: LILIAN CHIA
NRIC/FIN No.: S8001094Z

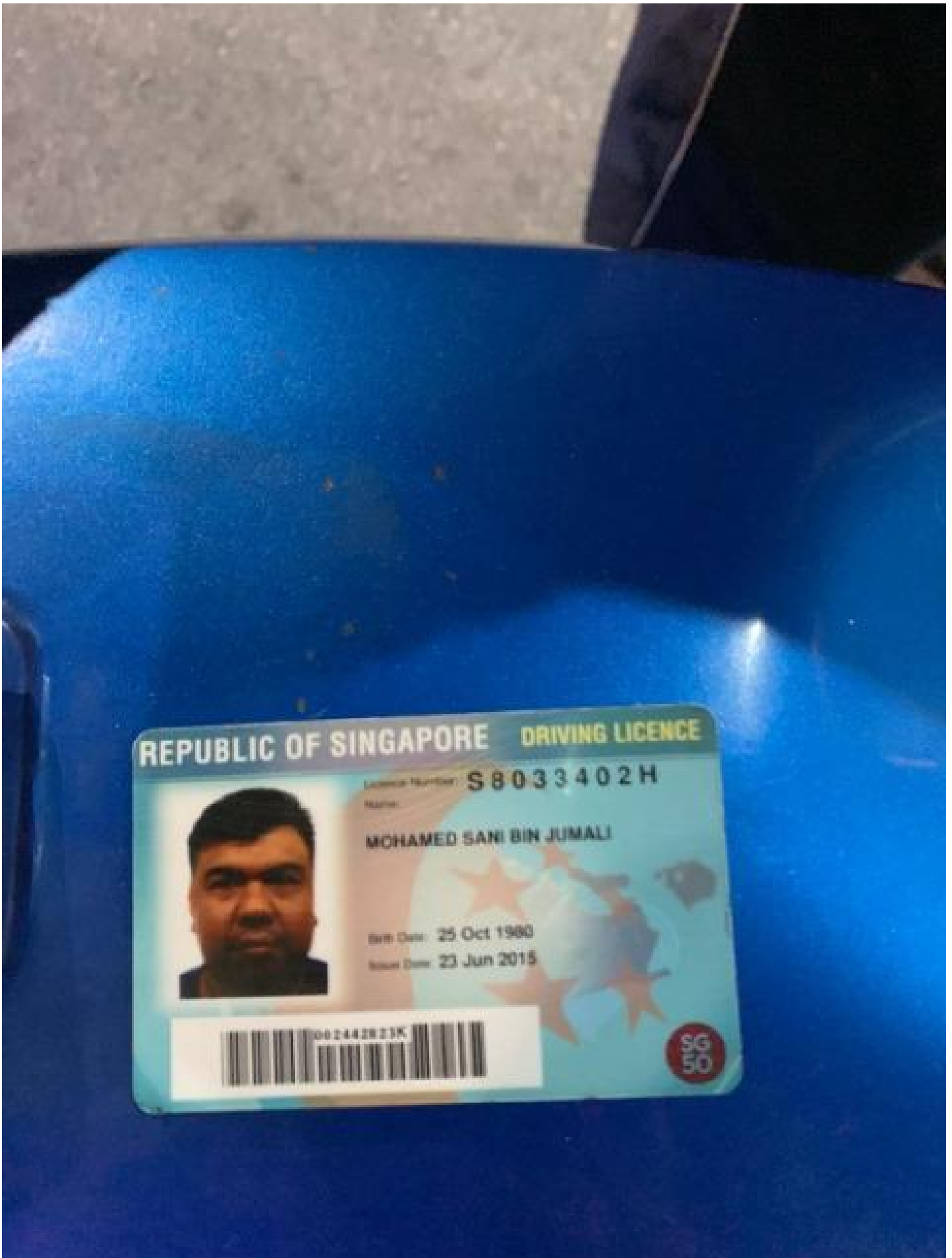
Accident Photo



Accident Photo



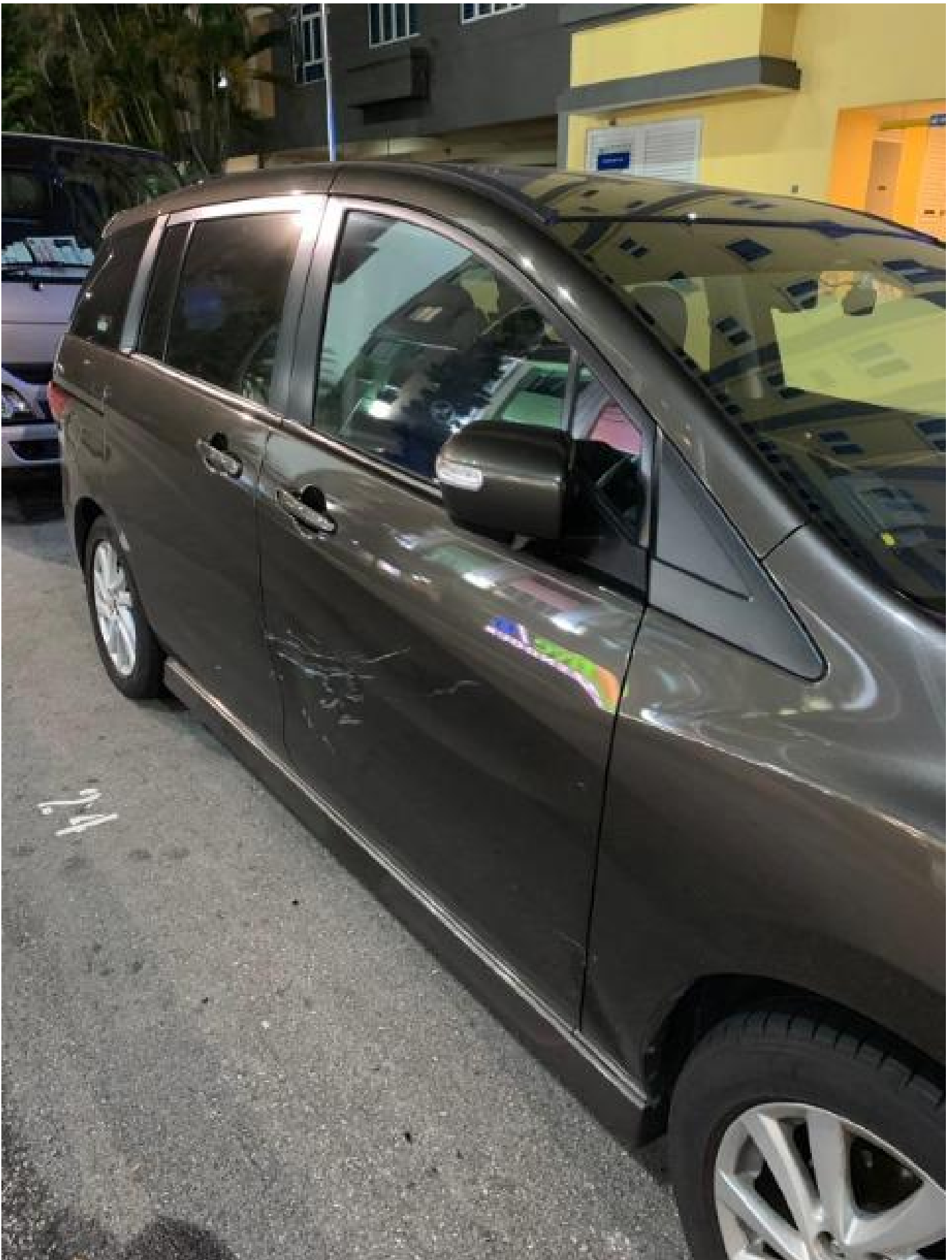
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T20190918/2131

Police Station Of Origin:
Kaki Bukit NPP
526 Bedok North Street 3 #01-448
SINGAPORE 460526
Tel No: 1800-4429999

1 of 2

Report No. T20190918/2131

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/09/2019 17:42		Video Report No.: G/20190918/7003		Station Diary No.: 20	
Informant's Particulars					
Name of Informant: MUHAMMAD A'ZRUL IZZATI BIN HAMZAH			Address: APT BLK 403 BEDOK NORTH AVENUE 3 #10-243 SINGAPORE 480403		
ID Type / ID No.: NRIC NO / S9812581Z			Contact No.: Home/Office: Mobile: 92779512		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 23	Date of Birth: 07/04/1996	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: National Service Full Time			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 15/09/2019 20:10	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 LORONG 6 GEYLANG TOWARDS GEYLANG RD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: OPENED DOOR CAUSING COLLISION				Anyone conveyed by ambulance: No

Brief Details.

I have lodged a police report G/20190918/7003. I am lodging this report to inform of the correct address where the accident occurred as mentioned above. That's all.

Police Report



**SINGAPORE
POLICE FORCE**



T/20180916/2131

2 of 2

Report No. T/20180916/2131

Police Station Of Origin:
Kaki Bukit NPP
528 Bedok North Street 3 #01-448
SINGAPORE 480528
Tel No: 1800-4429989

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:

G /

Sgt 1 TAN LI JIE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

16/09/2019 17:42

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTE AHMAD

Contact No.: 65476219

Classification Of Case:

Authentication Stamp

NP188



SIGNATURE

Identification Card

GEMALTO\$GPU10\$4519B1116		00000050320714	
NRIC No / Colour S9612581Z/ PINK			
Race MALAY	Blood Group AB (+)	Sex M	
Date Of Birth 07/04/1996	Country Of Birth SINGAPORE		
Service Status NSF	Military Rank Status ENLISTEE		
Address Blk 403 BEDOK NORTH AVENUE 3 #10-243 SINGAPORE 460403			
			

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)			EFFECTIVE DATE
C	Class 2B	Motorcycles \leq 200 CC	14 Nov 2016
	Class 3	Motor cars \leq 3000 kg with \leq 7 passengers, exclusive of the driver; and motor tractors/vehicles \leq 2500 kg	04 Aug 2015
S9612581Z			S / No.9000253683
NP 428A			 Licence No:S9612581Z



SINGAPORE ARMED FORCES IDENTITY CARD

Name

**MUHAMMAD A'ZRUL
IZZATI BIN HAMZAH**



NRIC No

S9612581Z

This card is the property of the Singapore Armed Forces. Any person finding this card is requested to forward it without delay to Central Manpower Base or any Police Station.

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number: **S9612581Z**

Name:

**MUHAMMAD A'ZRUL IZZATI BIN
HAMZAH**

Birth Date: **07 Apr 1996**

Issue Date: **04 Aug 2015**



Police Report

AXA INSURANCE PTE LTD
 8 Shenton Way, #31-01 AXA Tower
 Singapore 068811
 Customer Service Centre #B1-01
 Tel: 6338 1288 Fax: 6338 3432
 Website: www.axa.com.sg
 GST Registration Number: 149960512M



Original

File No: 03375
Policy No (if any): Renewal
SmartDrive Quote Ref:

MOTOR COVER NOTE

No. **AN3173050 ()**

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 195) - Republic of Singapore; or
- The Road Transport Act 1967 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 20 March 1980;
- Any subsequent revisions to the above Acts and Agreements.

The Insured mentioned in the Schedule, having procured for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual Form of Motor Policy applicable thereto for the period mentioned in the Schedule 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.

MR-HAMZAN BIN KASSIM

SCHEDULE

THE COMPANY	AXA INSURANCE PTE LTD
INSURED	MUHAMMAD A'ZRUL IZZATI BIN HAMZAN
MAKE AND DESCRIPTION OF VEHICLE	YAMAHA RX7
VEHICLE REGISTRATION NO.	FT2239P
YEAR OF MANUFACTURE	2001
ENGINE NO.	385150570
CHASSIS NO.	ZMC258520
ENGINE CAPACITY/TONNAGE	133
COVER TYPE	THIRD PARTY ONLY
HIRE PURCHASE	A.S.PHOOH PTE LTD
VALUE (\$)	-
PERIOD OF INSURANCE	FROM: 19-Mar-2019 TO: 18-Mar-2020
EXCESS (\$)	NIL
AXA PREMIUM WORKSHOP?	No

THIS CERTIFICATE CONFIRMS THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 195) AND PART V OF THE ROAD TRANSPORT ACT 1967 (MALAYSIA).

AXA INSURANCE PTE LTD

Authorised Signature

Issued by: AXA INSURANCE AGENCIES P.L. on: 18-Mar-2019 4:16:13 PM

Note: This Cover Note is only valid for 60 days from the date of issue unless

replaced by the Certificate of Insurance issued by the Company.

- Premium for time on risk will be charged subject to minimum S\$55.50 (inclusive of GST)

- If the policy is cancelled after the inception date;

- An administrative fee of S\$6.75 (inclusive of GST) will be charged;

- Cover note issued and cancelled before inception;

- Retaining the old registration number for a new vehicle insuring with AXA.

PREMIUM WARRANTY

For Insured's Compliance:

Please note that the premium is full amount to be paid before inception date above shown, in order for the insurance cover to be valid.

For Insured's compliance:

Please note that within the period of cover, if the cover is for more than 60 days, the premium is full and to be paid within 60 days on inception date/for cover end. For all other cases, the premium is full and to be paid before inception.

www.axa.com.sg



Changi
General Hospital
SingHealth

ORIGINAL

MEDICAL CERTIFICATE

EMD2019182609

Name MUHD A ZRUL IZZATI BIN HAMZAH		NRIC No. 806125512
This is to certify that the above-named is unfit for duty for a period of <u>7</u> days from <u>15-Sep-2019</u> to <u>21-Sep-2019</u>		
Type of medical leave granted:		
<input checked="" type="checkbox"/> Hospitalisation Leave	<input type="checkbox"/> Occupational Sick Leave	
Admitted on: _____	<input type="checkbox"/> Maternity Leave	Delivered on: _____
Discharged on: _____	<input type="checkbox"/> Certification Leave	Operated on: _____
This certificate is not valid for absence from court attendance		
Diagnosis		Surgical Operation (if applicable)
Fit to light duty from <u>22-Sep-2019</u> to <u>26-Sep-2019</u>		
Comments:		
The above-named patient attended my clinic at <u>N/A</u> and it is <u>N/A</u> No medical leave is necessary.		
Emergency/Clinic Emergency Medicine Changi General Hospital	Ward No. CGH Accident & Emergency Date 15-Sep-2019	Signature, Name, In BLOCK CAPITALS and Designation/BCR No.  MATHAVAN VALARAJANA, 53383C

Police Report



**SINGAPORE
POLICE FORCE**



G/20190916/7003

1 of 3

POLICE REPORT (NP299)

Report No. G/20190916/7003

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 468676
Tel No: 1800-2440000

Date/Time Report Made 16/09/2019 04:12	Vide Report No.	Station Diary No.
Name Of Informant MUHAMMAD A'ZRUL IZZATI BIN HAMZAH	Address APT BLK 403 BEDOK NORTH AVENUE 3 #10-243 SINGAPORE 460403	
ID Type / ID No. NRIC NO / S9612581Z	Contact No. Home/Office: Mobile: 92779512	
Nationality SINGAPORE CITIZEN	Email Address azrul_izzati@icloud.com	
Occupation National Service Full Time	Sex Male	Age 23
Institution/School Name	Date of Birth 07/04/1996	Race Malay
Date/Time Of Incident 15/09/2019 20:10 - 15/09/2019 21:45	Location Of Incident APT BLK 403 BEDOK NORTH AVENUE 3 #10-243 SINGAPORE 460403	

Brief details.

I was travelling along Lorong 6 Geylang with my motorcycle bearing plate FT2239P. I saw a taxi bearing plate SHC2981U, stop in front of Five/6 Hotel Splendour. As the space between the mentioned taxi and a car parked bearing plate SKW2570G is sufficient for me to split lane, i slowed down and lane split cautiously. As my front fender bypass the rear left door of the mentioned taxi, the passenger open the door and hit my handlebar causing me to lose control and hit the mentioned car that parked beside the taxi leaving some scratch marks on the door. I got lost control of my motorcycle and eventually fell. My

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: 16/09/2019 04:12
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

Police Report



**SINGAPORE
POLICE FORCE**



G/20190916/7003

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20190916/7003

leg got stuck under my motorcycle. As i was in pain, i tried to carry my motorcycle to get my leg out of the motorcycle. My left knee is in pain as it hit the car too hard. The taxi driver got out of his taxi to assist by carrying my bike and push it forward. He then drove his taxi further in front to avoid congestion. After the taxi driver learned that i was injured, he offered to call for ambulance. i decided to call my dad for assistance. 2 Traffic Police officers and an ambulance arrived. The medic attended to my injuries. They offered to send me to Tan Tock Seng Hospital but i refused as i live in Bedok and Changi General Hospital is nearer. My dad pushed my bike to the closest motorcycle parking lot because my clutch lever is broken and it is impossible to ride it. My dad then drove me to Changi General Hospital to get my legs checked. I got a week of hospitalisation leave from CGH.

Subjects Involved			
Suspect			
Person Name	Mohamed Sani Bin Jumali		
ID Type	NRIC NO	ID No	S8033402H
Age	35-40	Race	Malay
Language	Malay	Occupation	Taxi driver
Mobile No	90684883	Complexion	Dark
Build	Plump	Height About	190cm
Hair Colour	Black	Hair Style	Medium-Punk
Relation To Informant	None		
Victim			
Person Name	MUHAMMAD A'ZRUL IZZATI BIN HAMZAH		
ID Type	NRIC NO	ID No	S9812581Z
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:		Date/Time:	
Not applicable		16/09/2019 04:12	
Officer In-Charge Of Case:		Classification Of Case:	

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Police Report



**SINGAPORE
POLICE FORCE**



G/20190916/7003

3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20190916/7003

Gender	Male	Age	23
Race	Malay	Language	English
Occupation	National Service Full Time	Address Type	
Address	APT BLK 403 BEDOK NORTH AVENUE 3 #10-243 SINGAPORE 460403	Mobile No	92779512
Is Informant A Victim?	Yes		
Person Name: MUHAMMAD A'ZRUL IZZAT BIN HAMZAH (Informant)			

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: 16/09/2019 04:12
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

SKETCH PLAN

SKETCH PLAN

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 - (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 shed outside of Singapore, for one or more of the above Purposes.
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 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time:

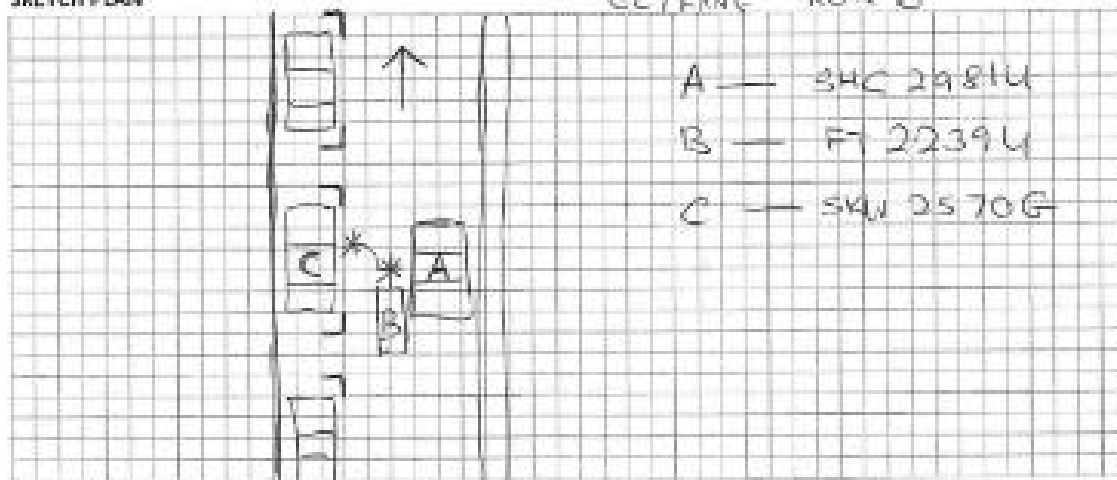

Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name: IIIJIAN CHIA
NRIC/FIN No.: S80010842

SKETCH PLAN

SKETCH PLAN

CEYLON MOTOR CO



A — SHC 2981U
B — FT 2239U
C — SQW 0570G


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report number G/2019/0916/7003

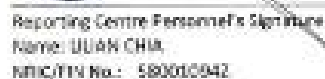
DECLARATION

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


Policyholder's Signature
Date & Time:


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




Reporting Centre Personnel's Signature
Name: LIUAN CHUA
NIC/PTN No.: 580010942

Motor Vehicle Insurance / 18

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MSFM19123086 Vehicle Registration No: FT 2239P
Name(as shown in NRIC) : MUHAMMAD AZRUL IZZATI BIN HAMZAH NRIC/FIN/Passport No : S96125812
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Blk 403 BEDOK NORTH AVE 3 #10-243 Singapore 460403
Contact (Tel) : _____ Mobile No. : 92779512
Email Address : azrul_izzati@icloud.com
Date of Accident : 15/9/2019 Time of Accident : 20:10 - 21:45
Place of Accident : Lor 6, GEYLANG TOWARD, GEYLANG ROAD
Insurance Company : AXA

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Accident Location is at Lor 6, Geylang TOWARD Geylang Road.

Have provide my email : azrul_izzati@icloud.com

injured person name: MUHAMMAD AZRUL IZZATI BIN HAMZAH


Policyholder / Driver's Signature
Date: 17 SEP 2019


Reporting Centre Personnel's Signature
Name: Lim Jia Hui
NRIC/FIN No.: S820062
Date: 17 SEP 2019