

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	18/11/2019 10:19
Date Of Accident	14/11/2019 19:10
Exact Location Of Accident	ALONG MUHAMMAD SULTAN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE5961T
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD QUFIAN DY BIN MD SUAMI
Co Reg No	- 3914A
Email Address	TWOHERO1SOULS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-87670759
Alternative Phone No	OFFICE-87670759
Vehicle Particulars	
Manufacturer	YAMAHA
Model	RXZ135-133CC (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	
Cover Note Number	72172070/E01
Driver	
Name of Driver	MOHAMMAD NAZRI BIN ABUTALIB
NRIC No	S9015775B
Date Of Birth	11/05/1990
Occupation	OUTDOOR
Date Of Driving Pass	12/11/2008
Driving Experience	11 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87670759
Fax Number	
Contact Number	OTHERS-87670759
Email Address	TWOHERO1SOULS@GMAIL.COM

Address	BLK 48 LOWER DELTA ROAD #07-19
Postcode	160048
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - OPENING DOOR OF VEHICLE
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?	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	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
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

PLEASE REFER TO SKETCH AND POLICE REPORT T/20191118/2131

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	SHC3976Z
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM MENG CHONG
NRIC/Passport Number	S12039401
Contact Number	97682579
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

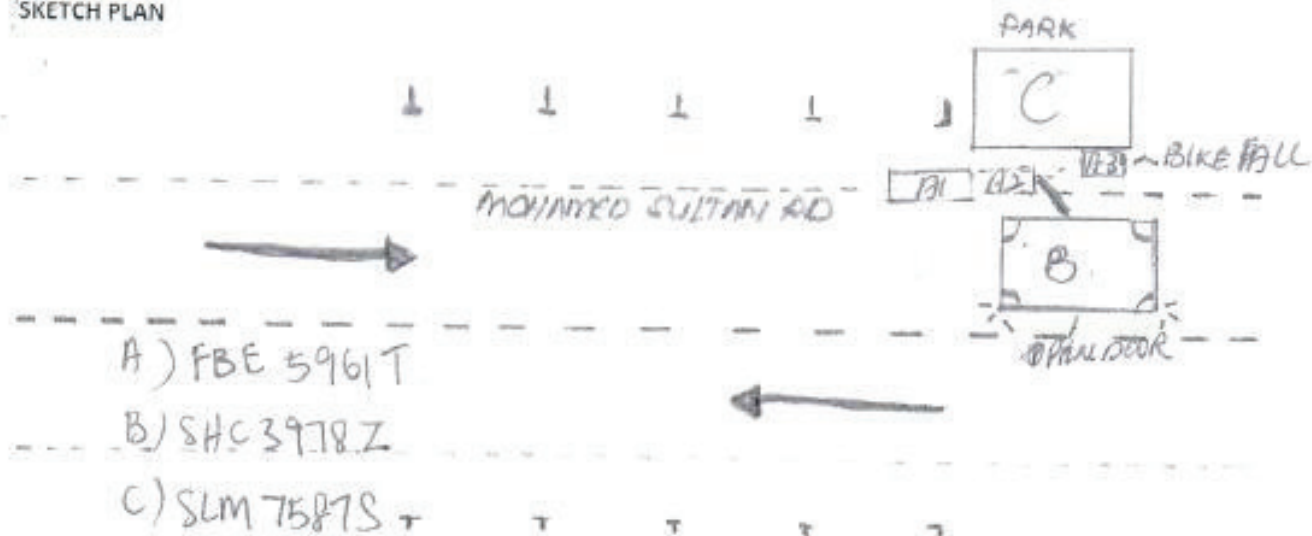
DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLM7567S
Vehicle Make/Model/Colour HONDA
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver MUHAMMAD JAMIL BIN HAMDAN
NRIC/Passport Number S7622039E
Contact Number 96819375
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name MOHAMMAD NAZRI BIN ABUTALIB
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? FBE5961T
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

① 1910 HRS. I WAS RIDING ALONG MOHAMED SULTAN ROAD WHERE THE ACCIDENT TOOK PLACE. IT WAS ONLY A 2 LANE ROAD, THE EXTREME LEFT LANE WAS OCCUPIED BY THE VALET SERVICE COMPANY. I WAS MOVING ALONG AND THERE'S A TAXI ON MY RIGHT SIDE ALSO MOVING ALONG WITH ITS RIGHT SIGNAL LIGHT ON. I DID NOT KNOW THAT THE TAXI WAS ALIGHTING ITS PASSENGER, CAUSE THE TAXI WAS ON THE SECOND LANE OF THE ROAD.

AS I WAS MOVING ALONG, SUDDENLY PASSENGER DOOR OF THE TAXI (DOOR LEFT SIDE OF VEHICLE) OPENED SUDDENLY AND HIT ON ME. I FELL OFF MY BIKE AND MY BIKE MOVE FORWARD AND HIT A STATIONARY PARKED VEHICLE SLM 7587Z, ON ITS RIGHT DOOR DRIVER SEAT. THE CAR WAS OWNED BY THE VALET SERVICE COMPANY. THEY'RE ALSO WITNESSING REGARDING THE TAXI OF STOPPING ON SECOND LANE WITHOUT ANY HAZEL LIGHT ON.

TAXI NO DAMAGE.

DAMAGES ON MY BIKE, AND ABIT SCRATCHES ON ANOTHER CAR.

POLICE REPORT 7/2018/118/2131

DECLARATION

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

Policyholder's Signature

Date & Time: 15/11/2019

1557 HRS

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

18/11/2019

KOSLI WONG



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

Report No. T/20191118/2131

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/11/2019 16:04		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MOHAMMAD NAZRI BIN ABUTALIB			Address: APT BLK 48 LOWER DELTA ROAD #07-19 THE BEO CRESCENT SINGAPORE 160048		
ID Type / ID No.: NRIC NO / S9015775B			Contact No.: Home/Office: Mobile: 87670759		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 29	Date of Birth: 11/05/1990	Type of Informant: Rider		
Race:			Language:		Institution / School Name:
Occupation: Motorcycle delivery man			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 14/11/2019 19:10	Type of Location:
Location: Along Road 1 Traveling Toward Road 2 MOHAMED SULTAN ROAD RODYK STREET ALONG MOHAMED SULTAN ROAD TWDS RODYK STREET				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control:		Traffic Volume: Heavy
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE5961T	Motorcycle				Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE5961T	MSIG INSURANCE (SINGAPORE) PTE. LTD.	72172070/E01	14/10/2019	17/04/2020



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

Report No. T/20191118/2131

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMMAD NAZRI BIN ABUTALIB	ID No.	S90157758
Related Vehicle	FBE5961T (Motorcycle)	Contact No.	87670759
Hospital/Clinic	SHALOM CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	15/11/2019	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION

I WAS TRAVELLING ALONG MOHAMED SULTAN ROAD ON THE SECOND LANE, THERE WAS A TAXI IN FRONT OF ME. I WAS MOVING ALONG BEHIND IT THEN SUDDENLY THE TAXI STOPPED WITHOUT ANY SIGNAL LIGHTS AND I SWERVED TO THE LEFT. THE DOOR ON THE LEFT OF THE TAXI SUDDENLY SWING OPEN, I QUICKLY SWERVE MY BIKE AGAIN TO PREVENT MY BIKE FROM HITTING IT THEREFORE THE DOOR HIT THE SIDE OF MY BODY AND I FELL OFF THE BIKE. NO ONE WAS INJURED.



SINGAPORE
POLICE FORCE



T/20191118/2131

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

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Report No. T/20191118/2131

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:
TP /
MUHAMMAD MOINUR RAHMAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
18/11/2019 16:04

Classification Of Case:



SINGAPORE
POLICE FORCE

SIGNATURE