MSME19092801 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 16/07/2019 10:43 SUBMITTED BY: Chia Pei Ying

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.

atoresaid.		
	ACCIDENT STATEMENT	
Date Of Report	16/07/2019 10:43	
Date Of Accident	04/07/2019 17:00	
Exact Location Of Accident	JALAN AHMAD IBRAHIM	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FBK4699B	
Insured/Policyholder		
Name Of Registered Owner	MUHAMMAD SHAHFIQ BIN NORDIN	
NRIC No	S9115658Z	

Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-92333385

Alternative Phone No OFFICE-92333385

Vehicle Particulars

Manufacturer KTM

Model 200 DUKE-200CC

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 QBE INSURANCE (SINGAPORE) PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NC

Policy Number 8-V0015723-MVA-R001

Cover Note Number

Driver

Name of Driver MUHAMMAD SHAHFIQ BIN NORDIN

NRIC No S9115658Z
Date Of Birth 11/05/1991
Occupation INDOOR
Date Of Driving Pass 16/12/2010

Driving Experience 8 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92333385

Fax Number

Contact Number OFFICE-92333385

EMail Address NOEMAIL

BLK 886 TAMPINES ST 83 #03-33 Address

Postcode

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 **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)

2

involved in the accident

YES

Was any body injured in the Accident? 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

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

SINGAPORE

TEL NO: 65470000 - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20190710/7019.

Attachment(s)

Are accident photos available for attachment?

NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

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

Details Of Properties

VEHICLE B

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF INJURED PERSON 1

Name MUHAMMAD SHAHFIQ BIN NORDIN

Approximate Age Injuries Sustain

Injured person in which vehicle?

FBK4699B

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN

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- 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:
 - 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:

NRIC/FIN No.:

Reporting Centre Personnel's Signature

sale to a result you a travel of your Art

DESCRIBE CIRCUMSTANCE	OF THE ACCIDENT	
REF	of To fouce REPORT.	
* Bike AT	TRAFFIC LOMPOUR.)	
DECLARATION I/We declare the foregoing par	iculars are true in every respect.	
X 1		
Policyholder's Signature Date & Time	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Sketch Plan #3 Pg. 1





Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20190710/7019

REPORT OF	A TRAFFIC	ACCIDENT					
Date/Time Report Made: 10/07/2019 14:34			Vide Report No.:	Station Diary No.:			
Informant	's Particu	lars					
Name of Ir MUHAMM		FIQ BIN NORDIN	Address: APT BLK 886 TAMPINES STI 520886	REET 83 #03	3-33 SINGAPORE		
ID Type / ID No.: NRIC NO / S9115658Z			Contact No.: Home/Office:	Mobile: 92333385			
Nationality: SINGAPORE CITIZEN			Email: shahfiq91@hotmail.com				
Sex: Male	Age: 28	Date of Birth: 11/05/1991	Type of Informant: Rider				
Race: Malay			Language: English	Institution	/ School Name:		
Occupation: Technician			Driving Licence Information: Class: 2B,3	Date of Ex	piry:		

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/07/2019 17:00	Type of Location: Expressway Merging lane	
Location:					
JALAN AHMAD	IBRAHIM				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h	
Traffic Flow: Dual Carriage W	ay	Traffic Control: Not Controlled	l l	Traffic Volume: Heavy	
Type of Collision				Anyone conveyed by	

Details of Ve	ehicle Involved					
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBK4699B	Motorcycle	KTM	200 DUKE	Orange		0

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK4699B	QBE Insurance (Singapore) Pte Ltd	V0015723	14/09/2018	13/09/2019

Sketch Plan #4 Pg. 1





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

2 of 3 Report No. T/20190710/7019

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian II	nvolved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Rider						
Name	MUHAMMAD SHAHFIQ BIN NORDIN			ID No	-	S9115658Z
Related Vehicle	FBK4699B (Motorcycle)			Conta	ct No.	92333385
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL			Class Drivin Licend Expiry	g	Class: 2B,3 Date of Expiry: NIL
Date Treatment	04/07/2019	******	Date Disc	harge	05/07	7/2019
No. of Days granted Medical Leave 07			Degree of	Injury	Sligh	

Brief Details.

On the 4 July 2019 at roughly 1700 hrs
I was travelling along Jalan Ahmad Ibrahim road merging into AYE (CTE) saw a lorry jam break. In attempt to evade, i serve right, self skid and injured myself.

Sketch Plan #5 Pg. 1





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20190710/7019

CONTINUATION OF REPORT

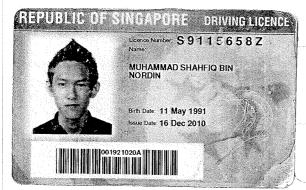
Sketch Plan

NP168

Informant is not able to provide sketch plan

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: 10/07/2019 14:34
Officer In Charge Of Case:	Classification Of Case:
Authentication Stamp	

Sketch Plan #6 Pg. 1



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$9115658Z



MUHAMMAD SHAHFIQ BIN NORDIN

محمد شهفیق بن نوردین

MALAY

Date of birth 11-05-1991 M

IDIABBEE?

Country of birth

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES) EFFECTIVE DATE Class 2B Motorcycles =< 200 CC
Class 3 Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg S / No. 9000215996 S9115658Z NP-428A

11-05-2006 APT BLK 886 TAMPINES STREET 83 #03-33 SINGAPORE 520886 QBE Insurance (Singapore) Pte Ltd

A member of the worldwide QBE Insurance Group - Unique Entity No. 198401363C

1 Raffles Quay, #29-10 South Tower, Singapore 048583 Tel: 65-6224 6633 Fax: 65-6533 3270 GST Registration No.: M200644018 www.qbe.com.sg



Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No.

Account Name MULTI-LINES AGENCIES

MCI Type MY1

8-V0015723-MVA-R001

1 Index Mark and Registration Number of Vehicle or Chassis No.

FBK4699B

2 Name of Policyholder MUHAMMAD SHAHFIQ BIN NORDIN

3 Effective date of Commencement of Insurance for the purpose of the Regulations

14/09/2018

4 Date of Expiry

13/09/2019

5 Person or Classes of Person entitled to drive*

(a) The Policyholder Only.

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 the driving the Motor Vehicle

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

6 Limitations as to use*

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

The Policy does not cover:

(i) Use for hire or reward.

- (ii) Use for racing, pace-making, reliability trial or speed-testing.
- (iii) Use for the carriage of goods(other than samples) in connection

with any trade or business.

- (iv) Use for any purpose in connection with Motor Trade.
- 7 Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk 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 Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act. 1987 (Malaysia)

QBE Insurance (Singapore) Pte Ltd

Authorized Signature

Date of Issue: 31/08/2018