

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	02/12/2019 09:27
Date Of Accident	30/11/2019 15:30
Exact Location Of Accident	ALONG BKE TOWARDS WOODLANDS (LAMP POST NO. 503)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC4692T
Insured/Policyholder	
Name Of Registered Owner	NOR RASHIDI BIN MOHAMAD
NRIC No	S7423899H
Email Address	SHIDASHIDI2831@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97714850
Alternative Phone No	OTHERS-97714850

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 X (A)
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2017-00003602-02
Cover Note Number	

Driver

Name of Driver	NOR RASHIDI BIN MOHAMAD
NRIC No	S7423899H
Date Of Birth	31/07/1974
Occupation	INDOOR
Date Of Driving Pass	20/08/1998
Driving Experience	21 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97714850
Fax Number	
Contact Number	OTHERS-97714850
Email Address	SHIDASHIDI2831@GMAIL.COM

Address	BLK 114 EDGEFIELD PLAINS #06-374
Postcode	820114
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 - CHANGE/CROSS LANE
Weather Conditions	RAINING
Road Surface	WET

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?	YES
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)	7
Passenger 1	NAME: : NORRASIDAH GENDER: : FEMALE
Passenger 2	NAME: : MUHAMMAD ADHAM GENDER: : MALE
Passenger 3	NAME: : NURUL UMAIRAH GENDER: : FEMALE
Passenger 4	NAME: : FATIMAH GENDER: : FEMALE
Passenger 5	NAME: : MUSTIKARATU GENDER: : FEMALE
Passenger 6	NAME: : AUNI GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	BUKIT PANJANG NORTH NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES

Remarks/ Reasons:	RETAIN BY POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBH2317H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

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: 2/12/19, 9:30am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

WDL
CHECKUP
VIADUCT

Along BKE Towards Wlds

A = SLC4692T

B = FBW2317H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report: T/20191130/2108

DECLARATION

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

Policyholder's Signature

Date & Time: 3/12/19, 9:30am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature _____

Name: _____

NRIC/FIN No.:



Police Report



**SINGAPORE
POLICE FORCE**



T/20191130/2108

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

1 of 3

Report No. T/20191130/2108

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/11/2019 17:32		Vide Report No.: L/20191130/0119		Station Diary No.: 52	
Informant's Particulars					
Name of Informant: NOR RASHIDI BIN MOHAMAD			Address: APT BLK 114 EDGEFIELD PLAINS #06-374 SINGAPORE 820114		
ID Type / ID No.: NRIC NO / S7423899H			Contact No.: Home/Office: Mobile: 97714850		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 45	Date of Birth: 31/07/1974	Type of Informant: Driver		
Race: Javanese			Language: English		Institution / School Name:
Occupation: Research officer (non-statistical)			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/11/2019 15:30	Type of Location: Straight Road
Location: Along Road 1 BUKIT TIMAH EXPRESSWAY BKE TOWARDS WOODLANDS (10KM) Lamp Post Number: 503				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit: 90 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH2317H	Motorcycle	YAMAHA	JUPITER 135 MANUAL	Black	Slightly Damaged	0
SLC4692T	Car	HONDA	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR	Blue	Slightly Damaged	6

Police Report



**SINGAPORE
POLICE FORCE**



T/20191130/2108

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

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Report No. T/20191130/2108

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SLC4692T	FWD Singapore Pte. Ltd	PNPV2017-00003602-02	16/05/2019	15/05/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NOR RASHIDI BIN MOHAMAD		ID No. S7423899H
Related Vehicle	SLC4692T (Car)		Contact No. 97714850
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL		Degree of Injury NIL

Brief Details.

On 30/11/2019 at about 1530hrs, I was driving my car SLC4692T with 6 passengers along Bukit Timah Expressway towards Woodlands Checkpoint. It was raining heavily at the time. At the point after Woodlands Ave 3 exit, I was driving on the right most lane of 4 lanes. My car was stationary because of the queue towards the checkpoint. I intended to exit the expressway at Woodlands Centre Road. I checked my left side mirror and there was no motorcycle coming from the rear. I turned on my left signal and slowly inched my car to the left. While I was changing lane halfway, a motorcycle passed by on my left. Thus I stopped my car so that I can check if the road is clear and be sure that there are no other motorcycle. All of a sudden, I heard a crash and I noticed a motorcycle had swiped the left side of my vehicle.

I alighted from my vehicle to check on the rider. Along with other motorist, we assisted him to the road shoulder while my wife called for the ambulance. He was fine walking and conscious apart from injuries on his right foot, and abrasions on his right shoulder and arm. He had insisted not to be conveyed to hospital as he wanted to go home, however my wife had already called for them. He also admitted that he already saw my car, however he was unable to brake in time due to the wet weather and downslope. He also admitted that he was riding too fast at the time.

Subsequently, Traffic Police and Ambulance arrived. Paramedics then conveyed the rider to Khoo Teck Puat Hospital. I have an in-vehicle camera in my car, which the traffic police then seized the memory card. I was then advised to lodge a traffic accident report at the police station.

Police Report



**SINGAPORE
POLICE FORCE**



T/20191130/2108

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

3 of 3

Report No. T/20191130/2108

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:

L /

Sgt 3 MUHAMMAD AFIF BIN MOHD ROSDI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

30/11/2019 17:32

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MUHAMMAD NOOR BIN ABDUL
RAHMAN

Classification Of Case:

Contact No.: 65476201

Authentication Stamp



Signature :

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card



Driving License

