

## 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	03/02/2020 14:47
Date Of Accident	23/01/2020 20:15
Exact Location Of Accident	2 LIANG SEAH ST
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH3618H
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#### Insured/Policyholder

Name Of Registered Owner	HAIRULNARASHID BIN ABDUL RAHMAN
NRIC No	SXXXX878J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88765994
Alternative Phone No	OFFICE-88765994

#### Vehicle Particulars

Manufacturer	BAJAJ
Model	PULSAR 200 NS MANUAL
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	MOTORCYCLE

#### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5084576862-03
Cover Note Number	

#### Driver

Name of Driver	AISY BAZLI BIN HAIRULNARASHID
NRIC No	SXXXX061J
Date Of Birth	21/07/1998
Occupation	OUTDOOR
Date Of Driving Pass	26/09/2016
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96691751
Fax Number	
Contact Number	OFFICE-96691751
Email Address	NOEMAIL

Address	BLK 312 BUKIT BATOK STREET 32 #04-65
Postcode	650312
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### General Information of the Accident

Type Of Accident	FIRE, EXPLOSION OR LIGHTNING
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	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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	CENTRAL POLICE DIVISIONAL HQ (A DIVISION)
Police Station Address	<b>ROAD:</b> 391 NEW BRIDGE ROAD #03-112 POLICE CANTONMENT COMPLEX BLOCK A , <b>POSTCODE:</b> 088762 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2240000 - <b>FAX NO:</b> 62200877
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - A/20200124/7001.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

## Accident 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.

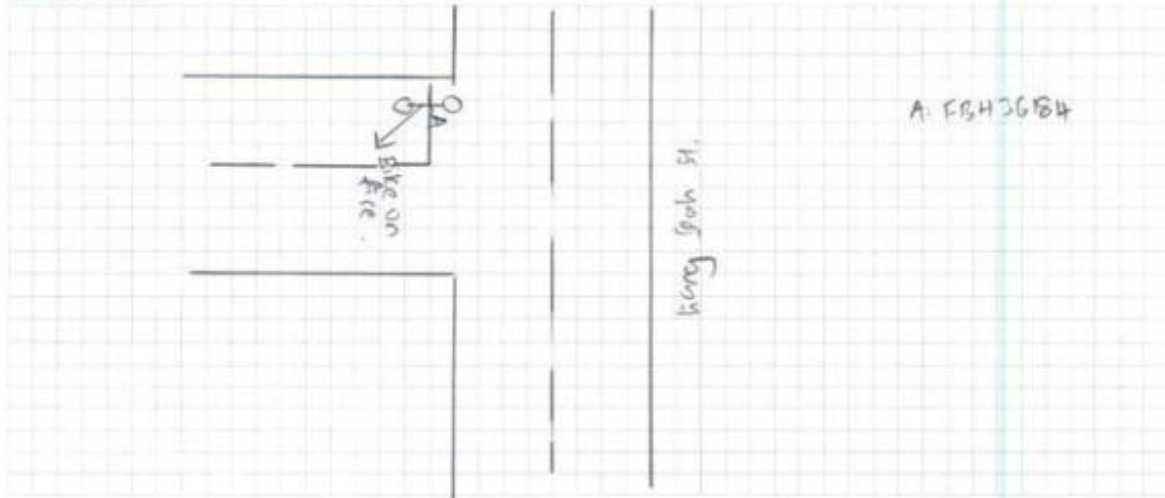
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

\_\_\_\_\_  
Driver's Signature  
(if driver is not the policyholder)  
Date & Time:

\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Accident Sketch Plan

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to police report - 0720200241 2001.

## 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 &amp; Time:

Reporting Centre Personnel's Signature

Name: \_\_\_\_\_

NRIC/FIN No.:

# Police Report



**SINGAPORE  
POLICE FORCE**



A/20200124/7001

1 of 2

## POLICE REPORT (NP299)

Report No. A/20200124/7001

Police Station Of Origin  
Central Division HQ  
A 391 New Bridge Road #03-112 Police  
Cantonment Complex SINGAPORE 088762  
Tel No:1800-2240000

Date/Time Report Made 24/01/2020 02:15	Vide Report No.	Station Diary No.
Name Of Informant AISY BAZLI BIN HAIRULNARASHID	Address APT BLK 312 BUKIT BATOK STREET 32 #04-65 SINGAPORE 650312	
ID Type / ID No. NRIC NO / S9823061J	Contact No. Home/Office:	Mobile: 96691751
Nationality SINGAPORE CITIZEN	Email Address aisybazli98@gmail.com	
Occupation Aircraft engine mechanic	Sex Male	Age 21
Institution/School Name	Date of Birth 21/07/1998	Race Malay
Date/Time Of Incident 23/01/2020 20:00 - 23/01/2020 20:30	Location Of Incident 2 LIANG SEAH STREET SINGAPORE 189023	

### Brief details.

On 23 Jan 20 @ around 8:15pm, I (Aisy Bazli Bin Hairulnarashid) was handling a food order (Grabfood) and returning to my Bike (Pulsar NS200 FBH3618H) that was parked near the pavement (along an alley next to 2 Liang Seah St. When I get on my bike and started my engine, suddenly I saw fire coming from the set between my legs. I immediately get off from my bike and ran for help and to avoid any injury, I then called 995 for assistance, A chinese man from a coffeeshop kitchen ran with a fire extinguisher and assist to put out the fire. After everything settled down I gave my details to SCDF as requested.

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: 24/01/2020 02:15
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



# Police Report



**SINGAPORE  
POLICE FORCE**



A/20200124/7001

2 of 2

**POLICE REPORT (NP299)**

**CONTINUATION OF REPORT**

Report No. A/20200124/7001

<b>Subjects Involved</b>			
<b>Victim</b>			
Person Name	AISY BAZLI BIN HAIRULNARASHID		
ID Type	NRIC NO	ID No	S9823061J
Gender	Male	Age	21
Race	Malay	Language	English
Occupation	Aircraft engine mechanic	Address Type	
Address	APT BLK 312 BUKIT BATOK STREET 32 #04-65 SINGAPORE 650312	Mobile No	96691751
Is Informant A Victim?	Yes		
<b>Person Name</b> AISY BAZLI BIN HAIRULNARASHID (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: 24/01/2020 02:15
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo

