

MVA320011593 / VAC - Kaki Bukit  
ENTRY DATE & TIME: 24/01/2020 15:56  
SUBMITTED BY: SITI FADHLON BTE ABDUL KADER

Your NCD will be affected due to late reporting  
Actual e-Filing Submission Date & Time: 24/01/2020 16:05

### 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 24/01/2020 15:56  
Date Of Accident 10/01/2020 15:30  
Exact Location Of Accident ALONG SELETAR EXPRESSWAY  
Country/State of Loss SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number FBN1036T  
Insured/Policyholder  
Name Of Registered Owner MOHAMMED ZAILANI BIN MOHD IDRIS  
NRIC No SXXXX721E  
Email Address NOEMAIL  
Mobile Phone No (LOCAL) +65-90686644  
Alternative Phone No OTHERS-90686644  
Vehicle Particulars  
Manufacturer YAMAHA  
Model TMAX 530 CVT ABS  
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 THIRD PARTY  
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 5113585304  
Cover Note Number  
Driver  
Name of Driver MOHAMMED ZAILANI BIN MOHD IDRIS  
NRIC No SXXXX721E  
Date Of Birth 15/08/1983  
Occupation INDOOR  
Date Of Driving Pass 15/02/2007  
Driving Experience 12 YEARS AND 10 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-90686644  
Fax Number  
Contact Number OTHERS-90686644  
Email Address NOEMAIL

Address BLK 203 #04-86 SERANGOON CENTRAL  
 Postcode 550203  
 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 SIDE SWIPE  
 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? 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) 1

**Details of Police Action**

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name SERANGOON NEIGHBOURHOOD POLICE CENTRE  
 Police Station Address ROAD: 50 SERANGOON AVE 2 #01-02, POSTCODE: 556129, COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: 1800-4880999 - FAX NO: 64883561  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

**Circumstances of Accident**

AS PER POLICE REPORT No.T/20200113/2082;

**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 GBD2428S  
 Vehicle Make/Model/Colour NISSAN / CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5  
 Details Of Properties  
 Vehicle Category COMMERCIAL VEHICLE  
 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	MOHAMMED ZAILANI BIN MOHD IDRIS
Approximate Age	36
Injuries Sustain	
Injured person in which vehicle?	FBN1036T
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	YES
Address	BLK 203 #04-86 SERANGOON CENTRAL
Postcode	550203

## Accident Sketch Plan

## SKETCH PLAN

## IMPORTANT NOTES

1. Please read carefully the details of the accident to speed up the claims process.
2. The information to be provided in this form is mandatory for the claim process.
3. Information provided must be truthful and accurate as possible. Any false or misleading claim or misstatement of facts will lead to the rejection of the claim and may result in the insurer's right to cancel the policy.
4. The claimant and the insurer shall be jointly and severally responsible for the completion of this form and the accuracy of the information provided.
5. Consent under the Personal Data Protection Act (PDPA)
6. The report will be submitted to the Insurers of the Singapore Motor Vehicle Insurance Association of Singapore (SMVIA) for their use. The details of this report will be made available upon application by the relevant parties.
7. By the signing of this report to the insurers, you hereby consent to the archiving of this report at the insurer and to its use for the report being made available to the relevant parties.

## I, the undersigned, do hereby acknowledge, agree and consent that:

- (a) my insurer, my well-thrill 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 to 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 making of correspondence, statements, affidavits, 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 agent(s) (including their lawyers/law firms), which may be filed 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 and/or (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.

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4 #02-01

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vac@idac.com.sg

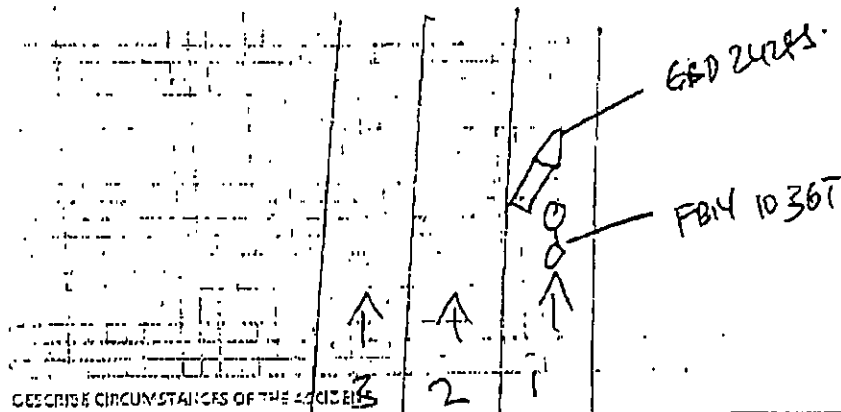
Zi  
Policyholder's Signature  
Date of This

Zi  
Insurer's Signature  
(If Insurer is not the policyholder)  
Date of This

Zi  
Representing Centre Person's Signature  
Name  
Date of This 24 JAN 2020

## Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police Report no T: 20200113/2082

## DECLARATION

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

*Zai*  
 Policyholder's Signature  
 Date & Time:

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

**IBAC VACKBROS (PAC)**  
 25 Kaki Bukit Ave 4 #02-02  
 Singapore 415935  
 Tel: 67416657 Fax: 67492305  
 Email: vackbros@vackbros.com.sg  
 Reporting Centre Police Road 2nd Floor  
 Name: \_\_\_\_\_  
 NAME/ID No. \_\_\_\_\_



# SINGAPORE POLICE FORCE



T/20200113/2082

Police Station Of Origin:  
Serangoon N.P.C  
50 Serangoon Avenue 2 #01-02 SINGAPORE  
556129  
Tel No: 1800-4880999

1 of 4

Report No. T/20200113/2082

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/01/2020 13:38		Vide Report No.:		Station Diary No.: 39	
<b>Informant's Particulars</b>					
Name of Informant: MOHAMMED ZAILANI BIN MOHD IDRIS.			Address: APT BLK 203 SERANGOON CENTRAL #04-86 SINGAPORE 550203		
ID Type / ID No.: NRIC NO / S8324721E			Contact No.: Home/Office: Mobile: 90686644		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 36	Date of Birth: 15/08/1983	Type of Informant: Rider		
Race: Malay			Language: English		Institution / School Name:
Occupation: SAFETY INSPECTOR			Driving Licence Information: Class: Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 10/01/2020 15:30	Type of Location: Straight Road
Location: Along Road 1 SELETAR EXPRESSWAY  SLE TOWARDS WOODLANDS  (AFTER WOODLANDS AVENUE 12 EXIT)				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBN1036T	Motorcycle	YAMAHA	TMAX 530 CVT ABS	Black	Seriously Damaged	0
GBC24285	Lorry		CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5		No Damage	7



# SINGAPORE POLICE FORCE



T/20200113/2082

Police Station Of Origin:

Serangoon N.P.C

50 Serangoon Avenue 2 #01-02 SINGAPORE

556129

Tel No: 1800-4880999

2 of 4

Report No. T/20200113/2082

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBN1036T	NTUC Income Insurance Co-Operative Limited	5113585304	23/10/2019	22/10/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMMED ZAILANI BIN MOHD IDRIS	ID No.	S8324721E
Related Vehicle	FBN1036T (Motorcycle)	Contact No.	90686644
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL.
Date Treatment	10/01/2020	Date Discharge	11/01/2020
No. of Days granted Medical Leave	11	Degree of Injury	Serious

**Brief Details.**

I am the rider of FBN1036T.

On 10/1/2020 at about 1500hrs, I was travelling along SLE and headed towards Bukit Panjang.

I was travelling along lane 1 of the expressway. As I had just passed the exit of Woodlands Avenue 12, I noticed a lorry travelling along lane 2.

Out of a sudden, without even signaling, the lorry (GBD 2428 S) abruptly changed into my lane.

As it was a sudden change, I was unable to react and brake in time. As a result, I collided onto the rear of the lorry. I decided to jump off my bike and landed on my right shoulder.

The taxi who was travelling behind me managed to perform an emergency brake to prevent himself from colliding into me. However, the few vehicles behind the taxi could not stop in time and ended up rear ending the taxi.

The lorry driver immediately stopped his vehicle but did not render any assistance to me. Luckily, the taxi driver and other few motorists came forward to assist me. The taxi driver phoned for Ambulance.

I was subsequently conveyed to KTPH and was warded for the night. I was later discharged on 11/01/2020 and given 11 days of MC. The doctor diagnosed that I had several injuries. They included a dislocated right shoulder, right knee and leg abrasions and also severe abrasions on my back.

I wish to state that the taxi driver is willing to be a witness to the event and we have since exchanged particulars.

I am lodging this report as requested by the TP Officer.



**SINGAPORE  
POLICE FORCE**



T/20200113/2082

Police-Station Of Origin:

Serangoon N.P.C

50 Serangoon Avenue 2 #01-02 SINGAPORE

556129

Tel No: 1800-4880999

3 of 4

Report No. T/20200113/2082

CONTINUATION OF REPORT



**SINGAPORE  
POLICE FORCE**

T/20200113/2082

Police Station Of Origin:  
Serangoon N.P.C  
50 Serangoon Avenue Z #01-02 SINGAPORE  
556129  
Tel No: 1800-4880999

CONTINUATION OF REPORT

4 of 4

Report No. T/20200113/2082

**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: F / Sgt 2 MUHAMMAD SAIFUDDIN BIN HAMDAN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 13/01/2020 13:38
Officer In Charge Of Case: TP / GIT / Sgt 3 MUHAMMAD AFIQ BIN JOHAR Contact No.: 93840429	Classification Of Case:  SN 154
Authentication Stamp NP168	Signature:  Singapore Police Force