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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	27/02/2020 15:47
Date Of Accident	23/02/2020 19:50
Exact Location Of Accident	AYE TWDS NORTH BUONA VISTA RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBL9089Z
Insured/Policyholder	
Name Of Registered Owner	SULTHANUL ARIB S/O HAJANAJUBUDEEN
NRIC No	SXXXX861J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91079546
Alternative Phone No	OFFICE-91079546
Vehicle Particulars	
Manufacturer	BAJAJ
Model	PULSAR RS 200
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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/19-500508-WTT
Cover Note Number	
Driver	
Name of Driver	SULTHANUL ARIB S/O HAJANAJUBUDEEN

NRIC No SXXXX861J
Date Of Birth 23/02/1980
Occupation INDOOR
Date Of Driving Pass 18/08/2015

Driving Experience 4 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91079546

Fax Number

Contact Number OFFICE-91079546

EMail Address NOEMAIL

BLK 535 CHOA CHU KANG STREET 51 Address

#14-106

Postcode 680535

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

SIDE SWIPE Type Of Accident Weather Conditions **CLEAR** DRY

Road Surface

Other Information

ambulance?

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

NO

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

YES

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

YES

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

Police Station Address **SINGAPORE**

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT - T/20200227/7018.

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 SMP8225C

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 23

Postcode

Name SULTHANUL ARIB S/O HAJANAJUBUDEEN Approximate Age Injuries Sustain BODY Injured person in which vehicle? FBL9089Z Were seat belts worn? Was this injured conveyed to hospital by ambulance? Address

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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 interested parties.
- 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 aforesald.
 - 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 (all 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")
- 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:
 - 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.

Sessible Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

segforhe.

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No :

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Accident Sketch Plan

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

1 of 4 Report No. T/20200227/7018

REPORT OF A TRAFFIC ACCIDENT

	ne Report M 120 14:02	fade:	Vide Report No.:	Station Diary No.:				
Informa	nt's Partic	ulars	THE RESIDENCE OF THE PERSON NAMED IN	STATE OF THE PARTY OF				
Name of Informant: SULTHANUL ARIB S/O HAJANAJUBUDEEN ID Type / ID No.: NRIC NO / S8070861J			Address: APT BLK 535 CHOA CHU KANG STREET 51 #14-106 SINGAPORE 680535 Contact No.: Home/Office: Mobile: 91079546					
Nationality: SINGAPORE CITIZEN			Email: aribandarib@gmail.com					
Sex: Age: Date of Birth: Male 40 23/02/1980			Type of Informant: Rider					
Race: Indian			Language: English	Institution / School Name:				
Occupation: SECURITY			Driving Licence Information: Class:	Date of Expiry:				

Type of Accident:	Injury Attended by Police	Drink Date/Time of Accident:		Type of Location Bend
Weather:	NA VISTA ROAD	Road Surface:		Road Speed Limit:
Clear		Dry		T
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light

Details of Vehicle Involved								
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger		
FBL9089Z	Motorcycle	BAJAJ CHETAK	PULSAR RS 200	Blue	Slightly Damaged	0		
SMP8225C	Car	TOYOTA	COROLLA			1		

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			
FBL9089Z	MSIG INSURANCE (SINGAPORE) PTE, LTD.	60854660	28/04/2019	27/04/2020			



T/20200227/7018

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20200227/7018

CONTINUATION OF REPORT

Details of Perso	n Involved		1 2 CO THE 18		CERTIFICATION OF THE PERSON OF	STATE OF THE PARTY
Any Pedestrian In	nvolved: No					
No. of Pedestrian	s Injured: NIL		Use of I	Pedestrian	Cross	ing: NA
Rider	A STATE OF THE PARTY OF THE PAR	OF THE P		The Late of the late of	CONTRACT OF	
Name	SULTHANUL ARIB HAJANAJUBUDEEI	ID No	-	S8070861J		
Related Vehicle	FBL9089Z (Motorcy		Conta	91079546		
Hospital/Clinic	FRONTIER MEDICA	CIATES	Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date Treatment	24/02/2020		Date D	ischarge	24/02	2/2020
No. of Days gran	02	Degree	of Injury	Sligh	t .	

Brief Details.

On the stated time and date,

I was riding my motorcycle (Veh A: FBL9089Z) on North Buona Vista Road as I just exited from AYE. I was riding on lane 2 and there was a car (Veh B: SMP8225G) on lane 1. While we are turning the bend, Veh B cut onto my lane abruptly(from lane 1 to lane 2) and collided onto the right portion of my bike causing me to skid, thus throwing me off my bike. Veh B driver stopped a distance ahead but did not alight the car until a pass-by car told him to do so. He came towards me and asked if I am alright and apologized for colliding onto me. He helped me to shift my motorbike as it was blocking the traffic. As i was injured, I called for 999 for the police who arranged for the TP and ambulance. Veh B driver then asked me if we could settle privately as he is a young driver and did not wish to affect his insurance premium next year. Out of kindness, I agreed, bear the pain and refused to be conveyed to hospital by the ambulance as I do not want trouble for Veh B driver. I went home instead of going to work as the pain was bad.

The next day 24/02/2020, we agreed to meet at his preferred workshop. The workshop guy suggested it was better to go by insurance claims as my motorbike was badly damaged and I was injured. However, Veh B driver insisted on private settlement. His attitude was bad, arrogant and unapologetic unlike yesterday. Nevertheless, I still agreed that I am willing to settle privately with all my motorcycle damaged due to the accident rectified, \$80 for my damaged helmet and \$120 for my lost of income yesterday. Veh B driver agreed with my terms and said his father will lialse with me.

The following day 25/02/2020, Veh B driver's father called me and requested me to meet at another workshop. I was few minutes late and he said that I was wasting his time. He attitude was also very bad and arrogant, He brought a cheap \$30 Helmet for me and told me to put my bike for repair and wait for his call to collect my motorcycle.

He called me on 26/02/2020 and said that we will meet on 27/02/2020 for my motorbike collection.

On the 27/02/2020 I went down to the workshop expecting to collect my motorcycle in full repair condition. However, I was shocked to realized that my exhaust pipe and right foot brake was not repaired at all. Thus, I reminded Veh B's father on the initial agreement for private settlement. Veh B's father then said that I should not be fussy as he is already willing to pay for most of the damages and I should accept the motorcycle back. He also refused to pay me the \$120 as agreed and an additional \$96 for my medical fees. He challenged me saying that there are no such law that he should pay all these compensation. I did not know what to do, took my motorbike and left the workshop.



T/20200227/7018

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20200227/7018

CONTINUATION OF REPORT

I felt cheated as he did not keep to his words. I was already being lenient to agree on the private settlement.

I consulted my workshop and they advised me that I am not able to do a counter claim for my motorbike anymore as it was not taken for insurance survey before the bike is repaired. Thus, now I am stuck with a damaged exhaust pipe and right foot brake. However, as the driver is not willing to compensate me for my medical and lost of income, I will be submitting an injury claim towards him.





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

4 of 4 Report No. T/20200227/7018

CONTINUATION OF REPORT

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NP168

Informant is not able to provide sketch plan

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: 27/02/2020 14:02
Officer In Charge Of Case: TP / TPIB / THABAGESH JEYATHESH Contact No.: 65476232	Classification Of Case:
Authentication Stamp	



























