

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	10/03/2020 16:39
Date Of Accident	04/03/2020 07:55
Exact Location Of Accident	ALONG PRINCE OF WALES ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBB7838U
Insured/Policyholder	
Name Of Registered Owner	MOHMED BIN AHMAT
NRIC No	SXXXX848A
Email Address	THISISNOTSYNTHX@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82319916
Alternative Phone No	OTHERS-82319916

Vehicle Particulars

Manufacturer	HONDA
Model	CBF150-149CC (M)
Exact Purpose for which vehicle was being used at time of accident	SENDING WIFE TO WORK
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
Fleet Policy	NO
Policy Number	5111130418
Cover Note Number	

Driver

Name of Driver	MOHMED BIN AHMAT
NRIC No	SXXXX848A
Date Of Birth	06/12/1946
Occupation	INDOOR
Date Of Driving Pass	01/10/1981
Driving Experience	38 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82319916
Fax Number	
Contact Number	OTHERS-82319916
Email Address	THISISNOTSYNTHX@GMAIL.COM

Address	BLK 86 COMMONWEALTH CLOSE #02-49
Postcode	140086
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) 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)	2
Passenger 1	NAME: : NADIAH BINTE ABDULLAH (WIFE) GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHANGKAT NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 109 TAMPINES STREET 11 #01-261 , POSTCODE: 521109 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7819999 - FAX NO: 67832722
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20200308/2045

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	SLT2125M
Vehicle Make/Model/Colour	TOYOTA VELLFIRE
Details Of Properties	
Vehicle Category	PRIVATE CAR
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 MOHMED BIN AHMAT
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? FBB7838U
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

DETAILS OF INJURED PERSON 2

Name NADIAH BINTE ABDULLAH
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? FBB7838U
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

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: 10 March 2020
14 25

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


Reporting Centre Personnel's Signature
Name: Rosli Hassan
NRIC/FIN No.:

SKETCH PLAN

AS PER ATTACH

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT. 7/2020 0308/2045

DECLARATION

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

Policyholder's Signature

Date & Time: 10 March 2020

1425

Driver's Signature

(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Pratt:

NRIC/FIN No.:

Accident Sketch Plan



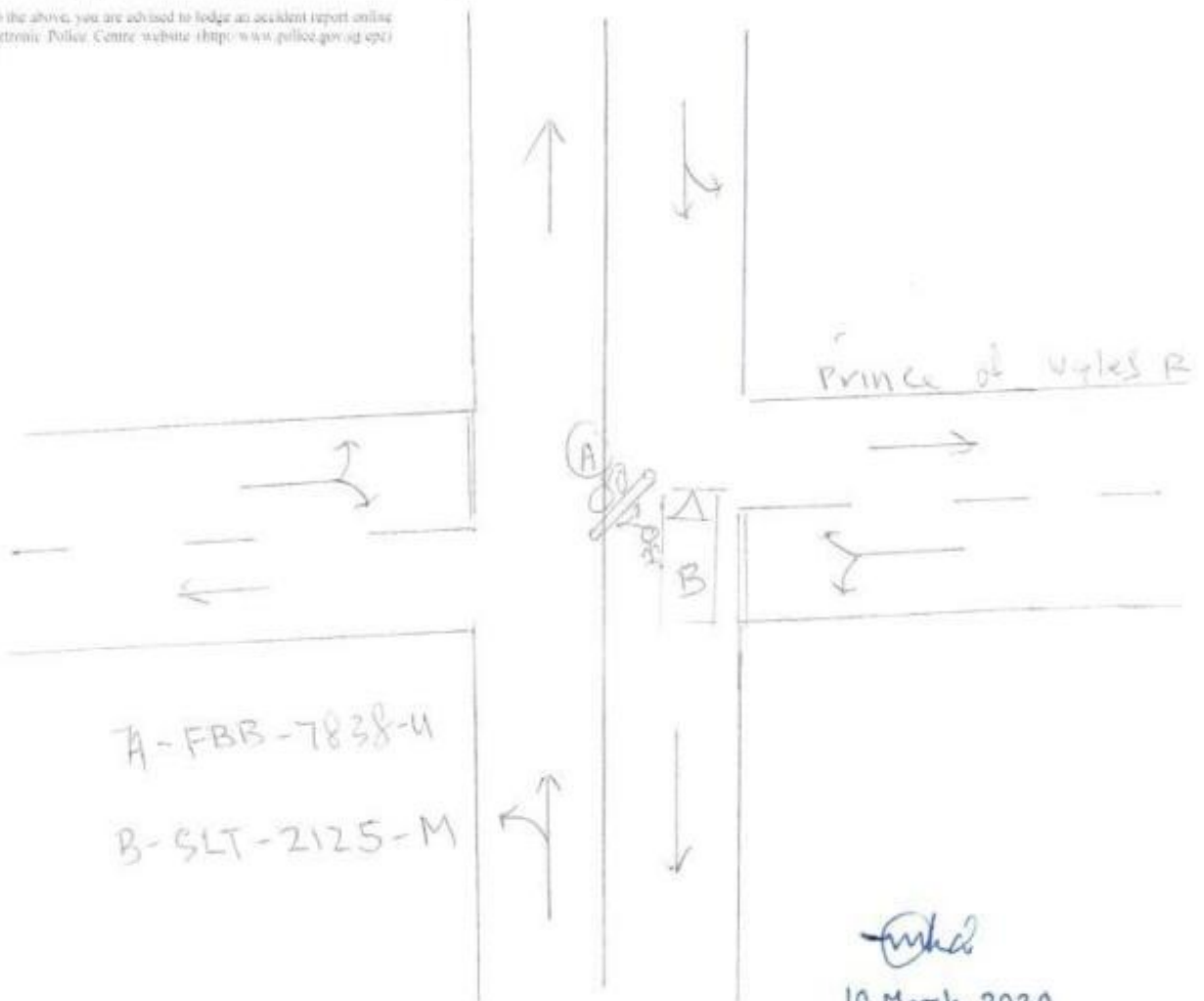
TRAFFIC POLICE
10 UBI AVENUE 3
SINGAPORE 408865
Fax: 65474749

CASE CARD

REPORT NO: E/200304/0051
Traffic Accident along Prince of Wales Rd
involving vehicles: car & bike
on 04/03/2020 at about _____ am/pm

With reference to the above, you are advised to lodge an accident report online via the SPT Electronic Police Centre website (<http://www.police.gov.sg/epc>) within 24 hours.

Prince of Wales Rd



ALX BUSINESS ADVISORY SERVICES

ALEX TAN

Director

Reg No: 53205815A

(Tampines)

Intermediary Business
3rd Party Claim
Vehicle and Personal Injury

中介公司交易业务
第三者索赔
专业车辆及相关损伤索赔

14 Robinson Road, #08-01A,
Far East Finance Building,
Singapore 048445

Mobile: (65) 8422 3232
(65) 9105 1573

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200308/2045

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999

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Report No. T/20200308/2045

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/03/2020 13:12		Vide Report No.: E/20200304/0051		Station Diary No.: 10	
Informant's Particulars					
Name of Informant: MOHAMMED BIN AHMAT			Address: APT BLK 86 COMMONWEALTH CLOSE #02-49 SINGAPORE 140086		
ID Type / ID No.: NRIC NO / S0538848A			Contact No.: Home/Office: Mobile: 82319916		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 73	Date of Birth: 06/12/1946	Type of Informant: Rider		
Race: Boyanese			Language: English		Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: 2B		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/03/2020 07:55	Type of Location: X-Junction
Location: Along Road 1 PRINCESS OF WALES ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBB7838U	Motorcycle	HONDA	CBF150	Black	Slightly Damaged	1
SLT2125M	Car	TOYOTA	Vellfire	Black		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBB7838U	NTUC Income Insurance Co-Operative Limited	5111130418	19/07/2019	18/07/2020

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200308/2045

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999

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Report No. T/20200308/2045

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMMED BIN AHMAT	ID No.	S0538848A
Related Vehicle	FBB7838U (Motorcycle)	Contact No.	82319916
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	04/03/2020	Date Discharge	07/03/2020
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Pillion			
Name	NADIAH BTE ABDULLAH	ID No.	S7179098C
Related Vehicle	FBB7838U (Motorcycle)	Contact No.	91645104
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	04/03/2020	Date Discharge	04/03/2020
No. of Days granted Medical Leave	14	Degree of Injury	Slight

Brief Details.

On 4/3/2020 at about 0755hrs, I was riding along Princess of Wales Rd, with my wife as pillion. As I approached the cross junction, I signaled right to show my intention to turn right into Prince of Wales Rd. There was no traffic hence I made the right turn into Prince of Wales Rd. At this juncture, as my motorcycle was making about the right turn halfway, there was a bang at the rear of my motorcycle. Me and my wife both fell to our right side on the road with my motorcycle. The vehicle which collided onto my motorcycle then swerved to the right side of my motorcycle. The vehicle then reversed about 1 meter. Both of us then knocked on the side of the car and shouted to stop the driver from reversing into us. I then called for the police. My wife then get up and took photos of the accident scene. My right leg was stuck under the bike. The ambulance then arrived shortly and conveyed both me and my wife to the National University Hospital. The traffic police assisted me to get up from my bike. There were no eye witnesses when the accident happened. I was given 5 days MC as I sustained fractures on my right ribs, pain on my shoulder, lower back and neck. My wife was given 14 days MC as she sustained fracture on the middle toe of the right leg, pain from the neck all the way down to the right side of her body. The driver claimed he got a in-car camera in his vehicle.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20200308/2045

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999

3 of 3

Report No. T/20200308/2045

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:

G /
Sgt 3 LIM JUN AN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
08/03/2020 13:12

Officer In Charge Of Case:
TP / GIT /
Staff Sgt MUHAMMAD TAUFIQ BIN MOHAMED
Contact No: 92977771

Classification Of Case:

Authentication Stamp
NP168

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



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