

NATIONAL Assessment Centre Services

[wef 1 Jan'05]

MNAIR 004187

Date In: 7/4/05-18:55	Job description	Date & Time Completed	Done by
Ref No: 1A/mj22050874	SAS e-filing		
Veh No: 5JK7858E	E-mail (within 5hrs, AIC 2hrs)		
D.O.A: 6/4/05-16:45	i-Motor Claim Form		
OD: TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

FX 87457

INC (

) / Non-INC (

)

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:

(INC hotline: 6788 6616)

Date & Time Completed

Done by

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time

Actions

Invoice Preparation Checklist

Amt (\$)

In Bill

Amt (\$)

Add Bill

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Pat. 1:

Pat. 2 / 3:

- 1) AR: Accident Reporting (\$30);
- 2) DA: Damage Assessment (\$100); INC (\$80)
- 3) TF: Towing Fee \$40/\$45
- 4) FT: Follow-Through Survey \$120
- 5) FT: Follow-Through Survey (Resurvey) \$30
- For claiming against INC Only (wef 10 Jan 2005)
- 6) TR: Re-inspection \$75
- 7) N1: Idac DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- ON*
- *N5: Courtesy Car / Tpt Allowance \$5
- *N6: Repair Co-ordination \$10
- *N7: Post Repair Inspection \$25
- *N8: DV / Collect Excess Coordination \$5
- TP (N11): TP (Non INC) against INC \$20
- 9) N12: Idac Mobile \$0

Invoice dated

Fee Charged

Invoice dated

Fee Charged

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	07/04/2020 18:55
Date Of Accident	06/04/2020 16:45
Exact Location Of Accident	YISHUN AVE 1 TWDS SELETAR WEST LINK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJK7658E
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD FIRDAUS BIN RAZAK
NRIC No	SXXXX067I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91461884
Alternative Phone No	OFFICE-91461884

Vehicle Particulars

Manufacturer	HONDA
Model	HONDA CIVIC 1.8L 5AT
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	19-MT109366-R01
Cover Note Number	

Driver

Name of Driver	MUHAMMAD FIRDAUS BIN RAZAK
NRIC No	SXXXX067I
Date Of Birth	18/08/1987
Occupation	INDOOR
Date Of Driving Pass	12/05/2008
Driving Experience	11 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91461884
Fax Number	
Contact Number	OFFICE-91461884
Email Address	NOEMAIL

Address	BLK 548B SEGAR ROAD #13-672
Postcode	672548
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?	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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 42 FAJAR ROAD , POSTCODE: 679005 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8929999 - FAX NO: 67673650
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200407/2075.

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	FX8745J
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	91827062
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)


SKETCH PLAN


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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. The 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 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 aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

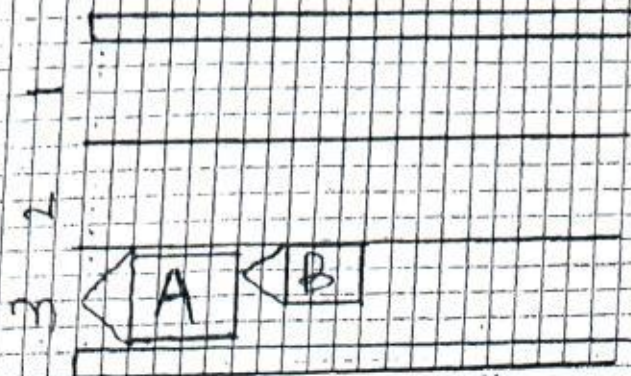
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my Insurer (collectively the "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.:

A - SJK7658E
B - FX8745J





DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


6 APR 2020 @ 4:40pm. I was travelling along
Yishun Ave 1 towards Seletar West Link (SJK7658E)
I have on my hazard light and was cut from
my vehicle. Suddenly a bike (FX8745J) hit onto
my rear.

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 & Time:


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

Date of Accident : 6 Apr 2020 Accident Time: 4:45pm (24-HR-Format)
Accident Place : Yishun Ave 1 toward Seletar west Link
Vehicle Reg. No. (Car Plate No.) : SSK 7658E
Vehicle Make/Model : Honda Civic
Insurance Company : NTUC Policy No. _____
Owner or Company Name / IC No. : Muhammad Firdaus Bin Razak.
Owner or Company Contact No. : 91461884 Owner's Hp _____ Company Tel _____
DRIVER'S Name / IC No. : Muhammad Firdaus Bin Razak.
DRIVER'S Date Of Birth : 18 Aug 1987 DRIVER'S License Pass Date 04 Jun 2009
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
DRIVER'S Address : Blk 548B Segar road # 13-672
DRIVER'S Contact No. / Alt No. : 1) 91461884 2) _____
DRIVER'S Occupation : INDOOR OUTDOOR (e.g. working inside or outside office)
Email Address : _____
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only Claim Other Party Claim Own Insurance
Number of Passengers (Including Driver): 0
Was there any video Captured by car camera: YES NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particular (if any)

Vehicle Reg. No: FX 8745 J
Vehicle Make/Model: honda
Name Driver: _____
IC No. Driver: 97
Driver's Contact & Add: 91827062

Vehicle Reg. No: _____
Vehicle Make/Model: _____
Name Driver: _____
IC No. Driver: _____
Driver's Contact & Add: _____



SINGAPORE POLICE FORCE



T/20200407/2075

1 of 3

Report No. T/20200407/2075

Police Station Of Origin:

Bukit Panjang N.P.C

1 Segar Road #01-05 SINGAPORE 677738

Tel No: 1800-8929999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/04/2020 16:54	Vide Report No.: L/20200406/0136	Station Diary No.: 136
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Informant's Particulars

Name of Informant: MUHAMMAD FIRDAUS BIN RAZAK			Address: APT BLK 548B SEGAR ROAD #13-672 SINGAPORE 672548		
ID Type / ID No.: NRIC NO / S87250671			Contact No.: Home/Office: Mobile: 91461884		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 32	Date of Birth: 18/08/1987	Type of Informant: Driver		
Race: Boyanese			Language:		Institution / School Name:
Occupation: Self Employed			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 06/04/2020 16:50	Type of Location: Straight Road
Location: Along Road 1 YISHUN AVENUE 1 Towards Seletar Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Light	
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
FX8745J	Motorcycle				Slightly Damaged	0
SJK7858E	Car	HONDA	HONDA CIVIC 1.8L 5AT	White	Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJK7858E	TOKIO MARINE INSURANCE SINGAPORE LTD.			



SINGAPORE POLICE FORCE

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

CONTINUATION OF REPORT

T/20200407
2 of 3
Report No: T/20200407/2075

Details of Person Involved

Any Pedestrian Involved: No

Use of Pedestrian Crossing: NA

No. of Pedestrians Injured: NIL

Name	Unknown	ID No.	NIL
Related Vehicle	FX8745J (Motorcycle)	Contact No.	91827062
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	MUHAMMAD FIRDAUS BIN RAZAK	ID No.	S87250671
Related Vehicle	SJK7658E (Car)	Contact No.	91461884
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 6th April 2020 at about 1650hrs, I was driving my car bearing Registration Number: SJK658E along Yishun Avenue 1 towards Seletar Road. I had then stopped my car at a single yellow line with my hazard line on. I alighted from my car and I had walked backward to meet a friend to pass some items to him.

Out of sudden, I heard a loud bang. I looked towards my car and I discovered a motorcycle bearing Registration Number FX8745J had collided to my car rear bonnet which was stationary. I then walk to my car to make a check and I discovered the rider of the motorcycle had fall to the front of my car. I had made a check on the rider and he is still conscious and responding. Passerby had assisted to call for the ambulance and the rider was conveyed to the hospital. I then called for police assistance.

My car rear bonnet was damage badly and the car exhaust had came off. There are also visible scratch on the rear right side of the car. There is also a dent on the front top bonnet as the rider had fall on it. I am not sure of the cost of the damage. There is no build-in-car camera installed in my car.



**SINGAPORE
POLICE FORCE**



T/20200407/2075

Police Station Of Origin:

Kit Panjang N.P.C

Segar Road #01-05 SINGAPORE 677738

Phone No: 1800-8929999

3 of 3

Report No. T/20200407/2075

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:

J/

ASP MUHAMED ZAID BIN AZIZ

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

TP / GIT /

SI VILTON HIA WEE SIANG

Contact No.: 65476178

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:
07/04/2020 16:54

Classification Of Case:



Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: 19-MT109366-R01 (Private Motor Car)

- 1. Index Mark and Registration Number of Vehicle** SJK7658E **Chassis No.:** JHMFD16309S200441
- 2. Name of Policyholder** MUHAMMAD FIRDAUS BIN RAZAK
- 3. Effective date of the Commencement of Insurance for the purposes of the Act** 01/11/2019
- 4. Date of Expiry of Insurance** 31/10/2020
- 5. Persons or Class of Persons entitled to drive***
 - (a) The Policyholder.
 - (b) Any other person who is driving on the Policyholder's order or with his permission.

* Provided that the Person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 2538DDA

Insurance Plan: Third Party, Fire & Theft
Limit for total loss or theft: Prevailing Market Value
Financial Interest: HONG LEONG FINANCE LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature