

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	30/03/2020 17:26
Date Of Accident	28/03/2020 19:10
Exact Location Of Accident	ALONG LOMPANG RD TWDS BUKIT PANJANG RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBM6014D
Insured/Policyholder	
Name Of Registered Owner	NUR AZMIL BIN SAMAD
NRIC No	S8939498H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82204396
Alternative Phone No	OFFICE-82204396

Vehicle Particulars

Manufacturer	YAMAHA
Model	FZ150T
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	P2317213
Cover Note Number	

Driver

Name of Driver	NUR AZMIL BIN SAMAD
NRIC No	S8939498H
Date Of Birth	26/10/1989
Occupation	INDOOR
Date Of Driving Pass	04/09/2010
Driving Experience	9 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82204396
Fax Number	
Contact Number	OFFICE-82204396
E-Mail Address	NOEMAIL

Address	BLK 817C KEAT HONG LINK #02-117
Postcode	683817
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?	NO
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	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: T/20200330/7011.

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	SBB110G
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	HAROLD
NRIC/Passport Number	
Contact Number	92977867
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name NUR AZMIL BIN SAMAD

Approximate Age

Injuries Sustain

Injured person in which vehicle? FBM6014D

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

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.

X

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.:



**SINGAPORE
POLICE FORCE**



T/20200330/7011

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

1 of 3

Report No. T/20200330/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/03/2020 13:07		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: NUR AZMIL BIN SAMAD			Address: APT BLK 817C KEAT HONG LINK #02-117 SINGAPORE 683817		
ID Type / ID No.: NRIC NO / S8939498H			Contact No.:		Mobile: 82204396
Nationality: SINGAPORE CITIZEN			Email: NUR_AZMIL@HOTMAIL.COM		
Sex: Male	Age: 30	Date of Birth: 26/10/1989	Type of Informant: Rider		
Race: Malay		Language: English		Institution / School Name:	
Occupation: Safety coordinator		Driving Licence Information: Class: 2B,3		Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/03/2020 19:10	Type of Location: T-Junction
Location: LOMPANG ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBM6014D	Motorcycle	YAMAHA	FZ150I	Red	Slightly Damaged	0
SBB110G	Car	MAZDA	3	Red	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBM6014D	AXA INSURANCE SINGAPORE PTE LTD	AN3176517	22/07/2019	21/07/2020

Sketch Plan #4



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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	NUR AZMIL BIN SAMAD	ID No.	S8939498H
Related Vehicle	FBM6014D (Motorcycle)	Contact No.	82204396
Hospital/Clinic	ONECARE CLINIC BOON LAY	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	28/03/2020	Date Discharge	28/03/2020
No. of Days granted Medical Leave	03	Degree of Injury	Serious
Driver			
Name	HAROLD	ID No.	S9122306F
Related Vehicle	SBB110G (Car)	Contact No.	92977867
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

Brief Details.

On above date & time, I was riding my vehicle A (FBM 6014 D) traveling along Lompang Road twds Bukit Panjang Road on single lane, road. Somewhere at the car park entrance of Bukit Panjang Plaza, vehicle B (SBB 110 G) failed to stop before the stop line and drove out the vehicle. As a result, the right portion of vehicle B collided onto the front portion of my vehicle.



**SINGAPORE
POLICE FORCE**



T/20200330/7011

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

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Report No. T/20200330/7011

CONTINUATION OF REPORT

Sketch Plan

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:
30/03/2020 13:07

Officer In Charge Of Case:
TP / TPHQ /
MOHAMED HUSNUL TAUFIQ BIN MD YUSOF
Contact No.: 65476358

Classification Of Case:

Authentication Stamp

NP168

Sketch Plan #6

LETTER OF UNDERTAKING

I/We, Nur_Azmil Bin Samad, the owner of vehicle no. FBM 6014D

My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop, Moto 51

Signed and Acknowledge by:



.....
Nric no. and signature of policyholder

.....
Company Stamp

30/3/20
.....
Date

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8939498H



Name
NUR AZMIL BIN SAMAD
تور عذيميل بن صمد
Race
MALAY
Date of birth
26-10-1989
Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Identity Card No. S8939498H

NUR AZMIL BIN SAMAD

Birth Date: 26 Oct 1989
Issue Date: 10 Jan 2020

003016456C

For Moto 51
Accident Claim Use Only

Usage for Insurance Motor Accident Reporting
and Claims Purposes Only

Vehicle no: FEM 804D
Date of Accident: 28/03/20

3639316



NRIC No. S8939498H

Date of issue
19-11-2004

APT BLK 817C KEAT HONG LINK #02-117
SINGAPORE 683817
NRIC No: S8939498H Date: 27/12/2016

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	EFFECTIVE DATE
Class 2B	Motorcycles <= 200 cc	04 Sep 2010
Class 3	Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	21 May 2016

For Moto 51 Pte Ltd
Accident Claim Use Only

NP 428A



Licence No: S8939498H

AXA INSURANCE PTE LTD
Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Centre #01-21
Tel: 1800 8804888 Fax:
Sales@axa.com.sg
IT Registration Number: 199903512M
Customer.care@axa.com.sg



CHEB5
FBM 60140
21
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)

CERTIFICATE NO. : VMO/P2317213 Account No. : 03375
Coverage : Third Party Only
Sum Insured : NIL
Name of Policy Holder : NUR AZMIL BIN SAMAD
Vehicle Registration No. : FBM6014D
Period of Insurance : From 22/07/2019 To 21/07/2020 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

- (a) The Policyholder
(b) 1. NUR AZMIL BIN SAMAD
2. NUR AZMAN BIN SAMAD

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.

LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and in connection with the Policyholder's business or profession

The Policy does not cover:

- a) Use for hire and reward
b) Use for racing, pace-making, reliability trial or speed-testing
c) Use for the carriage of goods (other than samples) in connection with any trade or business
d) Use for any purpose in connection with the Motor Trade

(11)

* 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.

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

with effect from 23/10/19, extend coverage to include food delivery.

Geographical Area - restricted to Singapore only.

All claims excess - 300

Issued by - SGRAN04 on 06/08/2019



AXA INSURANCE PTE LTD

Authorized Signature

IMPORTANT :
Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Chapter 189)).

The Premium Warranty Clause requires the premium to be paid in full within a specific period of time following which there would be no liability under the policy, renewal certificate, cover note or endorsement etc.

Accident Photo



Accident Photo



Accident Photo



Accident Photo

