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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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.
- Information provided must be as truthful and accurate 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.

Any false reporting may be referred to the Police for investigation.

- 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.
- 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.

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Date Of Report 29/06/2020 16:41

Date Of Accident 28/06/2020 13:00

Exact Location Of Accident ALONG GHIM MOH ROAD

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBD6863S

Insured/Policyholder

Name Of Registered Owner MUHAMMAD RIFQIE BIN ABDULLAH

NRIC No TXXXX694I

 Email Address
 MDRIFQIE@GMAIL.COM

 Mobile Phone No
 (LOCAL) +65-96566126

 Alternative Phone No
 OFFICE-96566126

Vehicle Particulars

Manufacturer HONDA

Model PHANTOM 200M-197CC (M)

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 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 5115430893

Cover Note Number

Driver

Name of Driver MUHAMMAD RIFQIE BIN ABDULLAH

 NRIC No
 TXXXX694I

 Date Of Birth
 11/11/2001

 Occupation
 INDOOR

 Date Of Driving Pass
 07/01/2020

Driving Experience 0 YEAR AND 5 MONTH

Gender MALE

Mobile Number (LOCAL) +65-96566126

Fax Number

Contact Number OFFICE-96566126

EMail Address MDRIFQIE@GMAIL.COM

BLK 167 STIRLING ROAD Address

#01-1211

140167 Postcode

Was driver an employee of the Insured's Company NO

OWNER If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD ON COLLISION Type Of Accident

RAINING Weather Conditions WET Road Surface

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

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY Police Station Name

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: Police Station Address

SINGAPORE

TEL NO: 65470000 - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

If Yes against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20200629/7004 (TYPE OF COLLISION IS HEAD TO SIDE)

Attachment(s)

Are accident photos available for attachment? YES NO Was there any video captured by Car Camera? NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SMS4158Z Vehicle Registration Number HYUNDAI Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category ALFINO HO Name of Driver

NRIC/Passport Number

91008049 Contact Number

Address Postcode

Insurance Company Name

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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.
- 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
- 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

Driver's Signature

(If driver is not the policyholder)

Name: Date & Time:

		MARON	WHU!	
18	PER	Whiteo.		
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ES	CRIBE CIRCUMS	TANCES	OF THE ACCID	ENT		1	
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DECLARATION

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

Policyholder's Signature

Date & Time: 29 June 2020

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Per

Name:

NRIC/FIN No.

B) 5ms 41582. 24/06/3020 Cost Lundon Other mot ROAD GHIM MOIL GROUPS

ACCIDENT STATEMENT

ACCIDENT DATE: 20 100 MM/YYYY), TIME: (13 :00)(HH:N	n n
Moule Oltra Anth Con	1001
LOCATION: ALONG RHIM MOH BOAD.	
1. DETAILS OF VEHICLE ZO A / PL D D	
alvehicle Number: The 6863 S-	
DINSURANCE COMPANY: NUC	
OJPOLICY NUMBER:	
	13.07
DIPOLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEF	4)
STYPE-(SALOON / COURT (MEN AVAILABLE)	
FITYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE, / OTHERS)	
9) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)	31
h) PURPOSE OF USING AT ACCIDENT TIME:	5.7
I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)	
IF NO. PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)	
AINAME: IMILITEMMA AO	
c)ADDRESS:CONTACT:	-
	+
* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER	-
the of passanals, OKIVER	
Cheledon de a Comane	
CONTACT:	
c)ADDRESS:CONTACT:	
EURO CONTROL OF THE C	
*d)DATE OF BIRTH; (/	
e)OCCUPATION: (INDOOR / OUTDOOR)	
FIDERIC OF DRIVING PASS	
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)	
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: 5. GIWEATHER CONDITION: (CLEAR / RAINING / OTHERS	10
b)ROAD SURFACE: (DRY / WET / OTHERS	_
6. WAS ANYBODY INJURED (YES / NO)	_
7. a) REPORTED TO POLICE (YES / NO)	
IF YES, PLEASE STATE WHICH POLICE STATION:	+31
PID OF PASSINGSY (2) VEHICLE NUMBER.	
Including driver) b) DRIVER'S NAME:	
Induding chiver) b) DRIVER'S NAME: MODEL: () C) NRIC/FIN/PASSPORT: CONTACT:	5
7. PARTY VEHICLE	
No of passanger d) VEHICLE NUMBER: MODEL:	90
No of passanger of VEHICLE NUMBER:MODEL: Including deliver DRIVER'S NAME: INCLUDING DRIVER'S NAME:	e H
NRIC/FIN/PASSPORT: CONTACT:	
	040

email = mdriffic@gmail.com VIDEO





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

1 of 4 Report No. T/20200629/7004

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/06/2020 08:37			Vide Report No.: D/20200628/0098	Station Diary No.:			
Informa	nt's Partic	ulars					
	Informant: MAD RIFQ AH		Address: APT BLK 167 STIRLING ROAD #01-1211 SINGAPORE 140167				
ID Type / ID No.: NRIC NO / T0137694I			Contact No.: Home/Office:	Mobile: 96566126			
Nationality: SINGAPORE CITIZEN			Email: MDRIFQIE@GMAIL.COM				
Sex: Age: Date of Birth: Male 18 11/11/2001			Type of Informant: Rider				
Race: Indonesian			Language: English	Institution / School Name:			
Occupation: Student			Driving Licence Information: Class: 2B Date of Expiry:				

General Infor	mation of the Accident				
Type of Accident:	Injury Attended by Police	Drink Date/Time of Accident: No 28/06/2020 13:00		Type of Location Straight Road	
Location: GHIM MOH F	ROAD				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit: 60 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Light	
Type of Collis Between Mov	sion: ring Vehicles - Head To S	ide		Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved								
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger		
FBD6863S	Motorcycle	HONDA	PHANTOM+ 200+M	Black		0		
SMS4158Z	Car	HYUNDAI	Accent	Red		1		

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
FBD6863S	NTUC Income Insurance Co-Operative Limited	5115430893	07/01/2020	06/01/2021		





Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

2 of 4

Report No. T/20200629/7004

CONTINUATION OF REPORT

Any Pedestrian II	nvolved: No					
No. of Pedestriar	CLASSIC CONTROL CLASSICS		Use of F	edestriar	Cross	ina: NA
Rider		MITTER				
Name	MUHAMMAD RIFQI	E BIN ABI	DULLAH	ID No		T0137694I
Related Vehicle	FBD6863S (Motorcy	rcle)		Conta	ct No.	96566126
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL			Class Drivin Licend Expiry	g ce &	Class: 2B Date of Expiry: NIL
Date Treatment	28/06/2020		Date Di	scharge	28/06	/2020
No. of Days gran	ted Medical Leave	04	Degree	of Injury	Slight	
Driver						
Name	ALFINO HO			ID No		NIL
Related Vehicle	SMS4158Z (Car)			Conta	ct No.	91008049
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class; NIL Date of Expiry; NIL
Date Treatment	NIL		Date Di	scharge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree	of Injury	NIL	

Brief Details.

On 28 June 2020 at about 1.00pm, I was on the right lane travelling straight along Ghim Moh Road from Commonwealth Avenue West on my Honda Phantom TA200 motorcycle, plate no. FBD6863S. It was raining heavily though traffic was light. From the opposite direction, a red Hyundai car, plate no. SMS4158Z, was stationary at the junction between lamp post 5 and 6. As I was nearing the junction, it abruptly turned right into Ghim Moh Gardens carpark and obstructed my lane despite me having the right of way. As a result, I could not brake in time and collided into the left side of said car. (Refer to sketch in attachment)

My body hit the car on impact before dropping to the ground. I remained sprawled in the middle of the road primarily due to shock and pain on the left side of my body. The driver got out of the car and assisted me to the side of the road and called for ambulance.

After preliminary checks, I was conveyed to National University Hospital (NUH) at 2.05pm having sustained injuries on my left shoulder & thigh. I was discharged with 4 days MC at 3.30pm.

I wish to state that there is a Police camera at Blk 13 Ghim Moh Road facing above-mentioned junction.

(Vide report D/20200628/0098 TP IO Farhan)



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



3 of 4

Report No. T/20200629/7004

CONTINUATION OF REPORT





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

4 of 4 Report No. T/20200629/7004

CONTINUATION OF REPORT

Sketch Plan				
Informant is not able	to	provide	sketch	plan

NP168

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: 29/06/2020 08:37
Officer In Charge Of Case: TP / TPIB / YAN MINGSHENG DANIEL Contact No.: 65476252	Classification Of Case:
Authentication Stamp	

REPUBLIC OF SINGAPORE IDENTITY CARD NO. T01376941





Name

MUHAMMAD RIFQIE BIN ABDULLAH

For LKK/NAC Use Only

Race

INDONESIAN

Date of birth

Sex

11-11-2001

M

Country/Place of birth

SINGAPORE



5569012



NRIC No. T01376941



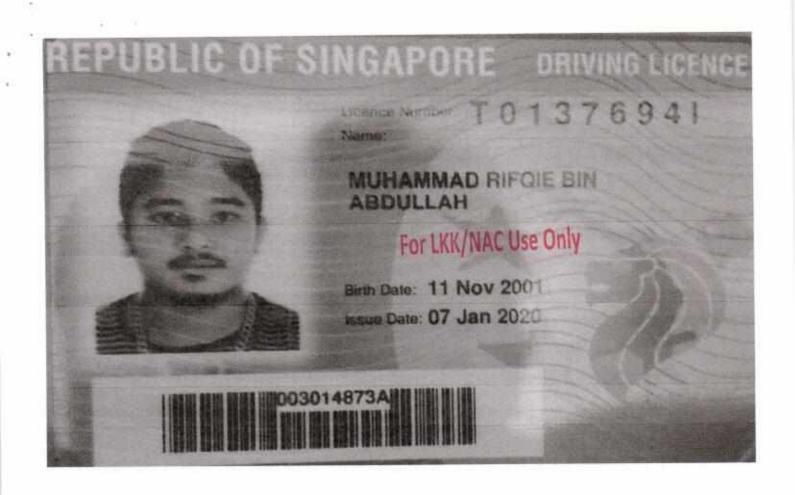
For LKK/NAC Use Only

Date of issue

29-02-2016

Address

APT BLK 167 STIRLING ROAD #01-1211 SINGAPORE 140167



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

07 Jan 2020

Class 2B Motorcycles =< 200 cc

For LKK/NAC Use Only



Claim Handling Accident MT/1099598 **GST Registration No.** YHD68633 111641099 Vehicle No. CANTON NO. T0027664 Perforances are fall of MUHAMMAD RIPCOS SIN ABBULLAN Principolder Name Trivial Barba, Free & Trivial Cityler First Printers Code HEROTECKET PREDROWER Comart No. (Itums) Contact his JOHov Circlest No. (Mobile) 90200330 ecnor. Social Remere Email Address militare Dymail. Limit всове Вивни THE THE TON The Yes Private Hire NOS Evolutionant(%) NCD Properties. - Accident Details Acodent Type Assident Report Within 24 hrs 29/06/2020 18:48 statement there Country of Accident Legacore Time of Accident his min 13.00 Date of Accelery 28/06/2020 Drange Force Reporting Centre ALDRIG CHIM HIGH ROAD Accedent Location Total Excess Applicable Fer Accident WHIDETEN EACHS Excess Type 800 TP Standard Recine 00.00 OD STREAM ENGINE Driver is Enteres? Not Covered YORK THE Excess. 5.30 9.00 WHEN ON EXPERT Accessoral Freeza 11,790 Total TF Escass Applicable Tyrus DO Excess Southerlife H.00% - 457 Segistered Information GST Registration Date DST Registerin GST Status Ventiled GST Aegratorium No. Positivation History - Policyholder Mailing Address ETHANIS STEW STIRLING ROAD Address 3 BLK 267 ¥21-1211 Address 1 Post Calle 142167 Singapore address Address Type Address A SINGAPORE EXCILIT **Hataled Policy Number** 9115430993 #R1-1761 MWA NO: - Ol Driver Info Driver Type Driver Name Muhammad Riftgle Bm Abdullah 2012270945 DOM: DOM 11/11/3041 Driver NUC Unnemed striver Name Driving Experience Regular Date of Disses License Driver Age 96/01/2020 Contact No. Homes Contact No.(Office) Contact Ne (Mondo) 90106126 STIRLING VIEW STIBLING ROAD Address 7 Address 2 Appropriate 1 BLK COY #51+7211 Pust Code Early SCT Singapore address SANDAPORE AND ST Address Type Address 9 ##S-1215 Jan No. Driver Breurer Company A TUE Dock his own a Bergapore Regimened car? PROVINCE Yes No Douge Vehicle No. Dectaration theatralyser or Barol Test Reading? Yes. 30 Hadification Hattery Claim 001 New William Management and an amount page THEFTS -DO-MX Clarm Type * WESODS JO Curtact No.(Mobile) BHDATSHE inampelégmátzum Erest Admissio FBD68635 / SMS41582 ON 29 Jun 1020 Claim Description Indured Listill(y | Not at Fault Workshop Sames No. 741 Preferred Workshop, Name unkn trate 29/05/27/28 00 28/96/2020 37:93 Dala Registered ROSELT WAYNES Report Token No. Print Alt latter Save Submit 600 MIT/1095TIME Acodeni Nis. Upwart Date 39/06/2020 17:03 # No O No Last Got: Received Grandly 5 ₩ NO Please Select Clear Choose File No file chosen ¥ 160 CHA Please Select Chacue File No file strasen w 100 Please Solect Close Choose File No file shapen w ho Named Chall Pinne Sciou Choose File I No Re chosen MG Opertual Please Select Choose Fills No Ne chosen Char Close Please Scient ¥ (NO w Normal Choose File. No life chosen Sand Her Attachment List Hog Sent? (ETr) Description Stateward By/Date Attachment RAC_BUKTT_MERAH, 800676) RATIONAL ASSESSMENT CENTRE SERVICE 5 (BUSCT MERAH)) on 28 Jun 2020 17:03 Photos 2010-6-29

	Liphinsted By/Distrik	Foliate Date	Plac Name			P hours		
⇒ Video List								
413	NAC_BURTY_HERAH_BOX6760 No S (BURTY HERAH	NYONAL ASSESSMENT CENTRE SERVICE ()) be 29 km 2020 17:02	525		tisierrasi	SAF	20,25-0-29	
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識	NAS_BURIT_MERAN_800670(NA S (BURIT MEXAN	TIDHAN ADDESSMENT LEWTHE SERVICE 11 on 24 Jun 2020 17:02	Protos		Normal	Photos	3020-0-29	
	NAC SCRIT, MERAH, HIDH 761 NA S (BOKIT MERAH	TICINAL ASSESSMENT CENTRE SERVICE M on 29 Jun 2020 17/02	Photos		hormal	PRODU	20311-6-29	
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100	MAT_BURLT_MERAH_000676(NA	TIONAL ASSESSMENT CENTRE SERVICE () on 29 Jun 2020 17:02	Photos		National	Protos	2029-8-29	
5.74		TIONAL ASSESSMENT CENTRE SERVICE I no 28 Jun 2020 17 62	Physics		Normal	Photos	2020-8-29	
12		TIONAL ASSESSMENT CENTRE SERVICE) No 20 July 2020 17 02	Photos		Hiermal	Protos	2020-6-29	
	MAC_BURLT_IMERAN_800676(KA 0 (NORT) MERAN	TIONAL ASSESSMENT CENTRE SERVICE) NO 29 Jun 2020 17:02	Protos		Hormal	Physical	2028-6-29	
	WAC_BURIT_PERAN_BODE76(NA 5 (BORTT MERAN)	TIONAL ASSESSMENT CENTRE SERVICE 1 no. 29 Jun 2020 17-62	Photos		Normal	Finance	2020-6-29	
1	RAC_BURST_HEBAH_ROODTIC NAT E (BURST HEBAH)	OONAL ASSESSMENT CENTRE SCHULGE) on 20 Jun 2020 17:42	Protes		Normal	Pidita.	21110-0-21	
42	NAC_MURIT_PRIRAM_RIGGETS(NAT 3 (BURIT HEXAM)	IGNAL ASSESSMENT CENTRE SERVICE on 28 Jun 2020 17-03	Phonos.		Normal	Photos	21131-6-29	
	NAC_BURIT_MERAH_800676(RAT S (BURIT MERAH)	TIDRAL ASSESSMENT CENTRE SERVICE 1 by 29 Jul 2020 17 DE	Photos		Acres	Profes	11129-6-29	
9	NAC, BURIT, PRINAM, BOUGTER NAT & (BLACK THERAM)	SDAAL ASSESSMENT CENTRE SERVICE on 29 Jun 2920 17-03	Photos		Normal	Physics	2020-6-28	
Since N	NAC_MURIT_PREAM_BUDG76(NAT 1 (BUNCT PERAM)	IONAL ASSESSMENT CENTRE SERVICE un 29 Jun 2020 17:00	Photow		Negrorial	Propus I	030-6-29	
1	NAC_BUNCT_MENAN_BOOKFRE ART \$ (BUNCT MERAN)	IDMAL ASSESSMENT CENTRE SERVICE on 39 Jun 2020 17:03	Photos:		Normal	Phones 2020-6-29		
O		ECHAL ASSESSMENT CENTRE SERVICE on 29 Jun 2010 17:03	Photos		Normal	Philos	010-6-29	
833								

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