

# NATIONAL Assessment Centre Services

(Ref - Jan 02)

200056832

Date In: 04/01/2002 10:56	Job description	Date & Time Completed	Done by
Ref No: NA/MSR 2000 6970/Y	SAS e-filing		
Veh No: FBA 4000 M	E-mail (within 3hrs, Nbt 2hrs)		
D.O.A: 02/07/2002 18:28	i-Motor Claim Form		
OD: <input checked="" type="checkbox"/> 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: GBK 373RD 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% F: 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

NA 200578	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	For claiming against INC Only (wef 10 Jan 2002)		
Date 1:	6) TR: Re-inspection \$75		
Date 2/3:	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
	*N5: Courtesy Car / Tp Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Nva INC) against INC \$20		
	9) N12: Idno 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	04/07/2020 10:56
Date Of Accident	02/07/2020 18:25
Exact Location Of Accident	BALESTIER ROAD IN FRONT OF ZHONGSHAN MALL
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBA5000M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	FADLY BIN ZAHAREN
NRIC No	SXXXX582I
Email Address	AFAD.ZAHAREN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92415941
Alternative Phone No	OTHERS-92415941

### Vehicle Particulars

Manufacturer	YAMAHA
Model	YZF-R155-155CC
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MSD/VMS/20-409166-CA
Cover Note Number	

### Driver

Name of Driver	FADLY BIN ZAHAREN
NRIC No	SXXXX582I
Date Of Birth	16/11/1980
Occupation	OUTDOOR
Date Of Driving Pass	22/01/2008
Driving Experience	12 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92415941
Fax Number	
Contact Number	OTHERS-92415941
Email Address	AFAD.ZAHAREN@GMAIL.COM

Address	BLK 169 HOUGANG AVENUE 1 #01-1429
Postcode	530169
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	SIDE SWIPE
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 HEADQUARTERS
Police Station Address	ROAD: 10 UBI AVENUE 3 SINGAPORE , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

#### 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	GBK3738D
Vehicle Make/Model/Colour	TOYOTA HIACE
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MUHAMMAD HELMI BIN MOHAMED
NRIC/Passport Number	SXXXX009I
Contact Number	85337180
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

### DETAILS OF INJURED PERSON 1

Name

FADLY BIN ZAHAREN

Approximate Age

Injuries Sustain

SLIGHT

Injured person in which vehicle?

FBA5000M

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode



## SKETCH PLAN

### 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. 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: 3/7/20  
@ 6.12pm

Driver's Signature

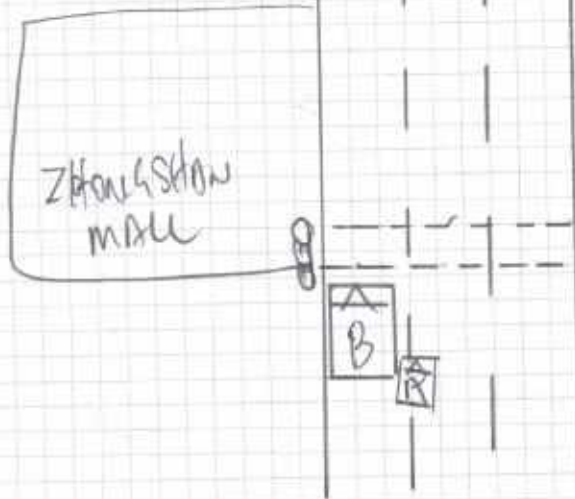
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name:  
NRIC/FIN No.:

SKETCH PLAN

Along Boundary Rd Infront of Zhenqishan Mall



- A) FBA 5000M
- B) GBK 3738D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT 7/20200703/2016

DECLARATION

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

*[Signature]*

Policyholder's Signature

Date & Time: 3/7/20

@ 6:4pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

*[Signature]* 06/07/2020

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



# ACCIDENT STATEMENT

ACCIDENT DATE: (02/07/2020) (DD/MM/YYYY), TIME: (18:25) (HH:MM)

LOCATION: BANARSHIL ROAD IN FRONT OF ZHARISHA MALL

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBA 500DM
- b) INSURANCE COMPANY: INSIC
- c) POLICY NUMBER: \_\_\_\_\_
- d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
- e) MAKE & MODEL: YAMAHA R15
- f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
- g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
- h) PURPOSE OF USING AT ACCIDENT TIME: WALKING
- i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
- IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: FADL / BIN ZAHAREN (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 72415941
- c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: AS ABRAH (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_
- c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: (\_\_\_\_/\_\_\_\_/\_\_\_\_) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS \_\_\_\_\_

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

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: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBK 3738D MODEL: \_\_\_\_\_
- b) DRIVER'S NAME: MUHAMMAD BIN MUHAMMAD
- c) NRIC/FIN/PASSPORT: 591380951 CONTACT: 8533760

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_
- e) DRIVER'S NAME: \_\_\_\_\_
- f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

email = afad.zaharen@gmail.com  
VIDEO



**SINGAPORE  
POLICE FORCE**



T/20200703/7016

1 of 4

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

Report No T/20200703/7016

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 03/07/2020 17:39	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: FADLY BIN ZAHAREN			Address: APT BLK 169 HOUGANG AVENUE 1 #01-1429 SINGAPORE 530169		
ID Type / ID No.: NRIC NO / S80365821			Contact No.: Home/Office: Mobile: 92415941		
Nationality: SINGAPORE CITIZEN			Email: afad.zaharen@gmail.com		
Sex: Male	Age: 39	Date of Birth: 16/11/1980	Type of Informant: Vehicle Owner		
Race: Malay			Language: English	Institution / School Name:	
Occupation: Despatch worker			Driving Licence Information: Class: 2B		Date of Expiry:

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 02/07/2020 18:25	Type of Location: Straight Road
Location:  AH HOOD ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBA5000M	Motorcycle	YAMAHA	R15v3	Blue	Seriously Damaged	1

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBA5000M	MSIG INSURANCE (SINGAPORE) PTE. LTD.	MSD/VMS/20-409166-CA	22/01/2020	21/01/2021





# SINGAPORE POLICE FORCE



T/20200703/7016

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

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Report No: T/20200703/7016

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	FADLY BIN ZAHAREN	ID No.	S8036582I
Related Vehicle	FBA5000M (Motorcycle)	Contact No.	92415941
Hospital/Clinic	HOUGANG CLINIC	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	02/07/2020	Date Discharge	02/07/2020
No. of Days granted Medical Leave	05	Degree of Injury	Slight

### Brief Details.

The accident happens exactly in front of Zhongshan Mall at a traffic junction where there's a traffic light for pedestrian to cross. As the traffic was quite heavy at that time, i was lane splitting in between cars as i was on my way to pick up an order @ 28 Ann Siang Rd. When the vehicles started moving at a slow consistent pace, i followed the 1st left lane again. As got near to the pedestrian crossing (traffic light), i noticed that the lane was clear except for a grey coloured van. At the same time, my map at my hp sounded indicating me to turn right after 800m to my said location. I took a glance down & within split seconds when i lookup to see the road, the grey van which i saw just now is still in it's same position. But due to the traffic on the other lanes, i could only lane split in order not hit head on to it's rear. Upon doing so, my bike managed to pass the van but my big delivery bag got hooked on it's side causing a side swipe which eventually caused my bike to be unbalanced & i got flunged off from my bike. When i turn to see the driver, both he & his helper (assistant) was in front of the van. His helper then proceeded to help me push my bike about 10 metres in front of the bus stop & the driver moved his van behind my bike. During that time, i noticed that the van's left side rear door was open so i asked the helper if they doing loading/unloading. The helper replied yes so i asked him, do u know that it's a double yellow line & the traffic were heavy. Furthermore the van was at a stopline at a pedestrian crossing where the lights were green in our favour but by doing that, they were causing obstruction to other vehicles. Why didn't u just parked below @ the loading bay? But the helper just kept quite. So we changed particulars & took photos of the damages that was caused. I'd asked the driver to ensure which part of his van's damaged which i then took photos off. I also took photos of the damages of my bike & asked him to take too so that if claims were made, they wouldn't be any discrepancies. The driver seems to be in a hurry so immediately after that, he & his driver proceeded to their van (which they claims that it's their company van) & drove off. As i want to know if i'd dropped anything during the accident, i went back to the exact location that's at the pedestrian crossing. That's where i noticed that there was an entrance about 10 metres away from the traffic light leading to Zhongshan Mall Carpark. However the next day, the driver told me that his company might claimed against me & advised me to do the same instead of personal claim which we've agreed on earlier. So i asked him if he know's about the implications by parking at a double yellow line, doing loading/ unloading without the hazard lights on? That was when he told me that they were not doing loading/unloading, instead they were waiting for the bus to start moving off. And i also asked, theb why is your rear door open with lots af buckets full of items? He told me that actually he'd open it up to get some wet tissues s my hand was bleeding. I then kept quite but there's 2 more things i noticed which did not mention in case he think of an answer. The question is, if really he were waiting for the bus to move off, why did both of them were already in front of the van during the accident. Secondly why didn't he closed the rear door even after moving in front of the bus stop & stopped behind me. 3rdly, when i asked him what road is this, he gave me a definite answer which is 20, Ah Hood Rd? For me, a delivery guy will know it's exact



**SINGAPORE  
POLICE FORCE**



T/20200703/7016

Police Station Of Origin:  
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Report No. T/20200703/7016

**CONTINUATION OF REPORT**

location to pickup or deliver an item which I believed that they were there to deliver something using their own convenience. Furthermore, if what he says is true, he should be able to explain to me at that point of time & not the day after, which probably he'd think of on how to answer me. I've pictures of our damages, license plate & ICs at the time the incident happened. That's all.





**SINGAPORE  
POLICE FORCE**



T/20200703/7016

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

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Report No. T/20200703/7016

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:

Authentication Stamp

NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
03/07/2020 17:39

Classification Of Case:

**MSIG**

**MSIG Insurance (Singapore) Pte. Ltd.**, (Co. Reg. No. 200413212G)  
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 msig.com.sg

**CA 536235****CERTIFICATE OF INSURANCE**

Road Transport Act 1987 (Malaysia), Road Transport (Amendment) Act 2019 (Malaysia)  
 The Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)  
 The Motor Vehicles (Third-Party Risks and Compensation) Act (CAP. 189 of the Revised Edition) (Republic of Singapore)  
 The Motor Vehicles (Third-Party Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)  
 Or any Amendment, Act or Acts passed in substitution thereof.

CERTIFICATE NO : MSD/VMS/20-409166-CA A0074-001/10110

SUM INSURED : PMV

EXCESS : \$300(FIRE&THEFT) \$600(ENDT 2K)

1. Index mark and Registration Number of Vehicle **FBA5000M**  
**YAMAHA**
2. Name of Policyholder **FADLY BIN ZAHAREN** **155 c.c.**
3. Effective date of the Commencement of Insurance  
 for the purposes of the Act
4. Date of Expiry of Insurance **1221PM 22/01/2020**  
**21/01/2021**
5. Persons or Classes of Persons entitled to drive  
 a. The Policyholder,

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 and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

## 6. Limitation as to Use

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

## 7. The Policy does not cover

1. Use for hire or reward.
2. Use for racing, pace-making, reliability trial or speed-testing.
3. Use for the carriage of goods (other than samples) in connection with any trade or business.
4. 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.

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) or any Amendment, Act or Acts passed in substitution thereof.

22/01/2020 (CG)  
 CA/CI-03 (05/13)

**COMMERCIAL AGENCY PTE. LTD.**  
 Underwriting Agent  
 For **MSIG Insurance (Singapore) Pte. Ltd.**