

## 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	20/06/2020 22:38
Date Of Accident	20/06/2020 17:50
Exact Location Of Accident	ALG CANTONMENT RD TWDS KEPPEL RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE5013E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	DINIE FIRDAUS BIN JAMIL
NRIC No	SXXXX758E
Email Address	DINIERXZ@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93824042
Alternative Phone No	OFFICE-93824042
<b>Vehicle Particulars</b>	
Manufacturer	YAMAHA
Model	RXZ
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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
<b>Insurance Company</b>	
Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	PNMC2020-00001765
Cover Note Number	
<b>Driver</b>	
Name of Driver	DINIE FIRDAUS BIN JAMIL
NRIC No	SXXXX758E
Date Of Birth	22/10/1993
Occupation	INDOOR
Date Of Driving Pass	06/07/2017
Driving Experience	2 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93824042
Fax Number	
Contact Number	OFFICE-93824042
Email Address	DINIERXZ@GMAIL.COM

Address	NIL
Postcode	
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?	NO
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

I FBE5013E was riding along CANTONMENT ROAD TOWARDS KEPPEL ROAD AFTER CANTONMENT LINK on the 3rd lane within the speed limit. As I was riding, suddenly the 3rd party SKN226X make a lane change abruptly into my lane from the filter lane Cantonment link. I Couldn't react as it was already to near with me and the 3rd party collided onto my bike. I manage to take some photos and exchange particulars with the 3rd party and there was traffic police that came to the scene to assist us.

#### 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	SKN266X
Vehicle Make/Model/Colour	MERCEDES BENZ / CLA200 (R18)
Details Of Properties	NA
Vehicle Category	PRIVATE CAR
Name of Driver	SEAH WEI FANG
NRIC/Passport Number	SXXXX868D
Contact Number	92778242
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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.

**VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER  
MUHAMMAD SUMARDI BIN MOHD AFFANDI**

  
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.:

# Sketch Plan #2

MAN

CANTONMENT RD

CANTONMENT LINK

A FBG 5013E

B SKN 266X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT:

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:

VERIFY BY AJAX MARS (ARC) REPORTING OFFICER

MUHAMMAD SUMARDI BIN MOHD AFFANDI

REPORTING CENTRE PERSONNEL'S SIGNATURE

NAME:

NRIC/FIN No.:

2

ACCIDENT STATEMENT (2000 characters)

I FBE5013E was riding along CANTONMENT ROAD TOWARDS KEPPEL ROAD AFTER CANTONMENT LINK on the 3rd lane within the speed limit. As I was riding, suddenly the 3rd party SKN226X make a lane change abruptly into my lane from the filter lane Cantonment link. I Couldn't react as it was already to near with me and the 3rd party collided onto my bike. I manage to take some photos and exchange particulars with the 3rd party and there was traffic police that came to the scene to assist us.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
MUHAMMAD SUMARDI BIN MOHD AFFANDI

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

20 June 2020 at 7:05 PM

Date/Time:

20 June 2020 at 7:05 PM



**SINGAPORE  
POLICE FORCE**



T/20200624/2053

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

1 of 4

Report No. T/20200624/2053

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/06/2020 15:12	Vide Report No.:	Station Diary No.: 41
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**Informant's Particulars**

Name of Informant: DINIE FIRDAUS BIN JAMIL			Address: APT BLK 168 BEDOK SOUTH AVENUE 3 #02-465 SINGAPORE 460168		
ID Type / ID No.: NRIC NO / S9341758E			Contact No.: Home/Office: Mobile: 93824042		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 26	Date of Birth: 22/10/1993	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: BOARDING OFFICER			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/06/2020 16:40	Type of Location: Straight Road
Location: Along Road 1 CANTONMENT ROAD  heading towards Keppel road, after Cantonment Link				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE5013E	Motorcycle	YAMAHA	RXZ	Yellow	Seriously Damaged	0
SKN266X	Car	MERCEDES BENZ		Silver		0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE5013E	FWD Singapore Pte. Ltd	PNMC2020-00001765	06/05/2020	05/05/2021



**SINGAPORE  
POLICE FORCE**



T/20200624/2053

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Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

Report No. T/20200624/2053

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	DINIE FIRDAUS BIN JAMIL	ID No.	S9341758E
Related Vehicle	FBE5013E (Motorcycle)	Contact No.	93824042
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	20/06/2020	Date Discharge	20/06/2020
No. of Days granted Medical Leave	02	Degree of Injury	Serious
Driver			
Name	seah wei fang	ID No.	S8500868D
Related Vehicle	SKN266X (Car)	Contact No.	9277 8242
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 20/06/2020 at about 1640 hrs, I was riding my motorcycle (FBE5013E) on the fourth lane, Cantonment towards Keppel Road. As I was riding, the driver of SKN266X drove out from Cantonment link and abruptly filtered from Lane 2 to Lane 4. As such, she filtered in front of me in a hasty manner thus I collided into her rear. I was travelling within speed limit and I was unable to administer the emergency break.

I wish to state that this is the particulars of the witness who assisted me at scene:

Name: Sulaiman  
Hp: 8891 9323

I refused to be conveyed by the ambulance, however, I went to Changi General Hospital on 20/06/2020 at about 2300hrs as my neck and left body was in pain. This was due to the effect as I flung off my motorcycle and hit the roof of the car during the accident. I was prescribed with 2 days of MC as my muscles are strained as diagnosed by the X Ray results. Subsequently, I went to a clinic on 23/06/2020 as my left side of the body was in pain and covered in bruises on my left thigh and the rest of my body succumbed to abrasions. I was then provided with a further 3 days of MC.



**SINGAPORE  
POLICE FORCE**



T/20200624/2053

Police Station Of Origin:  
Bedok North N.P.C  
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Report No. T/20200624/2053

**CONTINUATION OF REPORT**





**SINGAPORE  
POLICE FORCE**



T/20200624/2053

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

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Report No. T/20200624/2053

**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 2 ARI HAIKAL BIN SUBTU

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt MOHAMMED FERAZ BIN HUSSEIN

Contact No.: 65476206

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

24/06/2020 15:12

Classification Of Case:

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9341758E



Name

DINIE FIRDAUS BIN JAMIL

Race

MALAY

Date of birth

22-10-1993

Country of birth

SINGAPORE

Sex

M

S9341758E

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S9341758E

Name

DINIE FIRDAUS BIN JAMIL

Birth Date: 22 Oct 1993

Issue Date: 19 Jan 2017



NRIC No. S9341758E



Date of issue  
12-11-2008

Address

APT BLK 168 BEDOK SOUTH AVENUE 3  
#02-465  
SINGAPORE 460168

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

	EFFECTIVE DATE
Class 2B	Motorcycles <= 200 CC
Class 2A	Motorcycles between 201 CC and 400 CC
Class 3	Motor cars <= 3500 kg with <= 7 passengers, exclusive of the driver, and motor tractors <= 3500 kg

06 Jul 2017  
22 Mar 2017  
19 Jan 2017

S9341758E

S / No.9000327851



NP 428A