

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	18/08/2020 14:31
Date Of Accident	02/08/2020 21:20
Exact Location Of Accident	BRICKLAND RD TWDS KJE NEAR JLN LAM SAM
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBD3169H
Insured/Policyholder	
Name Of Registered Owner	ABDULLAH AL-SITTIQ S/O MOHD KUPPAI
NRIC No	SXXXX512A
Email Address	ABDULLAHSITTIQ@GMAIL.COM
Mobile Phone No	(LOCAL) +65-84886841
Alternative Phone No	OTHERS-84886841

Vehicle Particulars

Manufacturer	PIAGGIO
Model	GILERA RUNNER
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	5041366219-10
Cover Note Number	

Driver

Name of Driver	ABDULLAH AL-SITTIQ S/O MOHD KUPPAI
NRIC No	SXXXX512A
Date Of Birth	11/12/1987
Occupation	INDOOR
Date Of Driving Pass	01/09/2016
Driving Experience	3 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84886841
Fax Number	
Contact Number	OTHERS-84886841
Email Address	ABDULLAHSITTIQ@GMAIL.COM

Address	BLK 134 BUKIT BATOK WEST AVE 6 #09-447
Postcode	650134
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	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-6659999 - FAX NO: 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20200803/2001

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	SLZ6368X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	ABDULLAH AL-SITTIQ S/O MOHD KUPPAI
Approximate Age	
Injuries Sustain	CALF,KNEE,TIGH,NECK &BACK
Injured person in which vehicle?	FBD3169H
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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: 18-08-2020
12:45

Driver's Signature

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

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

AS PER ATTACHED

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the police report: T/20200803/2001

DECLARATION

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

Policyholder's Signature

Date & Time: 15-11-2020
1315

SAATCHI & SAATCHI

Driver's Signature

(If driver is not the policyholder)

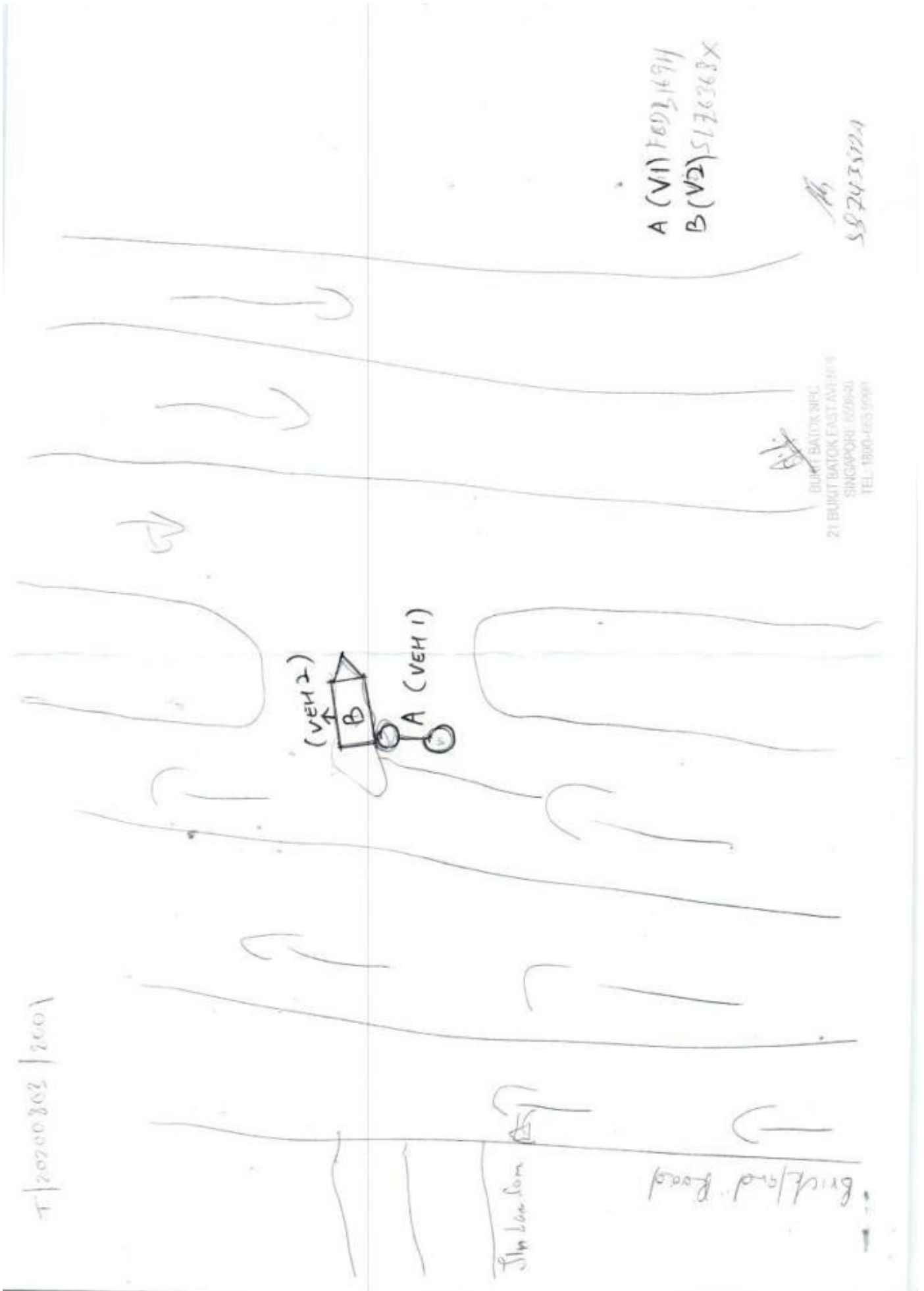
Date & Time:

Reporting Centre Personnel's Signature _____

Name: _____

NRIC/FIN No.:

Accident Sketch Plan



Individual Statement



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999



T/20200803/2001

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Report No. T/20200803/2001

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBD3169H	NTUC Income Insurance Co-Operative Limited	5041366219-10	23/01/2020	22/01/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	ABDULLAH AL-SITTIQ S/O MOHAMED KUPPAI	ID No.	S8743512A
Related Vehicle	FBD3169H (Motorcycle)	Contact No.	84886841
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

Brief Details.

On 02/08/2020 at about 2120hrs, I was riding my motorcycle, FBD3169H (V1), alone along Brickland Road towards KJE on the first lane. There was a red car bearing the plate number SLZ6368X (V2), which was driving along the second lane. There was a traffic light ahead so our speed was not fast. Suddenly, V2 turned to the right and attempted to make a U-turn. I did not manage to avoid and V1 and V2 collided. V1 was hit on the front and V2 was hit on the right. I on the road for a while, trying to stabilise myself. I noticed that the car stopped and after a while, the driver came out. He is an Indian man who seemed to be in his 30s. I noticed that there was a female subject and two children in V2. I asked the driver to call for the ambulance and the police but he did not acknowledge. A member of public approached to say that V1 was leaking and we later managed to put V1 on its stand. As there was no serious injury sustained, I suggested to move our vehicles to Jalan Lam Sam nearby so as to not cause an obstruction on the road. Once our vehicle were parked, V2's driver suggested to settle the matter privately but I refused. My cousin arrived shortly as I have called him for assistance for the accident. V2's driver then went on a phone call and he was pacing up and down. At a point, he walked to his car, got into the car and he suddenly drove off. I did not manage to get his particulars.

The damage to V1 is extensive; there are dents and scratches, and I am unable to start V1. It was left to park at the pathway of Jalan Lam Sam and will be towed. There are pain on my calf, knee, thigh, neck and back areas. Ambulance and TP arrived later. I was advised by the TP officer to lodge an accident report.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



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1 of 3

Police Station Of Origin:
Bukit Batok N.P.C.
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

Report No. T/20200803/2001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/08/2020 01:29	Vice Report No.: J/20200802/0200	Station Diary No.: 18
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Informant's Particulars			
Name of Informant: ABDULLAH AL-SITTIQ S/O MOHAMED KUPPAI		Address: APT BLK 134 BUKIT BATOK WEST AVENUE 6 #09-447 SINGAPORE 650134	
ID Type / ID No.: NRIC NO / S8743512A		Contact No.: Home/Office: Mobile: 84886841	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 32	Date of Birth: 11/12/1987	Type of Informant: Rider
Race: Indian		Language: English	Institution / School Name:
Occupation: FIRE TECHNICIAN		Driving Licence Information: Class: 2B,2A,3,4,5 Date of Expiry:	

General Information of the Accident					
Type of Accident:	Non-Injury	Drink Drive:	No	Date/Time of Accident:	02/08/2020 21:20
Type of Location: Straight Road					
Location: Along Road 1 Traveling Toward Road 2 BRICKLAND ROAD KRANJI EXPRESSWAY along Brickland Rd towards KJE, near Jalan Lam Sam					
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate	
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
FBD3169H	Motorcycle	PIAGGIO	GILERA RUNNER ST 200	Black	Seriously Damaged	0
SLZ6368X	Car				Slightly Damaged	3

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date

Police Report



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-8859999



T/20200803/2001

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Report No. T/20200803/2001

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBD3169H	NTUC Income Insurance Co-Operative Limited	5041366219-10	23/01/2020	22/01/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider:			
Name	ABDULLAH AL-SITTIQ S/O MOHAMED KUPPAI	ID No.	S8743512A
Related Vehicle	FBD3169H (Motorcycle)	Contact No.	84886841
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

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Police Report



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T/20200803/2001

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21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

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Report No: T/20200803/2001

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 /

Sgt 3 NUR FAZZAHASHIKIN BINTE SUBTU

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

03/08/2020 01:29

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168