

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	06/10/2020 16:11
Date Of Accident	05/10/2020 17:35
Exact Location Of Accident	JELEBU ROAD NEAR (BUKIT PANJANG PLAZA)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK937R
Insured/Policyholder	
Name Of Registered Owner	DANIAL ASYRAF BIN SANI
NRIC No	SXXXX555B
Email Address	DANIALASYRAFSANI@GMAIL.COM
Mobile Phone No	(LOCAL) +65-86061994
Alternative Phone No	OTHERS-86061994

Vehicle Particulars

Manufacturer	YAMAHA
Model	JUPITER MX-134CC HC
Exact Purpose for which vehicle was being used at time of accident	BIKE WAS PARKED
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
Fleet Policy	NO
Policy Number	5118856997
Cover Note Number	

Driver

Name of Driver	DANIAL ASYRAF BIN SANI
NRIC No	SXXXX555B
Date Of Birth	02/10/1995
Occupation	OUTDOOR
Date Of Driving Pass	23/04/2014
Driving Experience	6 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86061994
Fax Number	
Contact Number	OTHERS-86061994
Email Address	DANIALASYRAFSANI@GMAIL.COM

Address	BLK 501 JELAPANG ROAD #03-408
Postcode	670501
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG
Police Station Address	ROAD: 1 SEGAR ROAD , POSTCODE: 677738 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20201005/2099

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	FW8384Y
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

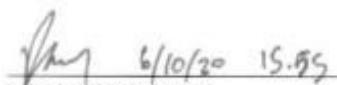
SKETCH PLAN

IMPORTANT NOTICE

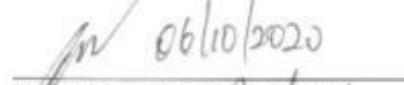
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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.

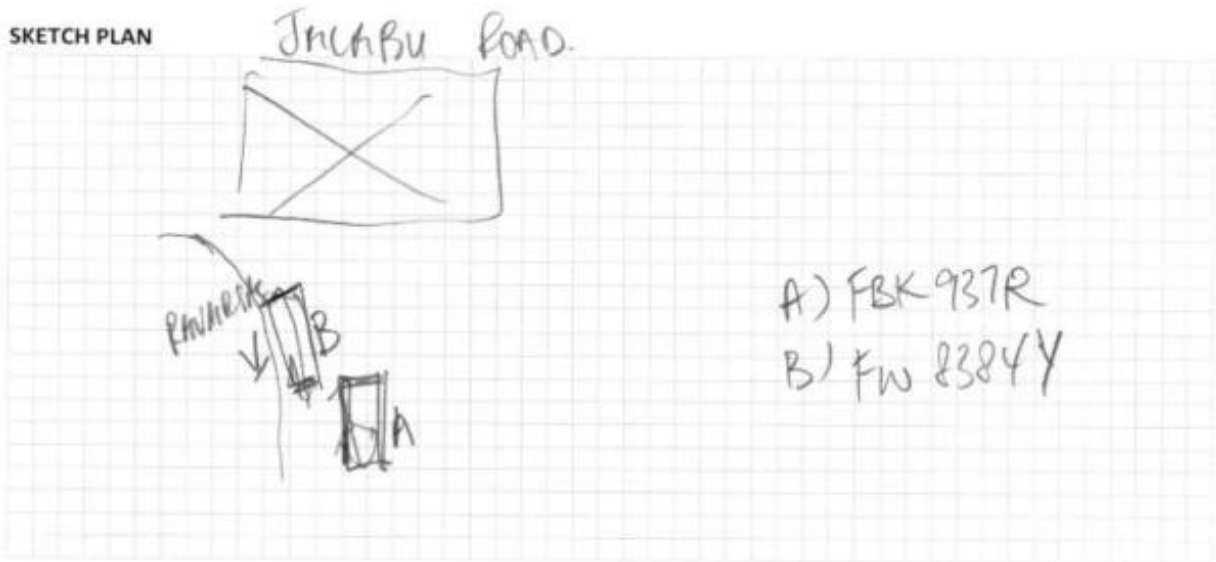

Policyholder's Signature
Date & Time: 6/10/20 15.55

Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name: Kael Loo Hoon
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT 1/2020/005/2019

DECLARATION

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

[Signature] 6/10/20 1557

Policyholder's Signature

Date & Time:

Driver's Signature
(If driver is not the policyholder)

Date & Time:

[Signature] 06/10/2020

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

[Signature]

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201005/2099

1 of 3

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

Report No. T/20201005/2099

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/10/2020 19:33	Vide Report No.:	Station Diary No.: 84
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Informant's Particulars

Name of Informant: DANIAL ASYRAF BIN SANI			Address: APT BLK 501 JELAPANG ROAD #03-408 SINGAPORE 670501		
ID Type / ID No.: NRIC NO / S9535555B			Contact No.: Home/Office: Mobile: 86061994		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 25	Date of Birth: 02/10/1995	Type of Informant: Rider		
Race: Javanese			Language: English		Institution / School Name:
Occupation: DELIVERY RIDER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 05/10/2020 17:35	Type of Location: Straight Road
Location: JELEBU ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK937R	Motorcycle	YAMAHA	JUPITER MX (HC)	Black	Slightly Damaged	0
FW8384Y	Motorcycle				No Damage	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK937R	NTUC Income Insurance Co-Operative Limited	5118856997	21/09/2020	20/09/2021

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20201005/2099

2 of 3

Report No. T/20201005/2099

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

CONTINUATION OF REPORT

Brief Details.

On 05/10/2020 at about 1736hrs, I parked my m/cycle (FBK937R) along Jelebu Road towards Petir Road after the junction of Bukit Panjang Road near to the exit of Bukit Panjang Plaza taxi stand exit. I then returned to my m/cycle and discovered that my m/cycle had toppled.

I managed to converse with the rider (FW8384Y) (Male/Chinese/50yrs old) who collided onto my m/cycle. He mentioned that he will proceed back to the said location after his delivery however I waited to no avail.

No Traffic Police or Ambulance were at scene and no Government property involved.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20201005/2099

3 of 3

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

Report No. T/20201005/2099

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 /

Staff Sgt MUHAMMAD JUMALI BIN JAMAL

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

05/10/2020 19:33

Officer In Charge Of Case:

TP / HRT /

SI NOR AFFENDY BIN JAFFAR

Contact No.: 65476368

Classification Of Case:

Authentication Stamp

NP168

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

