

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	21/10/2020 10:48
Date Of Accident	19/10/2020 17:30
Exact Location Of Accident	NO. 44 PASIR PANJANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBR6692U
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD SYAHIDIN BIN ABDUL WAHID
NRIC No	SXXXX203G
Email Address	MUHD_SYAHIDIN98@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91768460
Alternative Phone No	OTHERS-91768460

Vehicle Particulars

Manufacturer	YAMAHA
Model	MT-09-847CC
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	C0108733

Driver

Name of Driver	MUHAMMAD SYAHIDIN BIN ABDUL WAHID
NRIC No	SXXXX203G
Date Of Birth	03/02/1998
Occupation	INDOOR
Date Of Driving Pass	14/08/2020
Driving Experience	0 YEAR AND 2 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91768460
Fax Number	
Contact Number	OTHERS-91768460
Email Address	MUHD_SYAHIDIN98@HOTMAIL.COM

Address	BLK 616 CHOA CHU KANG STREET 62 #03-263
Postcode	680616
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	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20201020/7015

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	SJH1092S
Vehicle Make/Model/Colour	NISSAN LATIO 1.5L A
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	FBK9010E
Vehicle Make/Model/Colour	BMW S1000RR
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	SHIVASURIA S/O MANIAM KESAVAL
NRIC/Passport Number	SXXXX209C
Contact Number	91908444
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

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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: 21/10/2020

11:50 10:50

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

DAIKAWA BIKE WAS PARKED

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ritter W Police Report 1/2020 1020/7015

DECLARATION

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

Policyholder's Signature

Date & Time: 21/10/2020
10:50

GUARMC SwitchPlatform_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201020/7015

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

1 of 4

Report No. T/20201020/7015

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/10/2020 19:01		Vide Report No.: D/20201019/0086		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMMAD SYAHIDIN BIN ABDUL WAHID			Address: 616 CHOA CHU KANG STREET 62 #03-263 SINGAPORE 680616		
ID Type / ID No.: NRIC NO / S9803203G			Contact No.: Home/Office: Mobile: 91768460		
Nationality: SINGAPORE CITIZEN			Email: MUHD_SYAHIDIN98@HOTMAIL.COM		
Sex: Male	Age: 22	Date of Birth: 03/02/1998	Type of Informant: Vehicle Owner		
Race: Malay			Language: English		Institution / School Name:
Occupation: Student			Driving Licence Information: Class: 2B,2A,2		Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/10/2020 17:30	Type of Location: Car Park
Location: PASIR PANJANG ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBK9010E	Motorcycle	BMW	S1000RR	Black	Slightly Damaged	1
FBR6692U	Motorcycle	YAMAHA	Tracer GT 900	Black	Slightly Damaged	1

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201020/7015

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

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Report No. T/20201020/7015

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJH902A (Not Accurate)	Car	NISSAN	Latio	Gold	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK9010E	NTUC Income Insurance Co-Operative Limited	5109629651-01	07/10/2020	06/10/2021
FBR6692U			11/09/2020	10/09/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	SHIVASURIA S/O MANIAM KESAVAL	ID No.	S9716209C
Related Vehicle	FBK9010E (Motorcycle)	Contact No.	91908444
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,2A,2 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Vehicle Owner			
Name	MUHAMMAD SYAHIDIN BIN ABDUL WAHID	ID No.	S9803203G
Related Vehicle	NIL	Contact No.	91768460
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,2A,2 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201020/7015

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

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Report No. T/20201020/7015

CONTINUATION OF REPORT

Brief Details.

On the above date, time and location, while I was at Anytime Fitness Gym gymming, I was informed by the gym manager that one of the motorcycles parked outside the gym had been knocked down by an unknown car and dropped.

When I went out to inspect the same, I noticed my motorcycle bearing registration plate "FBR6692U" being a Yamaha Tracer GT900 and my friend's motorcycle bearing registration plate "FBK9011E" and being a BMW S1000RR (Black), had fallen and were leaning on each other with several damages.

The motorcycle was subsequently picked up and the gym manager assisted to check CCTV footage which confirmed an accident between the two parked motorcycles and an unknown gold coloured motorcar being a Nissan Latio at about 1713hrs.

There were no notes left on the motorcycles with any contact details whatsoever. Nobody approached either one of us and therefore, I called for police assistance as it would be considered a hit-and-run.

I was approached by one witness by the name of "Ron" who informed me that he witnessed the accident but was unable to capture the full plate number but remembered "SJH902A". He provided me with his contact number at 8588 0070.

An unknown Chinese lady was also believed to have spoken to the driver of the unknown car after the accident and tried to carry my motorcycle but subsequently left without any sign. She was at the gym premises and when approached informed she had no connection with the driver and was just there to help. She does not know anything.

A traffic police officer subsequently arrived and directed me to make this police report upon completion of the on-scene investigations. I was informed that the IO in-charge of the case is IO Muhaimin from Traffic Police who can be contacted at 6547 6090.

That is all.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201020/7015

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

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Report No. T/20201020/7015

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

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:
20/10/2020 19:01

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet

GENERAL
INSURANCE
ASSOCIATION
RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (GS) 6224 0010 Fax (GS) 6224 0030
Operating Hours: Monday to Friday, 09:00 - 17:00
UEN: SG6550020G / GST Reg. No.: M400017733

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MHA120092092 Vehicle Registration No: FBR 66924
Name (as shown in NRIC): MUHAMMAD SYAHIDIN NRIC/FIN/Passport No: SSXX 203C
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address: _____ Singapore ()
Contact (Tel): _____ Mobile No.: 9768460
Email Address: _____
Date of Accident: 19/10/2020 Time of Accident: 17:30
Place of Accident: NO. 44 PASIR PANJUNG ROAD
Insurance Company: LIBERTY

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

THIRD PARTY VEHICLE NUMBER IS SJH 1092S

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: _____
NRIC/FIN No.: _____
Date: 22/10/2020