### SINGAPORE ACCIDENT STATEMENT

# IMPORTANT NOTICE

Mobile Number

Fax Number
Contact Number

**EMail Address** 

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

alulesalu.	ACCIDENT STATEMENT
Date Of Report	16/10/2020 15:32
Date Of Accident	15/10/2020 16:15
Exact Location Of Accident	BLK 224 ANG MO KIO AVE 1 CARPARL LOT 113
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBF7258Y
Insured/Policyholder	1 51 7 2001
Name Of Registered Owner	MOHD NOOR BIN MOHD SAID
NRIC No	SXXXX671H
Email Address	MISAFIR1965@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93680341
Alternative Phone No	OFFICE-93680341
Vehicle Particulars	011102 33000041
Manufacturer	HONDA
Model	CB400
Exact Purpose for which vehicle was being used at time of accident	
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	5058375031-07
Cover Note Number	
Driver	
Name of Driver	MOHD NOOR BIN MOHD SAID
NRIC No	SXXXX671H
Date Of Birth	-13/12/1965
Occupation	INDOOR
Date Of Driving Pass	30/05/1985
Driving Experience	35 YEARS AND 4 MONTHS
Gender	MALE

(LOCAL) +65-93680341

MISAFIR1965@HOTMAIL.COM

OFFICE-93680341

Address APT BLK 341 TAMPINES ST 33 #05-264

Postcode 520341

Was driver an employee of the Insured's Company NO

**OWNER** If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

2

NO

NO

YES

NO

0

YES

NO

YES

NO

NO

CHANGI N.P.C

SINGAPORE

TEL NO: - FAX NO:

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes.Please state which Police Station

Police Station Name

Police Station Address Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

**Details of Witness 1** 

Name

**Email Address** 

Phone Number

Vehicle Registration Number Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category Name of Driver

RAJA GOPAL

96463146

NRIC/Passport Number

Contact Number

**DETAILS OF OTHER VEHICLE PROPERTY 1** GY233E

ROAD: 9 SIMEI STREET 2, POSTCODE: 529914, COUNTRY:

Page 2 of 28

COMMERCIAL VEHICLE

FIVE FOOD PATH PTE LTD

#### Sketch Plan Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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.
- 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 mypersonal 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:
  - processing, handling ani/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 disdosure 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name (NRIC/FIN No.

NRIC/FIN No.

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

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# POLICE REPORT





1 of 3 Report No. T/20201016/2005

Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999

Date/Time Report Made: 16/10/2020 01:19			Vide Report No.:	Station Diary No. 6
Informa	nt's Partice	ulars		
	Informant: NOOR BIN	MOHD SAID	Address: APT BLK 341 TAMPII 520341	NES STREET 33 #05-264 SINGAPORE
ID Type / ID No.: NRIC NO / S1688671H		Contact No.: Home/Office:	Mobile: 93680341	
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Age: Date of Birth: Male 54 13/12/1965		Type of Informant: Rider		
Race: Malay		Language:	Institution / School Name:	
Occupation: FREE LANCER		Driving Licence Inform	nation: Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/10/2020 16:15	Type of Location Car Park	
ANG MO KIO Weather:	AVENUE 1	Road Surface:	F	Road Speed Limit	
Traffic Flow:				Traffic Volume:	
Traffic Flow:		Traffic Control:   Not Controlled		ramc Volume:	

Туре	Make	Model	Color	Condition	No of Passenge
Motorcycle	HONDA	CB400	Black	Slightly	0
	1			1	Metavariale LIONON COVOC Dist

Details of V	ehicle Insurance			**************************************
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBF7258Y	NTUC Income Insurance Co-Operative Limited	5058375031-07	01/05/2020	30/04/2021

# POLICE REPORT



Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999



T/20201016/2005

3 of 3

Report No. T/20201016/2005

CONTINUATION OF REPORT

Sketch Pla	åΠ	ķ
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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 1 LIM YE ZHAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 16/10/2020 01:19
Officer In Charge Of Case: TP/HRT / SI NOR AFFENDY BIN JAFFAR	Classification Of Case:
Contact No.: 65476368  Authentication Stamp	7.

### POLICE REPORT



Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999



2 of 3

Report No. T/20201016/2005

CONTINUATION OF REPORT

# Brief Details.

On the 15/10/2020 at 1615hrs, I had parked my bike plate no. FBF7258Y at Blk 224 Ang mo kio Ave 1 carpark AMA 11, Lot 113 as I was doing delivery work around the area. A few mintues later, I saw my bike lying on its right side. I believe that it had been hit and run by a lorry that had parked near my bike.

I would like to state that there was one eye-witness(Raja Gopal, HP:96463146) who came forward and told me that he had witness a lorry from Five Food Path Pte Ltd however he could not see the plate clearly. There was some footage related to the incident as I had a gopro camera mounted on my bike.

