

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 Submission 16/12/2020 03:06 (SGT)
Date of Accident 09/12/2020 18:20 (SGT)
Exact Location of Accident Kranji, Singapore
Additional Location Information Kranji expressway
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBF7739B

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MOHAMMED MOKTAR BIN YUSOFF
NRIC No S6828649B
Email Address mdamzar99@gmail.com
Mobile Phone No (Phone) +65-96300401
Alternative Phone No +65-96300401

VEHICLE PARTICULARS

Manufacturer Yamaha
Model T135
Variant -
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 - Claiming third party
Vehicle Category Motorcycle

INSURANCE COMPANY

Name of Insurance Company FWD
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number PNMC2020-00001583
Cover Note Number -

DRIVER

Name of Driver MUHAMMAD AMZAR BIN MOHAMMED MOKTAR
NRIC No T0131952Z
Date Of Birth 19/10/2001
Occupation Indoor

Date Of Driving Pass	21/01/2020
Driving experience	11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90055790
Alt. Phone Number	-
Email Address	mdamzar99@gmail.com
Address	NA
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

YESTERDAY, 9/12/2020 AT AROUND 6.20PM , WHILE I WAS ON MY WAY HOME FROM WORK, IT WAS DRIZZLING & THE ROAD WAS WET. I MET INTO AN ACCIDENT AT KJE TOWARDS BKE JUST BEFORE SUNGEI TENGAH EXIT WITH A BLUE TAXI FROM COMFORTDELGRO (PLATE NUMBER SH2656C / PHONE NUMBER 86855173). I WAS RIDING IN LANE 2 FROM PIE TO KJE AND THEN CHANGED TO LANE 1 BEFORE SUNGEI TENGAH EXIT. I WAS TRAVELLING AROUND 60KM/H - 70 KM/H ON LANE 1 AND A FEW MINUTES LATER THE BLUE TAXI SUDDENLY SWERVED INTO MY LANE CAUSING HIS REAR CORNER RIGHT BUMPER TO HIT ME BY THE SIDE WHICH CAUSED ME TO FLY OFF MY MOTORBIKE AND ROLLED FOR ABOUT 3-5 METERS.

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	SH2656C
Vehicle Manufacturer	Hyundai
Vehicle Model	Ae ioniq
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	(Phone) +65-86855173
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MUHAMMAD AMZAR BIN MOHAMMED MOKTAR
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBF7739B
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**IMPORTANT NOTICE**

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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

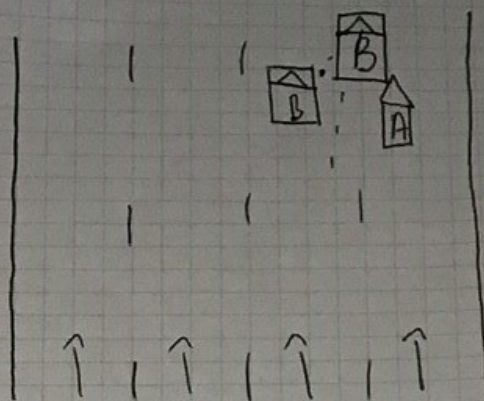
Name:

NRIC/FIN No.:

SKETCH PLAN

KJE / BKE

BK SUNGAI TENGAH Exit



A FBF 7739 B

B SH 2656 C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

DECLARATION

I declare the foregoing particulars are true in every respect.













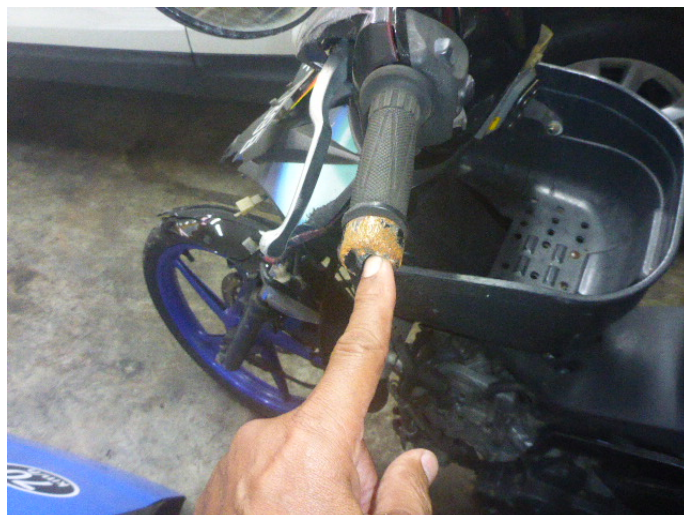


















**SINGAPORE
POLICE FORCE**



T/20201210/7035

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

1 of 3

Report No. T/20201210/7035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/12/2020 21:15		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMMAD AMZAR BIN MOHAMMED MOKTAR			Address: 246 BANGKIT ROAD #02-296 SINGAPORE 670246		
ID Type / ID No.: NRIC NO / T0131952Z			Contact No.: Home/Office: Mobile: 90055790		
Nationality: SINGAPORE CITIZEN			Email: MDAMZAR99@GMAIL.COM		
Sex: Male	Age: 19	Date of Birth: 19/10/2001	Type of Informant: Rider		
Race: Javanese			Language: English		Institution / School Name:
Occupation: Student			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 09/12/2020 18:20	Type of Location: Straight Road
Location: KRANJI EXPRESSWAY				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBF7739B	Motorcycle	YAMAHA	Spark T135	Black	Seriously Damaged	0
SH2656C	Car	HYUNDAI	ioniq	Blue	Slightly Damaged	1



**SINGAPORE
POLICE FORCE**



T/20201210/7035

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

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Report No. T/20201210/7035

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBF7739B	FWD Singapore Pte. Ltd	PNMC2020-00001583	25/05/2020	24/05/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD AMZAR BIN MOHAMMED MOKTAR	ID No.	T0131952Z
Related Vehicle	FBF7739B (Motorcycle)	Contact No.	90055790
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry	Class: 2B Date of Expiry: NIL
Date	09/12/2020		Date10/12/2020
No. of Days granted Medical Leave	23	Degree of	Slight

Brief Details.

Yesterday, 9/12/2020, at around 6.20pm, while I was on my way home from work, it was drizzling & the road was wet. I met into an accident at KJE Towards BKE just before Sungei Tengah Exit with a blue taxi from ComfortDelGro (plate number SH2656C / phone number 86855173). I was riding in lane 2 from PIE to KJE and then changed to lane 1 before Sungei Tengah exit. I was travelling around 60km/h - 70 km/h on lane 1 and a few minutes later the blue taxi suddenly swerved into my lane causing his rear corner right bumper to hit me by the side which caused me to fly off my motorbike and rolled for about 3-5 metres.



**SINGAPORE
POLICE FORCE**



T/20201210/7035

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

3 of 3

Report No. T/20201210/7035

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:
TP / TPIB /
MOHAMMAD ABDILLAH BIN PALIL
Contact No.: 65476246

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:
10/12/2020 21:15

Classification Of Case:



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

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 : SA0A20CF000T Vehicle Registration No: FBF7739B
Name (as shown in NRIC) : MUHAMMAD AMZAR BIN MOHAMMED MOKTAR NRIC / FIN / Passport No :
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Singapore ()
Contact (Tel) : Mobile No. : 90055790
Email Address :
Date of Accident : 09/12/2020 Time of Accident : 18:20HRS
Place of Accident : Kranji expressway
Insurance Company : FWD

(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:

ATTACH PHOTOS

Policyholder / Driver's Signature
Date:

MEILIN CHAI
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: G7422715K
Date: 16 DEC 2020



YOUR THIRD PARTY FIRE & THEFT MOTORCYCLE INSURANCE SUMMARY

Please call **+65-6322-2072** for FWD Emergency Assistance
if Your Motorcycle breaks down or is involved in an accident.
All accidents must be reported within 24 hours or by the next working day of the incident
regardless of whether it will lead to a claim.

POLICY NUMBER : PNMC2020-00001583

About this policy

Premium paid : S\$342.07 Coverage start date : 25/05/2020
(Inclusive of GST) Coverage end date : 24/05/2021
Who is insured to ride: : You only and any Authorised Rider

About you (As the policyholder)

Your name : Mohammed Moktar Bin Yusoff
Address : 246 Bangkit Road 02-296 Singapore 670246
Email : mdmoktar@gmail.com
NRIC/FIN : S6828649B
Current no claims discount : 0% Gender : Male
Years of riding experience : >=3 Mobile Number : 96300401
Date of birth : 08/09/1968 Certificate of merit : No

About your motorcycle

Motorcycle make and model : Yamaha T135 Spark
Motorcycle plate number : FBF7739B Year of first registration : 2001
Overseas Booster : No Authorised rider : Yes
Daily transport allowance : No Hospitalisation expenses due to accident : No
Issued on : 18/04/2020

Khor Kee Eng
Chief Executive Officer
FWD Singapore Pte Ltd

Please refer to contract for specific terms, conditions
and exclusions of this policy.

Please immediately inform us at **+65-6820-8888**
or email us at **contact.sg@fwd.com** if any details in
this Motorcycle Insurance Summary needs to be changed.