

208217003

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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	19/01/2021 16:44 (SGT)
Date of Accident	19/01/2021 11:55 (SGT)
Exact Location of Accident	Bukit Merah Lane 3, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE6588G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	STEVE ARIFianto BIN ABDULLAH
NRIC No	SXXXX551C
Email Address	sona10@live.com
Mobile Phone No	(Phone) +65-91665285
Alternative Phone No	+65-97312995

VEHICLE PARTICULARS

Manufacturer	Piaggio
Model	GILERA
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
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	MSIG
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	MSD/VMT/20-51021-WTT
Cover Note Number	-

DRIVER

Name of Driver	MAS SUPIAH BIN SHAMSUDIN
NRIC No	SXXXX164B

Date Of Driving Pass	18/12/2008
Driving experience	12 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97312995
Alt. Phone Number	-
Email Address	sona10@live.com
Address	BLK 339C KANG CHING ROAD #06-340
Address complement	-
Postcode	613339
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Sibling
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

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?	No
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	Queenstown Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004719999
Alt. Police Station Phone No	(Fax) +65-64715299
Police Station Address	No. 3 Queensway #01-03 Singapore 149073
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFK9328S
Vehicle Manufacturer	Mitsubishi
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MATTHEW DOYLE HANEN

Contact Number	(Phone) +65-96899328
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MAS SUPIAH BIN SHAMSUDIN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	FBE6588G
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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.

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

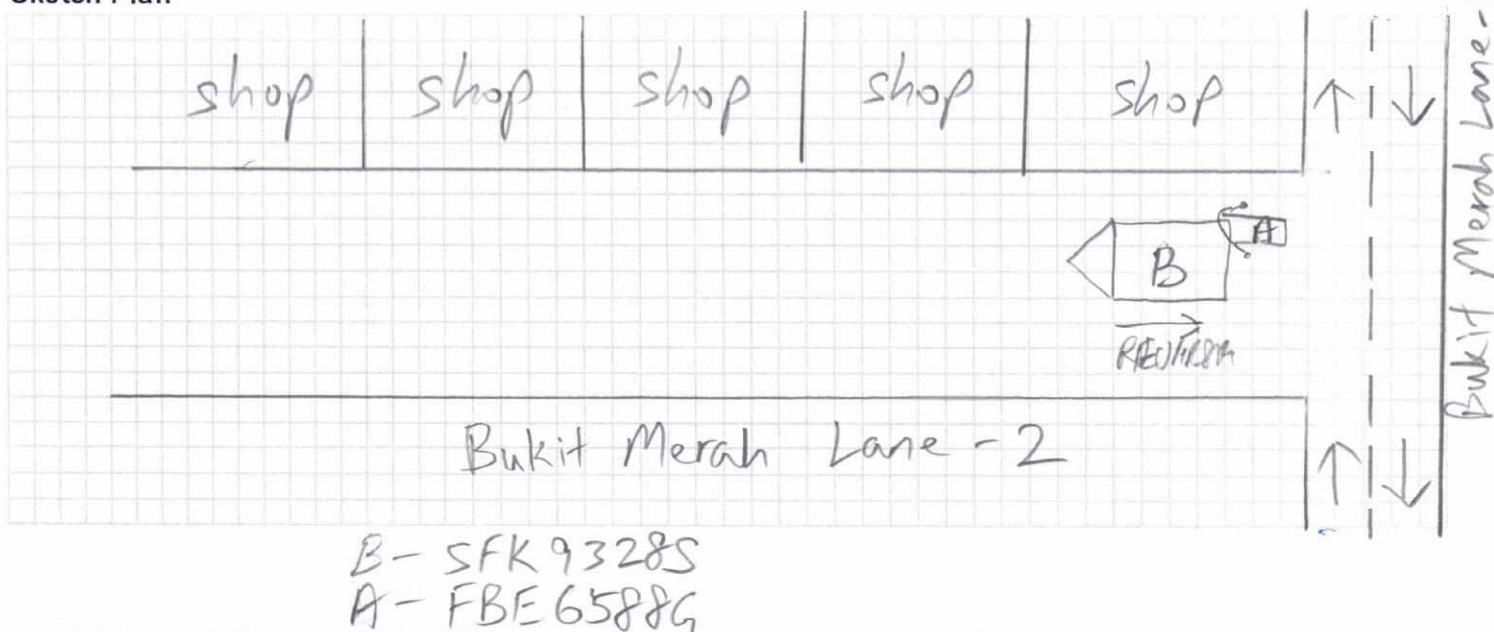
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

REFR TO Police Report 7/2020 01/9/2045

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

19.01.21 - 2.35PM

Witnessed by Reporting Centre Personnel

19/01/2021

ACCIDENT STATEMENT

ACCIDENT DATE: (19/01/2021) (DD/MM/YYYY), TIME: (11:55) (HH:MM)

LOCATION: BUKIT MERAH LANE 3

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: TBE 6588G
 b) INSURANCE COMPANY: MSICA
 c) POLICY NUMBER: 501580 510421
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Piaggio Runner 200
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Working
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: Steve Arifianta Bin Abdullah (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 57811551C CONTACT: 91665285
 c) ADDRESS: Apt. Bk 155 Mei Ling Street # 11-285 S(14055)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Mas Supiah Bin Shamsudin (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 58442164B CONTACT: 97312995
 c) ADDRESS: Apt. Bk 339C Kang Ching Road # 06-340 S(613339)

- * d) DATE OF BIRTH: (24/11/1984) (DD/MM/YYYY)
 e) OCCUPATION: (INDOOR / OUTDOOR) Delivery Assistance
 f) DATE OF DRIVING PASS: 18 Dec 2008

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Brother

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) Clear
 b) ROAD SURFACE: (DRY / WET / OTHERS) Dry

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)
 IF YES, PLEASE STATE WHICH POLICE STATION: Queenstown N.P.C.

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SSK SFK 9328S MODEL: Mitsuba Mitsubishi
 b) DRIVER'S NAME: Matthew Roy Ho Jianen
 c) NRIC/FIN/PASSPORT: 599193142 CONTACT: 96989328

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: MODEL:
 e) DRIVER'S NAME: CONTACT:
 f) NRIC/FIN/PASSPORT: CONTACT:

Email: sona10@live.com

VIDEO —



SINGAPORE POLICE FORCE



T/20210119/2045

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

1 of 3

Report No. T/20210119/2045

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/01/2021 13:47		Vide Report No.:		Station Diary No.: 25	
Informant's Particulars					
Name of Informant: MAS SUPIAH BIN SHAMSUDIN			Address: APT BLK 339C KANG CHING ROAD #06-340 SINGAPORE 613339		
ID Type / ID No.: NRIC NO / S8442164B			Contact No.: Home/Office: Mobile: 97312559		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 36	Date of Birth: 24/11/1984	Type of Informant: Rider		
Race: Indian			Language:		Institution / School Name:
Occupation: DELIVERYMAN			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 19/01/2021 11:50	Type of Location: Straight Road
Location: BUKIT MERAH LANE 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE6588G	Motorcycle				Slightly Damaged	0
SFK9328S	Car				Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20210119/2045

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

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Report No. T/20210119/2045

CONTINUATION OF REPORT

Rider			
Name	MAS SUPIAH BIN SHAMSUDIN	ID No.	S8442164B
Related Vehicle	FBE6588G (Motorcycle)	Contact No.	97312559
Hospital/Clinic	FONG CLINIC	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	19/01/2021	Date Discharge	19/01/2021
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the 19/01/2021 at about 1150hrs, I was travelling inside Bukit Merah Lane, inside the industrial motors area with my motorbike FBE6588G. I was behind a vehicle SFK9328S which had just passed the entrance gantry. Subsequently, it was my turn and I had entered the gantry shortly after. I noticed that there were no other vehicles in front of the car. After I had passed the gantry, subsequently the mentioned vehicle had suddenly reversed and I was not able to do anything to avoid it as it happened very suddenly. Due to that, the mentioned vehicle's rear bumper had hit onto the front of my motorbike and had caused me and my motorbike to fall. The driver had then went out of the vehicle and assisted me. We had then agreed to settle the matter through insurance and I had went to seek medical attention at Fong Clinic and I was given 3 Days MC from 19/01/2021 till 21/01/21. I had suffered swollen left leg due to the fall on the left hand side.



SINGAPORE
POLICE FORCE



T/20210119/2045

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

3 of 3

Report No. T/20210119/2045

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:
D /
Sgt 2 MOHAMAD FARHAN BIN MOHAMED

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
Sgt 3 MUHAMMAD RIZWAN BIN KAMALUDIN
Contact No.: 65476185

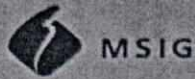
Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
19/01/2021 13:47

Classification Of Case:

is made on 16/7/2020
and Friendship Motor Company, for
the sale of vehicle to the buyer
details
FBE 65886 MAKE MODEL
4/31-
Mr. Steve Abdwlah
refinancing of the borrower
W 727499



MSIG Insurance (Singapore) Pte. Ltd. (Co Reg No. 200412212G)
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
msig.com.sg

CERTIFICATE OF INSURANCE

Road Transport Act 1987 (Malaysia), Road Transport (Amendment) Act 2019 (Malaysia)
The Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)
The Motor Vehicles (Third Party Risks and Compensation) Act (CAP. 189 of the Revised Edition) (Republic of Singapore)
The Motor Vehicles (Third Party Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)
Or any Amendment, Act or Acts passed in substitution thereof.

- CERTIFICATE NO : MSD/VMT/20-510421-WTT A0633-001/W0806
- SUM INSURED : TPL
EXCESS : NIL
1. Index mark and Registration Number of Vehicle S7811551C
FBE6588G
GILERA RUNNER 200 c.c.
2. Name of Policyholder STEVE ARIFianto BIN ABDULLAH
3. Effective date of the Commencement of Insurance
for the purposes of the Act 1524PM 16/07/2020
4. Date of Expiry of Insurance 15/07/2021
5. Persons or Classes of Persons entitled to drive
a. The Policyholder.
b. MAS SUPIAH BIN SHAMSUDIN ONLY
Provided that the person driving is permitted in accordance with the licensing
or other laws or regulations to drive the Motor Vehicle or has been so permitted
and is not disqualified by order of a Court of Law or by reason of any enactment
or regulation in that behalf from driving the Motor Vehicle. And provided further that
the Motor Vehicle is registered and licensed under the Road Traffic Act and its
registration and licensing under the Road Traffic Act has not been cancelled at the
time of the accident loss or damage.
6. Limitation as to Block 125 Bukit Merah Lane 1
Use for social, domestic and pleasure purposes and in
connection with the Policyholder's business or profession.
#01-168, Singapore 150125
Tel: 62742122 / 62786717
7. The Policy does not cover
1. Use for hire or reward.
2. Use for racing, pace-making, reliability trial or speed-testing.
3. Use for the carriage of goods (other than samples) in
connection with any trade or business.
4. Use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter. 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.