

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	03/11/2020 15:43
Date Of Accident	31/10/2020 18:00
Exact Location Of Accident	147 UPPER PAYA LEBAR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBQ8774J
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD ASHRAFFIL BIN ARSAD
NRIC No	S9626020B
Email Address	MUHAMMADASHRAFFIL43@GMAIL.COM
Mobile Phone No	(LOCAL) +65-87939626
Alternative Phone No	OFFICE-87939626

Vehicle Particulars

Manufacturer	HONDA
Model	SUPRA GTR 150-149CC
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	D20MTMC01000242
Cover Note Number	

Driver

Name of Driver	MUHAMMAD ASHRAFFIL BIN ARSAD
NRIC No	S9626020B
Date Of Birth	26/07/1996
Occupation	OUTDOOR
Date Of Driving Pass	16/12/2019
Driving Experience	0 YEAR AND 10 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-87939626
Fax Number	
Contact Number	OFFICE-87939626
EEmail Address	MUHAMMADASHRAFFIL43@GMAIL.COM

Address	BLK 3 JALAN BUKIT MERAH #07-5116
Postcode	150003
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	COLLISION - OPENING DOOR OF VEHICLE
Weather Conditions	RAINING
Road Surface	WET

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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ALJUNIED NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 13 JOO SENG ROAD , POSTCODE: 360013 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2809999 - FAX NO: 62815960
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO THE POLICE REPORT (T/20201102/2095) & SKETCH PLAN FOR ACCIDENT DETAIL.

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	SME1303P
Vehicle Make/Model/Colour	-
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 INJURED PERSON 1

Name MUHAMMAD ASHRAFFIL BIN ARSAD

Approximate Age

Injuries Sustain -

Injured person in which vehicle? FBQ8774J

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address -

Postcode -

Accident Sketch Plan

SKETCH PLAN

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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.
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:

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



 Reporting Centre Personnel's Signature
 Name: **ABI TAN**
 NRIC/FIN No.: **S XXXX369I**

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201102/2095

Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

1 of 3

Report No. T/20201102/2095

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/11/2020 16:22	Vide Report No.: E/20201031/0161	Station Diary No.: 26
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Informant's Particulars

Name of Informant: MUHAMMAD ASHRAFFIL BIN ARSAD		Address: APT BLK 3 JALAN BUKIT MERAH #07-5116 SINGAPORE 150003	
ID Type / ID No.: NRIC NO / S9626020B		Contact No.: Home/Office: Mobile: 87939626	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 24	Date of Birth: 26/07/1996	Type of Informant: Rider
Race: Malay		Language: English	Institution / School Name:
Occupation: Motorcycle delivery man		Driving Licence Information: Class: 2B	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 31/10/2020 18:00	Type of Location: Straight Road
Location: PAYA LEBAR STREET				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBQ8774J	Motorcycle	HONDA	SUPRA GTR 150 MANUAL	Red		0
SME1303P	Car					1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201102/2095

Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

2 of 3

Report No. T/20201102/2095

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBQ8774J	TENET SOMPO INSURANCE PTE. LTD.	D20MTMC0100024 2	03/01/2020	02/01/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	MUHAMMAD ASHRAFFIL BIN ARSAD	ID No.	S9626020B	
Related Vehicle	FBQ8774J (Motorcycle)	Contact No.	87939626	
Hospital/Clinic	RAFFLES MEDICAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL	
Date Treatment	31/10/2020	Date Discharge	NIL	
No. of Days granted Medical Leave	04	Degree of Injury	Slight	

Brief Details.

On 31/10/2020 at about 6.p.m, I was riding my motorcycle bearing vehicle registration number, FBQ8774J along the Upper Paya Lebar Street after collecting food for delivery. While travelling along 147 Upper Paya Lebar Street, there was traffic congestion whereby a car bearing vehicle registration number, SME1303P (V1) was in front of me.

I rode slowly along the left side of the road after assessing that it was spacious enough. While riding past the left side of V1, the left passenger of V1 suddenly opened the door and hit me, caused to loss control of my motorcycle. I fell towards the left and motorcycle toppled onto my right knee and ankle.

Later, I was conveyed by ambulance.

I am lodging this report as advised traffic police officer.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20201102/2095

Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

3 of 3
Report No. T/20201102/2095

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: E / Sgt 3 TEOH PREECHA
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIT / SI VILTON HIA WEE SIANG Contact No.: 65476232 SN 29

Signature Of Informant:
Date/Time: 02/11/2020 16:22
Classification Of Case:

Authentication Stamp NP168
SIGNATURE

03-01-20;11:43 ;

1/ 1



Sompo Insurance Singapore Pte. Ltd.
89 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048523
Tel: 6461 6885 | Fax: 6221 3302 | Website: www.sompo.com.sg
Co. Reg. No.: 102905490E | GST Reg. No.: M29000100

Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES,1960
ROAD TRANSPORT ACT,1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES,1959 (MALAYSIA)

Cert No./Policy No. : D2DMTMC01000242
Insured : MUHAMMAD ASHRAFFIL BIN ARSAD
Motor Vehicle (Regn No.) : FBQ8774J
Cover : Third Party, Fire & Theft
Policy Commencement Date : 03 JANUARY 2020 11:43
Policy Expiry Date : 02 JANUARY 2021 23:59
Maximum Liability (Section I) : Market value at time of loss
Excess* : \$300 - Section I
Namad Driver 1 : MUHAMMAD ASHRAFFIL BIN ARSAD
HIRE PURCHASE OWNER : YEW HENG CREDIT ENTERPRISE PTE LTD

* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*
MUHAMMAD ASHRAFFIL BIN ARSAD

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 under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purposes and
(a) by the insured in person in connection with his business or profession or
(b) in connection with the insured's business or profession

The Policy does not cover

- (i) Use for hire or reward
- (ii) Use for racing pacemaking, reliability trial or speed-testing
- (iii) Use for the carriage of goods (other than samples) in connection with any trade or business
- (iv) Use for any purpose in connection with the Motor Trade

Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

For list of Accident Reporting Centres, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 5461 6555.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Transport Act, 1987 (Malaysia); and (2) the policy terms, conditions and exceptions of the Motorcycle Policy (RM3CYC-MTMC.03)

Sompo Insurance Singapore Pte. Ltd.

Authorised Signatory

Date/Time of Issue : 03 JANUARY 2020 11:43

IMPORTANT NOTICE

- Keep the Certificate in your Motor Vehicle;
- Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act;
- On the sale of the Motor Vehicle or if for any reason the insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
- This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 11E07901 & ENSURE PTE. LTD. (MOTORCYCLE) CI Code: MY3 JJOPHHM_DYMYAJ

MC



MEDICAL CERTIFICATE

NRIC	: S96260208	VISIT DATE	: 31 Oct 2020 (19:12)
NAME	: MUHAMMAD ASHRAFFIL BIN ARSAD	VISIT NO	: G09620029514

This is to certify that the above mentioned has been given:

OUTPATIENT SICK LEAVE for 4 days from 31 Oct 2020 to 03 Nov 2020

DOCTOR : NG KWEI TEO (M09106E)
CLINIC : 24 HR EMERGENCY CLINIC
ADDRESS : 585 NORTH BRIDGE ROAD LEVEL -01-00 RAFFLES HOSPITAL 188770

This certificate is not valid for absence from court or other judicial proceedings unless specifically stated. Printed: 31 Oct 2020, 09:09PM
*This certificate is electronically generated. No signature is required.



Raffles Connect

- Download RafflesConnect to:
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 - Request eQueue before coming to GP clinic
 - Book an appointment for GP phone consult
 - More features ...



Medicine Delivery

- Medicine Delivery Service:
- Scan QR Code to request online.

RafflesHospital
24 HR EMERGENCY
 585 North Bridge Road
 Raffles Hospital #01-00 Singapore 188770
 Tel: (65) 6334 1111 | Fax: (65) 6334 1182

Raffles Medical Group Ltd | Company Registration No: 198901967K | GST Registration No: M9-0000467-N

Accident Photo



Accident Photo



Accident Photo



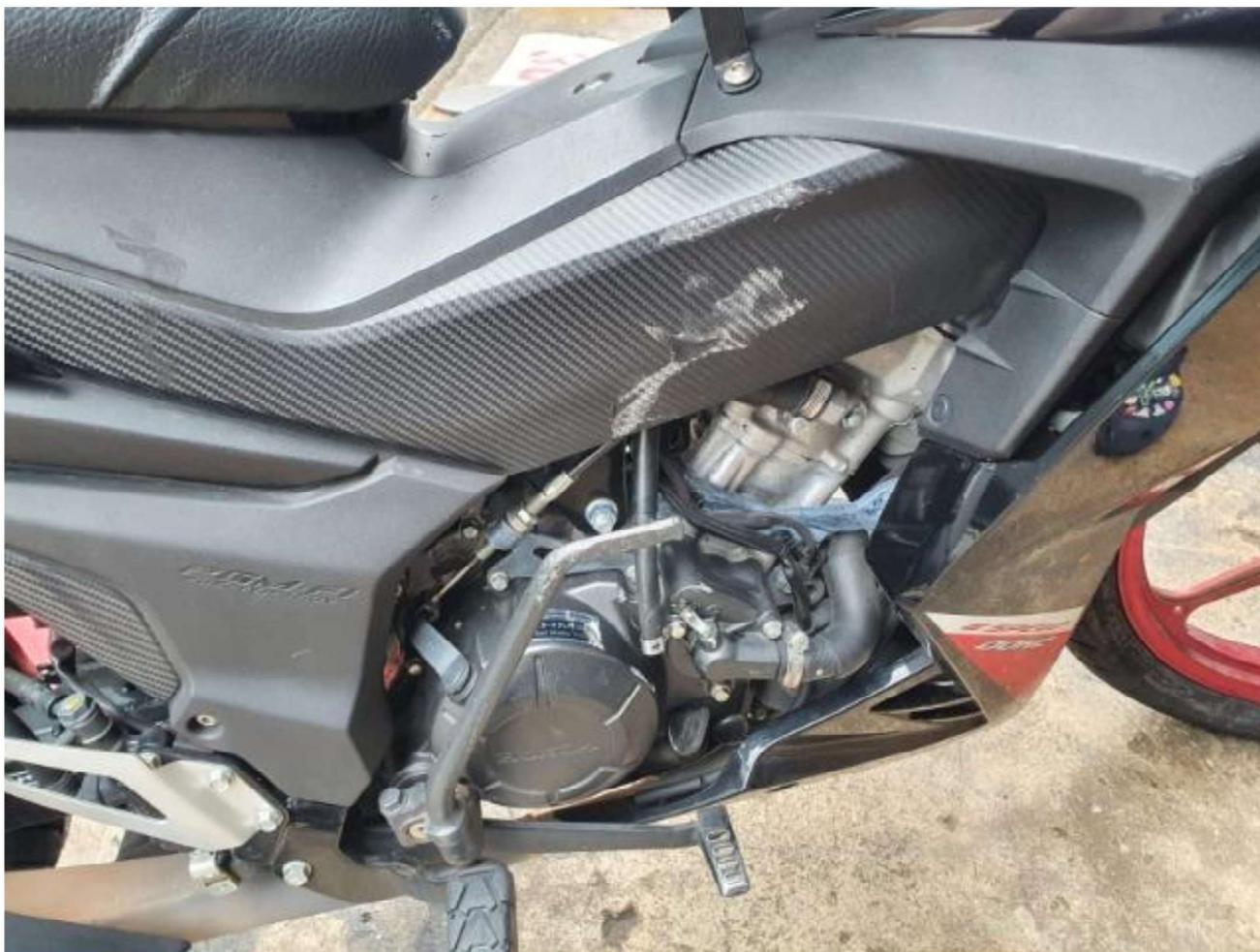
Accident Photo



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