

# 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 11:40 (SGT)  
Date of Accident ..... 18/01/2021 11:34 (SGT)  
Exact Location of Accident ..... Tampines, Singapore  
Additional Location Information ..... OLD TAMPINES ROAD  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... FBN5914H

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... MUHAMMAD AFIQ BIN ABDUL RAZAK  
NRIC No ..... S9630303C  
Email Address ..... MUHDAFIQ06@HOTMAIL.COM  
Mobile Phone No ..... (Phone) +65-92374606  
Alternative Phone No ..... (Home) +65-92374606

### VEHICLE PARTICULARS

Manufacturer ..... Yamaha  
Model ..... TFX150  
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 ..... NTUC  
Type of Coverage ..... ThirdParty  
Fleet Policy ..... No  
Policy Number ..... 5105297064-02 (TP)  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... MUHAMMAD AFIQ BIN ABDUL RAZAK  
NRIC No ..... S9630303C  
Date Of Birth ..... 27/08/1996  
Occupation ..... Indoor

Date Of Driving Pass .....	13/10/2016
Driving experience .....	4 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-92374606
Alt. Phone Number .....	(Home) +65-92374606
Email Address .....	MUHDAFIQ06@HOTMAIL.COM
Address .....	APT BLK 672A YISHUN AVENUE 4 #03-520
Address complement .....	-
Postcode .....	761672
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
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 - Major/Minor Rd
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 .....	Bedok Division Headquarters
Police Station Phone No .....	(Phone) +65-18002440000
Alt. Police Station Phone No .....	(Fax) +65-64443009
Police Station Address .....	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT

#### 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 .....	SMC6531A
Vehicle Manufacturer .....	Hyundai
Vehicle Model .....	Elantra
Vehicle Variant .....	-
Vehicle Colour .....	Black
Vehicle Category .....	Private car
Name of Driver .....	NGO SUK MOI
NRIC No .....	S2559833D

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

## INJURED PERSONS DETAILS


### INJURED 1

Name of injured person ..... MUHAMMAD AFIQ BIN ABDUL RAZAK  
 Address ..... -  
 Address Complement ..... -  
 Post Code ..... -  
 Approximate Age Years Old ..... -  
 Injuries Sustained ..... -  
 Injured person in which vehicle? ..... FBN5914H  
 Were seat belts worn? ..... -  
 Was this injured conveyed to hospital by ambulance? ..... No

**SKETCH PLAN****IMPORTANT NOTICE**

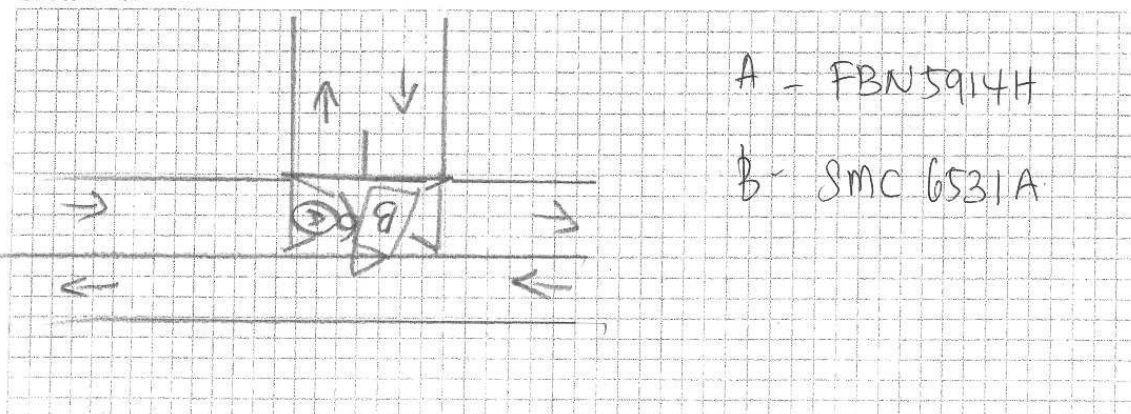
1. Please report **correctly** the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

IDAC KAKI BUKIT (VAC)  
23 Kaki Bukit Ave 4 #02-02  
Singapore 415933  
Tel: 67416697 Fax: 67492305  
Email: vackb@vicom.com.sg

  
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**



Refu to police report.

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

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

Witnessed by Reporting Centre  
Personnel







































**SINGAPORE  
POLICE FORCE**



G/20210118/7279

1 of 3

**POLICE REPORT (NP299)**

Report No. G/20210118/7279

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No:1800-2440000

Date/Time Report Made 18/01/2021 21:42	Vide Report No.	Station Diary No.
Name Of Informant MUHAMMAD AFIQ BIN ABDUL RAZAK	Address 672A YISHUN AVENUE 4 #03-520 SINGAPORE 761672	
ID Type / ID No. NRIC NO / S9630303C	Contact No. Home/Office:	Mobile: 92374606
Nationality SINGAPORE CITIZEN	Email Address MUHDAFIQ06@HOTMAIL.COM	
Occupation Prison officer	Sex Male	Age 24
Institution/School Name	Date of Birth 27/08/1996	Race Malay
Date/Time Of Incident 18/01/2021 11:35 - 18/01/2021 13:10	Location Of Incident OLD TAMPINES ROAD	

**Brief details.**

On 18th January 2021, at about 1134hrs, I, Muhammad Afq Bin Abdul Razak (S9630303C) met into an accident on a T-Junction between Old Tampines Road and Toh Close. I was riding on my red motorcycle, model TFX150 (FBN5914H) on Old Tampines Road. My motorcycle collided on the side of a black car, model Hyundai Elantra (SMC6531A) which was making a right turn from Toh Close. The name of the driver is Ms. Ngo Suk Moi (S2559833D) and she had a passenger, Ms. Theresa Teo. I was not having a pillion at the time of accident. After the collision, I called the police and a passerby called for an ambulance. We took pictures of the accident scene and our vehicles. Ms. Ngo Suk Moi and I exchanged particulars.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/01/2021 21:42
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp





**SINGAPORE  
POLICE FORCE**



G/20210118/7279

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210118/7279

Upon arrival of the ambulance, the paramedic attended to me. The paramedic's assessment was that my injuries are superficial. I suffered a cut on my gum, abrasions and bruises on my elbows and legs. Therefore, I decided not to take the ambulance. Officer Mohd Zainudin from Traffic Police arrived and took our particulars. Officer Mohd Zainudin advised us that it was a minor accident and police report was not necessary at the moment. He advised us to proceed with GIA. I was told that Ms. Ngo Suk Moi's vehicle has a surveillance footage.

I went to Khoo Teck Puat Hospital A&E at 1549hrs to seek further medical attention and I received 5 days medical certificate from 18/01/2021 to 22/01/2021 for my sustained injuries. Hence, I am lodging a police report.

Subjects Involved			
Victim			
Person Name	MUHAMMAD AFIQ BIN ABDUL RAZAK		
ID Type	NRIC NO	ID No	S9630303C
Gender	Male	Age	24
Race	Malay	Language	English
Occupation	Prison officer	Address	672A YISHUN AVENUE 4 #03-520 SINGAPORE 761672
Mobile No	92374606	Is Informant A Victim?	Yes
Person Name	MUHAMMAD AFIQ BIN ABDUL RAZAK (Informant)		

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter:	Date/Time:
Not applicable	18/01/2021 21:42
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE  
POLICE FORCE**

G/20210118/7279

3 of 3

**POLICE REPORT (NP299)****CONTINUATION OF REPORT**

Report No. G/20210118/7279

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Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/01/2021 21:42
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	