

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 17/02/2021 15:12 (SGT)
Date of Accident 13/02/2021 21:05 (SGT)
Exact Location of Accident Queensway, Singapore
Additional Location Information TOWARDS AYE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FY5826Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner AMIRUL NIZAM BIN JASNI
NRIC No TXXXX963C
Email Address amirulnizamjasni@gmail.com
Mobile Phone No (Phone) +65-81615043
Alternative Phone No +65-81615043

VEHICLE PARTICULARS

Manufacturer Honda
Model Cb400sf4j
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 5120884527
Cover Note Number -

DRIVER

Name of Driver AMIRUL NIZAM BIN JASNI
NRIC No TXXXX963C
Date Of Birth 21/10/2000
Occupation Indoor

Date Of Driving Pass	07/01/2021
Driving experience	1 MONTH
Gender	Male
Mobile Number	(Phone) +65-81615043
Alt. Phone Number	+65-81615043
Email Address	amirulnizamjasni@gmail.com
Address	BLK 104B DEPOT ROAD #02-559
Address complement	-
Postcode	102104
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 - Change/cross lane
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	Clementi Division Headquarters
Police Station Phone No	(Phone) +65-18007740000
Alt. Police Station Phone No	(Fax) +65-67741705
Police Station Address	20 Clementi Avenue 5 Singapore 129858
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT D/20210213/7014

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	FBC4278A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	-
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 AMIRUL NIZAM BIN JASNI
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained SERIOUS INJURIES
Injured person in which vehicle? FY5826Z
Were seat belts worn? -
Was this injured conveyed to hospital by ambulance? Yes

SKETCH PLAN**IMPORTANT NOTICE**

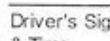
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**


I understand, acknowledge, agree and consent that:

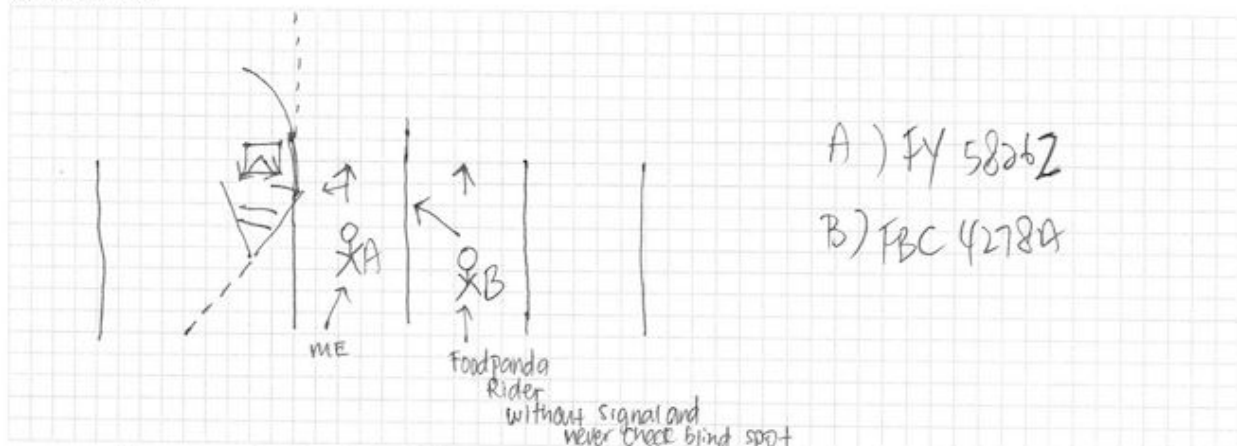
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

REFER TO POLICE REPORT D/20210213/7014

Declaration

We declare the foregoing particulars are true in every respect.

X 

Policyholder's Signature / Date & Time

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

 17/02/2021
Witnessed by Reporting Centre Personnel



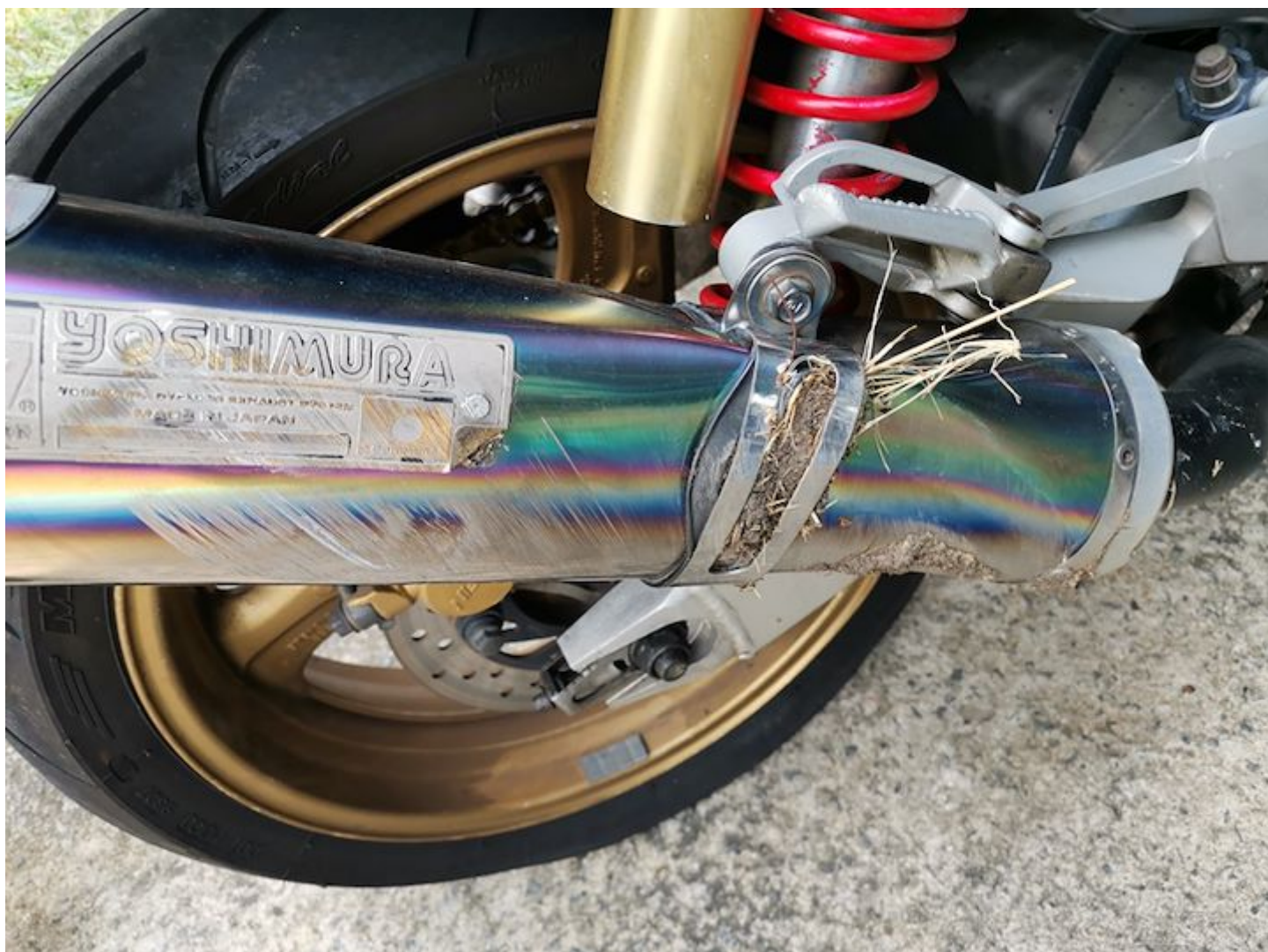






























**SINGAPORE
POLICE FORCE**



D/20210213/7014

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POLICE REPORT (NP299)

Report No. D/20210213/7014

Police Station Of Origin
Clementi Division HQ
20 Clementi Avenue 5 SINGAPORE 129858
Tel No:1800-7740000

Date/Time Report Made 13/02/2021 14:33	Vide Report No.	Station Diary No.
Name Of Informant AMIRUL NIZAM BIN JASNI	Address 104B DEPOT ROAD #02-559 SINGAPORE 102104	
ID Type / ID No. NRIC NO / T0035963C	Contact No. Home/Office:	Mobile: 81615043
Nationality SINGAPORE CITIZEN	Email Address AMIRULNIZAMJASNI@GMAIL.COM	
Occupation National Service Full Time	Sex Male	Age 20
Institution/School Name	Date of Birth 21/10/2000	Race Malay
Date/Time Of Incident 12/02/2021 21:05 - 12/02/2021 21:20	Location Of Incident QUEENSWAY	

Brief details.

The incident happened on 12Feb2021 at about 9.05pm, I was on my way home from holland as I bought dinner for my family members. It happened so quickly as I can recall, I was going towards merging lane and keeping to the left lane towards Queensway and I suddenly saw this man on my right suddenly swerve in with his motorbike(FBC4278A) towards my lane. The next thing I remember is him colliding onto my motorbike. I suffered multiple abrasion, pain on rib cage and deep cuts to my left leg. I was given 1 week mc from 12Feb-18Feb and doctor suggested surgery for the deep cuts as he was worried there would be an infection in the wound. I am writing this for report and follow up purposes.

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: 13/02/2021 14:33
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	



**SINGAPORE
POLICE FORCE**



D/20210213/7014

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20210213/7014

Subjects Involved			
Suspect			
Person Name	Unknown		
ID Type	OTHERS / FBC4278A	ID No	FBC4278A
Victim			
Person Name	AMIRUL NIZAM BIN JASNI		
ID Type	NRIC NO	ID No	T0035963C
Gender	Male	Age	20
Race	Malay	Language	English
Occupation	National Service Full Time	Address	104B DEPOT ROAD #02-559 SINGAPORE 102104
Mobile No	81615043	Is Informant A Victim?	Yes
Person Name AMIRUL NIZAM BIN JASNI (Informant)			

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: 13/02/2021 14:33
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