

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 19/02/2021 16:19 (SGT)
Date of Accident 17/02/2021 15:35 (SGT)
Exact Location of Accident Changi South Street 3, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBC7367G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MOHAMED AZNI BIN MOHAMED SANI
NRIC No SXXXX406J
Email Address NANIBOY02021985@GMAIL.COM
Mobile Phone No (Phone) +65-87259639
Alternative Phone No +65-87259639

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 NTUC
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number 5118930881
Cover Note Number -

DRIVER

Name of Driver MOHAMED AZNI BIN MOHAMED SANI
NRIC No SXXXX406J
Date Of Birth 02/02/1985
Occupation Outdoor

Date Of Driving Pass	06/08/2009
Driving experience	11 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87259639
Alt. Phone Number	+65-87259639
Email Address	NANIBOY02021985@GMAIL.COM
Address	BLK 299A TAMPINES STREET 22
Address complement	#04-608
Postcode	521299
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	Side Swipe
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?	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

PLS REFER TO THE POLICE REPORT:T/20210219/2026

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	GBF2204K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	MOHAMED AZNI BIN MOHAMED SANI
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY & LEG
Injured person in which vehicle?	FBC7367G
Were seat belts worn?	No
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")

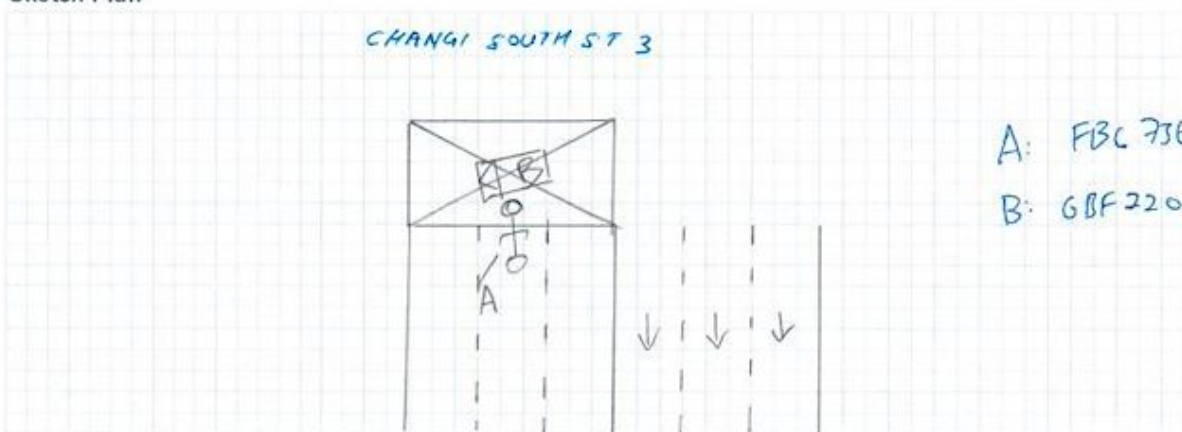
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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

 19/02/21
Witnessed by Reporting Centre Personnel

Sketch Plan

Refer to Police Report
T/20210219/2026

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**



T/20210219/2026

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

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Report No. T/20210219/2026

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBC7367G	NTUC Income Insurance Co-Operative Limited	5118930881	05/09/2020	04/09/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMED AZNI BIN MOHAMED SANI	ID No.	S8504406J
Related Vehicle	FBC7367G (Motorcycle)	Contact No.	87259639
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	17/02/2021	Date Discharge	17/02/2021
No. of Days granted Medical Leave	03	Degree of Injury	NIL

Brief Details.

ON THE STATED DATE, TIME AND LOCATION

ON THE 17TH OF FEBRUARY 2021, AT APPROXIMATELY 1535 HOURS. I WAS RIDING THE VEHICLE BEARING A PLATE NUMBER (FBC7367G) ALONG CHANGI SOUTH AVENUE 2. I WAS ON LANE 2 AND AS I WAS TRAVELLING STRAIGHT ON AN X-JUNCTION, A VAN BEARING THE PLATE NUMBER (GBF2204K) CAME OUT OF NOWHERE AND I ACCIDENTALLY HIT THE LEFT SIDE OF HIS/HER VEHICLE AS I COULDN'T E-BRAKED ON TIME. AS A RESULT, I FELL OFF MY BIKE AND SKIDDED FOR A FEW METRES, WHICH I SUFFERED A FEW MINOR INJURIES FROM IT. I WAS HALF CONCIIOUS AFTER THE INCIDENT AND ONLY MANAGED TO REGAIN FULL CONCIIOUSNESS WHEN I WAS ALREADY AT THE HOSPITAL. AFTERWARDS, IO ABDILLAH DROPPED ME A CALL AND ASKED ME TO MAKE MY WAY TO TPHQ TO LODGE A POLICE REPORT ACCORDINGLY. THAT IS ALL

IO IN-CHARGE: IO ABDILLAH























**SINGAPORE
POLICE FORCE**



T/20210219/2026

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

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Report No. T/20210219/2026

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/02/2021 11:33		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MOHAMED AZNI BIN MOHAMED SANI			Address: 299A TAMPINES STREET 22 #04-608 TAMPINES LODGE SINGAPORE 521299		
ID Type / ID No.: NRIC NO / S8504406J			Contact No.: Home/Office: Mobile: 87259639		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 36	Date of Birth: 02/02/1985	Type of Informant: Rider		
Race: Malay			Language: English	Institution / School Name:	
Occupation: TRANSNATIONAL RIDER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 17/02/2021 15:35	Type of Location: X-Junction
Location: CHANGI SOUTH STREET 3				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBC7367G	Motorcycle	YAMAHA	T135	White		0
GBF2204K	Van	NISSAN	NV350 PANEL VAN 2.5 5MT 5DR EURO V	White		0



**SINGAPORE
POLICE FORCE**



T/20210219/2026

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

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Report No. T/20210219/2026

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBC7367G	NTUC Income Insurance Co-Operative Limited	5118930881	05/09/2020	04/09/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMED AZNI BIN MOHAMED SANI	ID No.	S8504406J
Related Vehicle	FBC7367G (Motorcycle)	Contact No.	87259639
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	17/02/2021	Date Discharge	17/02/2021
No. of Days granted Medical Leave	03	Degree of Injury	NIL

Brief Details.

ON THE STATED DATE, TIME AND LOCATION

ON THE 17TH OF FEBRUARY 2021, AT APPROXIMATELY 1535 HOURS. I WAS RIDING THE VEHICLE BEARING A PLATE NUMBER (FBC7367G) ALONG CHANGI SOUTH AVENUE 2. I WAS ON LANE 2 AND AS I WAS TRAVELLING STRAIGHT ON AN X-JUNCTION, A VAN BEARING THE PLATE NUMBER (GBF2204K) CAME OUT OF NOWHERE AND I ACCIDENTALLY HIT THE LEFT SIDE OF HIS/HER VEHICLE AS I COULDN'T E-BRAKED ON TIME. AS A RESULT, I FELL OFF MY BIKE AND SKIDDED FOR A FEW METRES, WHICH I SUFFERED A FEW MINOR INJURIES FROM IT. I WAS HALF CONCIIOUS AFTER THE INCIDENT AND ONLY MANAGED TO REGAIN FULL CONCIIOUSNESS WHEN I WAS ALREADY AT THE HOSPITAL. AFTERWARDS, IO ABDILLAH DROPPED ME A CALL AND ASKED ME TO MAKE MY WAY TO TPHQ TO LODGE A POLICE REPORT ACCORDINGLY. THAT IS ALL

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POLICE FORCE

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T/20210219/2026

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Report No. T/20210219/2026

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:
TP /
SC2 MOHAMMAD DANISH SYAH BIN MOHD
KASSIM

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sgt 2 HO JIEKANG, IVAN
Contact No.: 65476170

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
19/02/2021 11:33

Classification Of Case:



SINGAPORE
POLICE FORCE

Signature: