SV0L213P0009 / VICOM LTD (VAC) - Kaki Bukit [415933] ENTRY DATE & TIME: 25/03/2021 15:02 (SGT) SUBMITTED BY: Siti Fadhlon Abdul Kader VERSION: 1 (25/03/2021 15:02 (SGT))

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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 25/03/2021 15:02 (SGT) Date of Accident 22/03/2021 18:25 (SGT) Exact Location of Accident Singapore Additional Location Information ALONG SIMS AVENUE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBR645X

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner MUHAMMAD HAMIM BIN HUSSIEN NRIC No. S9041633B Email Address hmmhsn07@gmail.com Mobile Phone No (Phone) +65-86600773 Alternative Phone No +65-86600773

VEHICLE PARTICULARS

Manufacturer Yamaha Model YAMAHA / CZD300A / XMAX300 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 Transmission Manual CC 300

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage ThirdPartyFireTheft Fleet Policy No Policy Number Cover Note Number

DRIVER

Name of Driver MUHAMMAD HAMIM BIN HUSSIEN NRIC No. S9041633B

Date Of Birth 07/11/1990 Occupation Outdoor Date Of Driving Pass 17/03/2011 Driving experience 10 YEARS Gender Male Mobile Number (Phone) +65-86600773 Alt. Phone Number +65-86600773 Email Address hmmhsn07@gmail.com Address BLK 136 #03-1421 BEDOK RESERVOIR ROAD Address complement Postcode 470136 Is the driver the policyholder? Yes If No. Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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 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) 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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT AS PER POLICE REPORT No.G/20210323/7030; ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SHD5275A Vehicle Manufacturer Toyota Vehicle Model TOYOTA / PRIUS 5DR HATCHBACK (AUTO)

Taxi

Vehicle Variant
Vehicle Colour
Vehicle Category

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 Address	MUHAMMAD HAMIM BIN HUSSIEN BLK 136 #03-1421 BEDOK RESERVOIR ROAD
Address Complement	-
Post Code	470136
Approximate Age Years Old	30
Injuries Sustained	-
Injured person in which vehicle?	FBR645X
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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 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)

l 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' 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.

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

r) / Date V

Policyholder's Signature / Date & Time

Driver's Signalure (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel 2 5 MAR 2021

IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415933 Tel: 67416697 Fax: 67492305

Sketch Plan

PBR T TO SHIP TO THE SHIP TO T

	relactor police spood as -lackers /2020
	refer to police Roport no T/2070323/7030
	<u> </u>
-	
_	
_	

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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

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

Witnessed by Reporting Centre Personnel

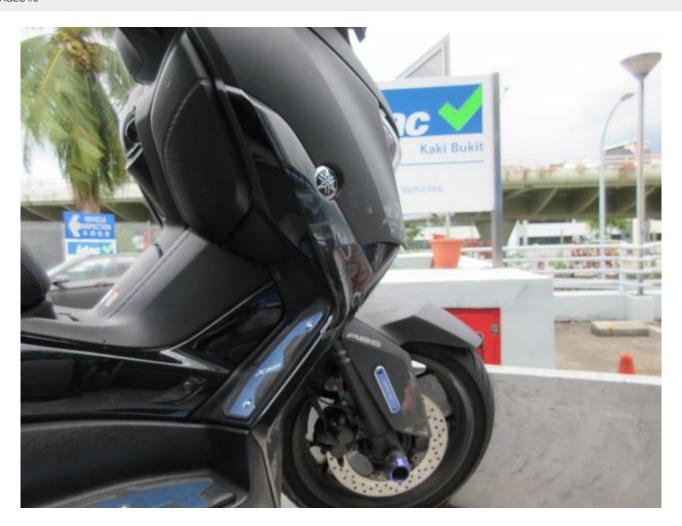
2 5 MAR 2021

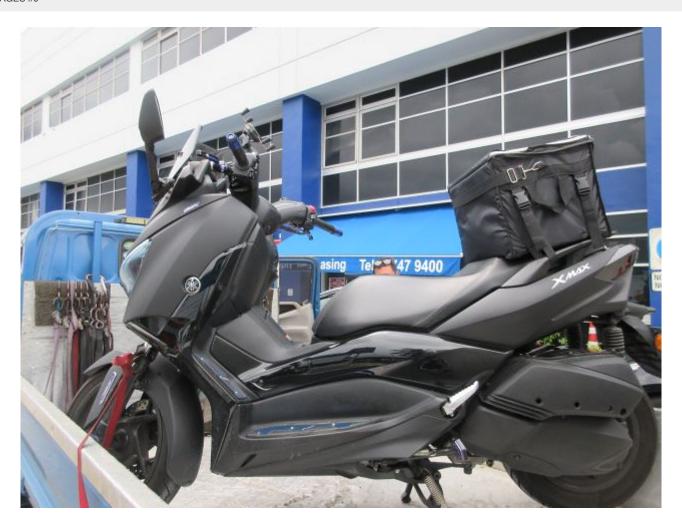




















1 of 3

Report No. G/20210323/7030

POLICE REPORT (NP299)

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

Date/Time Report Made 23/03/2021 13:55	Vide Re	port No.		Station Diary No.
Name Of Informant	Address	Address		
MUHAMMAD HAMIM BIN HUSSIEN	136 BEDOK RESERVOIR ROAD #03-1421 SINGAPOR 470136		3-1421 SINGAPORE	
ID Type / ID No. NRIC NO / S9041633B	Contact No. Home/Office: Mobile: 86600773			
Nationality SINGAPORE CITIZEN	Email Address hmmhsn07@gmail.com			
Occupation	Sex	Age	Date of Birth	Race
Despatch worker	Male	30	07/11/1990	Malay
Institution/School Name	Language English			
Date/Time Of Incident 22/03/2021 18:25	Location Of Incident 136 BEDOK RESERVOIR ROAD #03-1421 SINGAPORE 470136			

Brief details.

On 22nd mar at around 1825pm i was riding along sims ave towards paya lebar when suddenly a taxi from my right came out from lor 29 geylang and make a turn from minor rd merging to major rd of sims ave.

I saw a taxi ahead of me on the right lane from the minor road as i maintained my speed, i gave a warning horn as to make sure he wouldn't come into the mid lane. He suddenly swerve in abruptly. As it

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this
Not applicable	report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 23/03/2021 13:55
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

SHD 5275A





2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210323/7030

was too sudden i couldn't react in time to avoid and i crash onto his left side front tyre..

I was conveyed to tan tock seng hospital via ambulance and sustain minor head injury i was also given 4 days of mc

Road was dry n traffic was light.

My plate number is FBR645X

I cant remember the taxi plate number as i was immediately brought into the ambulance. I had no witness. But there is a camera at the place of the incident after the bustop.

Victim	ka prie kradsparing von 1900	Caramater Berlingen Com	
Person Name	MUHAMMAD HAMIM BIN HUSSIEN		
ID Type	NRIC NO	ID No	S9041633B
Gender	Male	Age	30
Race	Malay	Language	English
Occupation	Despatch worker	Address	136 BEDOK RESERVOIR ROAD #03-1421 SINGAPORE 470136
Mobile No	86600773	Is Informant A Victim?	Yes

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: Not applicable	Date/Time: 23/03/2021 13:55
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp





3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210323/7030

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this
Not applicable	report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 23/03/2021 13:55
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	