

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 08/06/2021 14:46 (SGT)
Date of Accident 07/06/2021 07:55 (SGT)
Exact Location of Accident Woodlands Ave 4, Singapore
Additional Location Information AND WOODLANDS STREET 82
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FV9524J

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MOHAMED FIZIFIRDAUS BIN MOHAMED PAWSIE
NRIC No S9137859J
Email Address mfizifirdaus@gmail.com
Mobile Phone No (Phone) +65-91195009
Alternative Phone No +65-91195009

VEHICLE PARTICULARS

Manufacturer Honda
Model Cb400
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 400

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number MC/00809901
Cover Note Number -

DRIVER

Name of Driver MOHAMED FIZIFIRDAUS BIN MOHAMED PAWSIE
NRIC No S9137859J

Date Of Birth	17/10/1991
Occupation	Indoor
Date Of Driving Pass	05/11/2008
Driving experience	12 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91195009
Alt. Phone Number	+65-91195009
Email Address	mfizifirdaus@gmail.com
Address	731 WOODLANDS CIRCLE #06-09
Address complement	-
Postcode	730731
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 - Cross Junction
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

REFER TO ATTACHED
STATEMENT RECORDED BY LILY OF PROGRESSIVE CAR CARE PTE LTD TEL: 67415336

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	SHA4743M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
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 FIZIFIRDAUS BIN MOHAMED PAWSIE
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FV9524J
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**IMPORTANT NOTICE**

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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 :

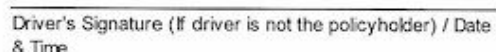
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (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.

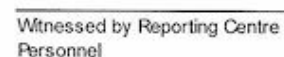
(collectively the "Purposes")

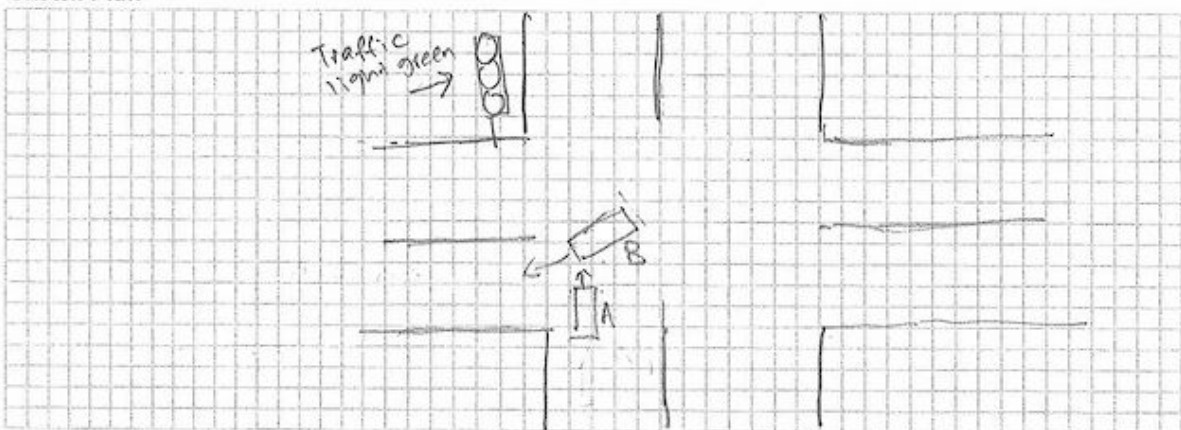
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.


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.

Refer to Police report.

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.





Policyholder's Signature / Date & Time
 Driver's Signature (If driver is not the policyholder) / Date & Time
 Witnessed by Reporting Centre Personnel

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

Witnessed by Reporting Centre
Personnel

















**SINGAPORE
POLICE FORCE**



T/20210607/7035

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

1 of 3

Report No. T/20210607/7035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/06/2021 18:07		Vide Report No.: L/20210607/0059		Station Diary No.:	
Informant's Particulars					
Name of Informant: MOHAMED FIZIFIRDAUS BIN MOHAMED PAWSIE			Address: 731 WOODLANDS CIRCLE #06-09 SINGAPORE 730731		
ID Type / ID No.: NRIC NO / S9137859J			Contact No.: Home/Office: Mobile: 91195009		
Nationality: SINGAPORE CITIZEN			Email: mfizifirdaus@gmail.com		
Sex: Male	Age: 29	Date of Birth: 17/10/1991	Type of Informant: Rider		
Race: Boyanese			Language: English		Institution / School Name:
Occupation: Other engineering professionals nec			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/06/2021 07:55	Type of Location: T-Junction
Location: WOODLANDS STREET 82				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
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
FV9524J	Motorcycle	HONDA	CB400SF2J	Black	Seriously Damaged	0
SHA 4743M	ComfortDelgro Taxi	TOYOTA	Prius	Blue	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210607/7035

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

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Report No. T/20210607/7035

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FV9524J	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MC/00809901/01	11/06/2020	11/06/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMED FIZIFIRDAUS BIN MOHAMED PAWSIE		ID No. S9137859J
Related Vehicle	FV9524J (Motorcycle)		Contact No. 91195009
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry Class: 2B,2A,3 Date of Expiry: NIL
Date	07/06/2021		Date 07/06/2021
No. of Days granted Medical Leave	05	Degree of	Slight

Brief Details.

I was travelling along Woodlands Ave 4. My travelling speed was around 50km/h. Along the T-Junction between Woodlands Ave 4 and Woodlands 82, the traffic light was green in my favour to which I continued straight. As I was approaching the T-Junction the ComfortDelgro taxi (SHA 4743 M) abruptly went to make a right turn but stopped in the middle of the T-Junction in the 1st lane of my direction of traffic as a pedestrian was crossing the road. This did not give me sufficient time to react and I hit on his left rear tire. I would also like to state that when the taxi did the abrupt right turn, I was about 2m from the taxi.

After the accident, 2 passersby came and helped move my bike and me to the side of the road. I managed to call for traffic police and ambulance right after for assistance. I have photos of the taxi after the accident and photos of my motorbike after the accident. I was not able to take photos when my bike was on the road.



**SINGAPORE
POLICE FORCE**

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



T/20210607/7035

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Report No. T/20210607/7035

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ABDUL MUHAJMIN BIN HUSSAIN
Contact No.: 65476090

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
07/06/2021 18:07

Classification Of Case: