

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	25/06/2021 10:36 (SGT)
Date of Accident	24/06/2021 12:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 824 YISHUN ST. 81 OPEN CAR PARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FX361K
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MOHAMED FAISAL BIN MOHAMED IBRAHIM
NRIC No	SXXXX999F
Email Address	r3gg3.zal@gmail.com
Mobile Phone No	(Phone) +65-96364622
Alternative Phone No	+65-96364622

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	399

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	D20MTMC01006898
Cover Note Number	27/10/20 - 26/10/21

DRIVER

Name of Driver	MOHAMED FAISAL BIN MOHAMED IBRAHIM
NRIC No	SXXXX999F

Date Of Birth	01/04/1993
Occupation	Indoor
Date Of Driving Pass	09/10/2018
Driving experience	2 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96364622
Alt. Phone Number	+65-96364622
Email Address	r3gg3.zal@gmail.com
Address	BLK 824 YISHUN ST. 81 #08-588
Address complement	-
Postcode	760824
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	Hit and run / Vandalism / Damaged whilst parked
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
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	Yishun South Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008522999
Alt. Police Station Phone No	(Fax) +65-68522239
Police Station Address	32 Yishun Street 81 Singapore 768456
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FOOTAGE PROVIDED BY NEIGHBOUR'S CAR IN-BUILT CAMERA AND WILL FORWARD TO REPAIR WORKSHOP.
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH6608R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	Blue
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)	-

SKETCH PLAN

1. VEHICLE NO.: FX361K
 2. INSURER CO: Sompo
 3. ACCIDENT
 DATE & TIME: 24/6/21 @ 12:00pm

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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' 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.

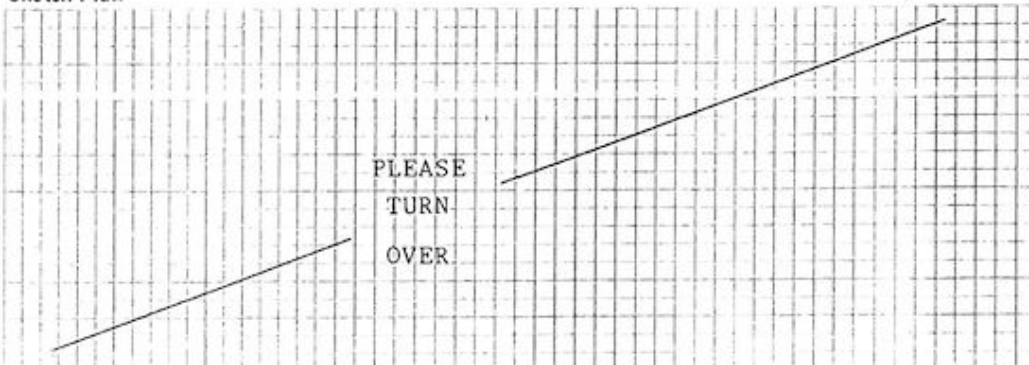


Policyholder's Signature / Date & Time

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

 24/6/21
 Witnessed by Reporting Centre Personnel (45)

Sketch Plan



Sketch Plan

Refer to scene photos attached.

A = FX361K
B = SH6608R
motor taxi
(Blue)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No: T/20210624/2032

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

() Claim Own Policy () Claim Third Party () Reporting Only
(✓) Claim GB/TP at other workshop ()









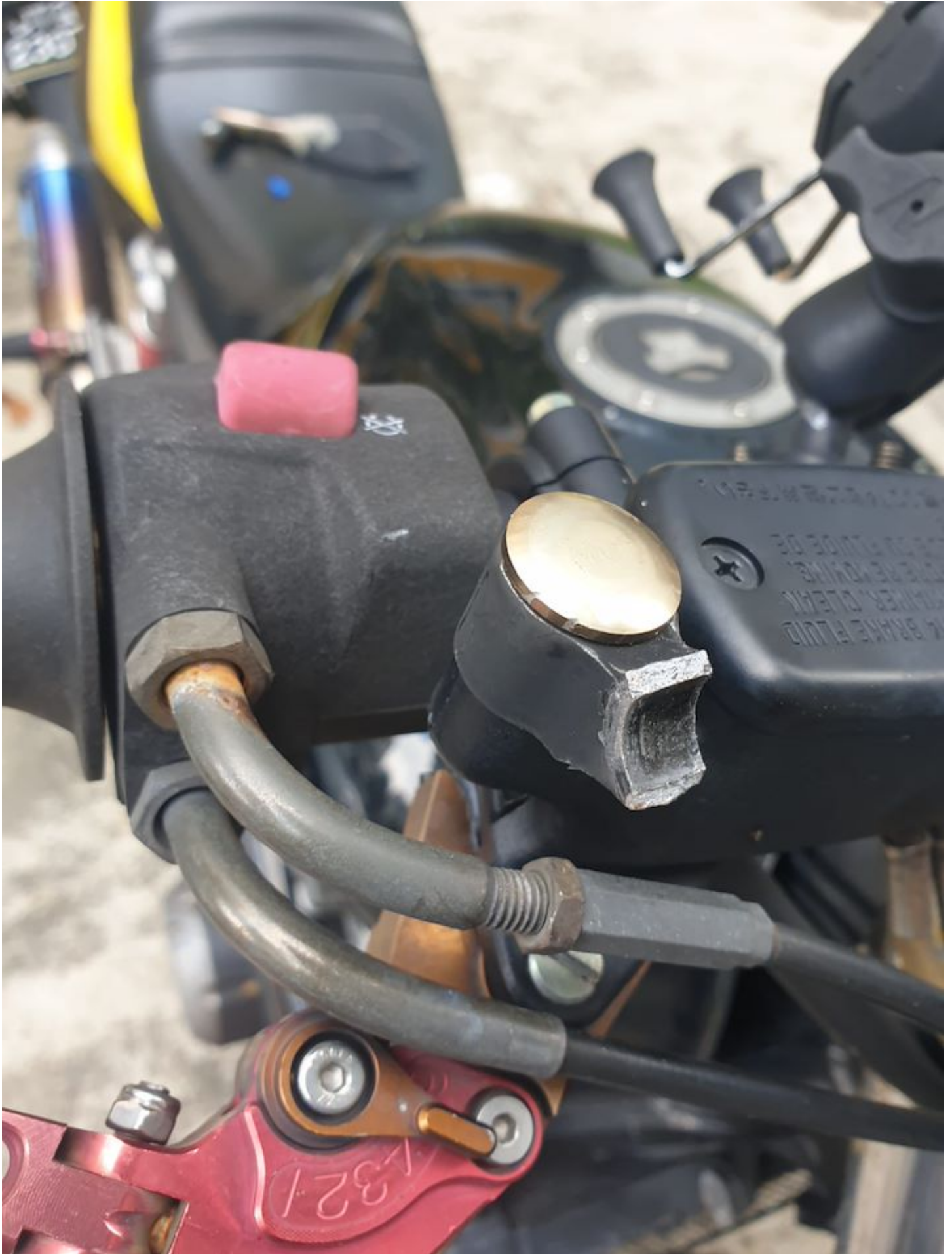














**SINGAPORE
POLICE FORCE**



T/20210624/2032

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

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Report No. T/20210624/2032

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/06/2021 13:08		Vide Report No.: L/20210624/0060		Station Diary No.: 20	
Informant's Particulars					
Name of Informant: MOHAMED FAISAL BIN MOHAMED IBRAHIM			Address: APT BLK 824 YISHUN STREET 81 #08-588 SINGAPORE 760824		
ID Type / ID No.: NRIC NO / S9310999F			Contact No.: Home/Office: Mobile: 96364622		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 28	Date of Birth: 01/04/1993	Type of Informant: Rider		
Race: Indian			Language:		Institution / School Name:
Occupation: IMPORT AND EXPORT OFFICER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/06/2021 12:00	Type of Location: OPEN CARPARK
Location: YISHUN STREET 81				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: HIT AND RUN				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FX361K	Motorcycle	HONDA	CB400	Yellow	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FX361K	TENET SOMPO INSURANCE PTE. LTD.	D20MTMC0100689 8	27/10/2020	26/10/2021



**SINGAPORE
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T/20210624/2032

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32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

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Report No. T/20210624/2032

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMED FAISAL BIN MOHAMED IBRAHIM	ID No.	S9310999F
Related Vehicle	NIL	Contact No.	96364622
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 23rd June 2021 at 1900hrs, I parked my motorcycle bearing plate number FX361K at Blk 824 Yishun Street 81 open carpark. I am unable to see the parking lot number as the number lot have faded however I parked near to lift B lobby. Everything was intact when I last parked my motorcycle. On the 24 June 2021 at 1200hrs, I wanted to pay my motorcycle installment payment at Bukit Merah and I noticed that 1) broken right mirror, 2) dented handle bar, 3) brake lever damage, 4) engine casing dented, 5) front fairing crack, 6) mis-alignment to my front wheel. I am sure that it was a hit and run and I called 999. Shortly after, Traffic Police came to access the situation. I was then given a case card and was asked to lodge a Police report. I have not send my motorcycle to the workshop and I estimated that the damages repair would be \$2800/-. There is no witness who had came forwarded regards to the accident. I am lodging the Police report insurance claim and to seek Traffic Police assistance.



**SINGAPORE
POLICE FORCE**



T/20210624/2032

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

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Report No. T/20210624/2032

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:
L /
Staff Sgt NASRI BIN JUMARI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
24/06/2021 13:08

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt IRMAN BIN MOHAMAD SAID
Contact No.: 65476145

Classification Of Case:

Authentication Stamp

SN 085

Signature:

Singapore Police Force



TRAFFIC POLICE
AMENDMENT

Traffic Police Department
Charge Office
10 Ubi Avenue 3
Singapore 408865

NP 168 No.	: T/20210624/2032	Name	: Mohamed Faisal Bin Mohamed Ibrahim
Accident Date/Time	: 24/06/2021 @ 1200hrs	Address	: 824 Yishun Street 81 #08-588 S'pore 760824
Vehicle(s) Involved	: FX361K	NRIC No	: S9310999F
		Tel No	: 96364623
		Date	: 24/06/2021

Dear Sir / Madam

Accident involving FX 361K
along Blk 824 Yishun Street 81 open carpark on 24/06/2021 at 1200 hours

With reference to the above, I have on 24/06/2021 (date) 1308 hours (time) make a
police report at Yishun South NPC (Police Station/NPP/NPC)
In NP 168 – T/20210624/2032

On 24/06/2021 (date), 1529 hours (time) at Yishun South NPC
(Police Station/NPP/NPC), I make the following amendments to the above report;
I would like to state that my contact number is 96364623. To add on, my neighbor has
approached me regarding to the accident and had forwarded me the video. The vehicle that have
hit onto my motorcycle is a taxi bearing SH6608R.

Yours Faithfully,

(Signature)

FOR OFFICIAL USE

If a police officer recorded these amendments, please complete the following.

Name / Rank No	: SS Nasir
Date and Time	: 24/6/21 at 1538hrs
Station Dairy No	: -



Traffic Police Department
Charge Office
10 Ubi Avenue 3
Singapore 408865

Signature

: 