

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 04/08/2021 09:25 (SGT)
Date of Accident 01/08/2021 17:30 (SGT)
Exact Location of Accident 4009 Ang Mo Kio Ave 10, Singapore 569738
Additional Location Information ALONG ANG MO KIO 10 TOWARDS ANG MO KIO AVE 1
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FK311Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MD HAIROMAN BIN MD SUM
NRIC No S7123947J
Email Address hairomandre@gmail.com
Mobile Phone No (Phone) +65-92410421
Alternative Phone No +65-92410421

VEHICLE PARTICULARS

Manufacturer Honda
Model XADV 750
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? Yes
Vehicle Category Motorcycle
Transmission Auto
CC 750

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 1900004396
Cover Note Number -

DRIVER

Name of Driver MD HAIROMAN BIN MD SUM
NRIC No S7123947J

| | |
|--|-----------------------------------|
| Date Of Birth | 18/07/1971 |
| Occupation | Indoor |
| Date Of Driving Pass | 13/03/2000 |
| Driving experience | 21 YEARS AND 5 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-92410421 |
| Alt. Phone Number | +65-92410421 |
| Email Address | hairomandre@gmail.com |
| Address | BLK 476, ANGMO KIO AVE 10 #03-810 |
| Address complement | - |
| Postcode | 560476 |
| 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 - Head to Rear |
| 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 vehicle 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 | Teck Ghee Neighbourhood Police Post |
| Police Station Address | Blk 321 Ang Mo Kio Street 31 Singapore 560321 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO STATEMENT AND SKETCH

ATTACHMENT(S)

| | |
|---|-----|
| Are accident photos available for attachment? | Yes |
| Was there any video captured by Car Camera? | Yes |
| Was there any audio recorded? | No |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------------|----------------------|
| Vehicle Registration Number | SMR8263G |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | TAN KIAN SOON JEREMY |
| NRIC No | S8939417A |

| | |
|---|----------------------|
| Contact Number | (Phone) +65-97546302 |
| 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 | MD HAIROMAN BIN MD SUM |
| Gender | Male |
| Phone No | (Phone) +65-92410421 |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | SOME BRUISES |
| Injured person in which vehicle? | FK311Z |
| Were seat belts worn? | Yes |
| Was this injured conveyed to hospital by ambulance? | Yes |

SKETCH PLANIMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



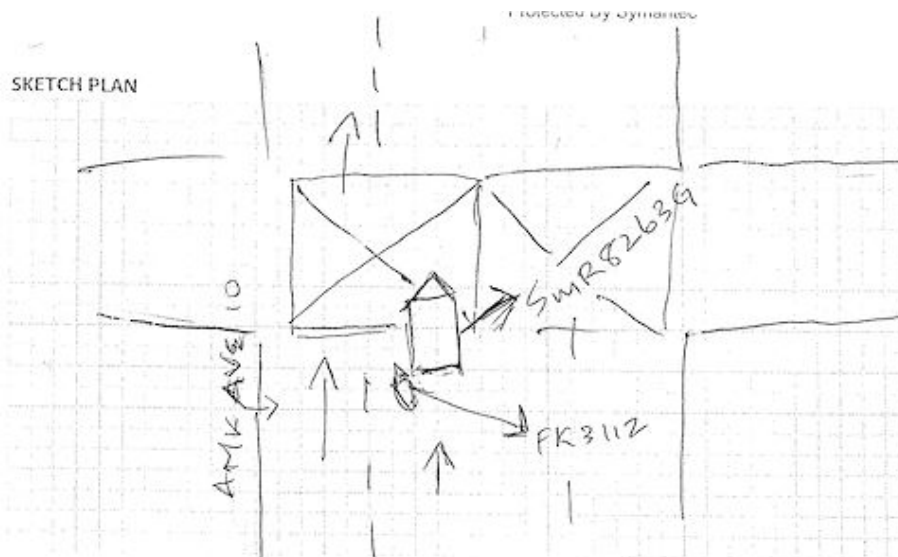
Policyholder's Signature
Date & Time:

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



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

AMK Ave 10



REFER TO POLICE REPORT: T/20210802/2042

REFER TO POLICE REPORT: T/20210802/2042

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

21  3/8/21
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

8/3/2021

Mail - CDGE Braddell Private Cars Crash Repair Counter - Outlook

14:40   VoLTE 59

FK311Z.pdf



CERTIFICATE OF INSURANCE

MOTORCYCLE AUTOVANTAGE MOTORCYCLE

Name of Policyholder : MD HAIROMAN BIN MD SUM
 Period of Insurance : 10 Jan 2021 To 09 Jan 2022
 Engine No. : RC88E6302577
 Chassis No. : JH2RC95A4KK200806

Vehicle No. : FK311Z
 Policy No. : 1900004396-02
 Endorsement No. :
 Issued Date : 04 Jan 2021

ABOUT THE COVER

Make/Model : HONDA ADV 750
 Engine Capacity/Tonnage : 745.00 CC
 Driver Restriction : Named Driver Basis
 Person or Classes of Persons Entitled to Drive* :
 a) The Policyholder
 b) Any person who is named as a "named driver" under this Policy.

Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2019
 Insuring with COE/PARF : Yes

Age Condition : Not Applicable

Limitation as to use* :

use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- 1) use for hire or reward;
- 2) use for driving tuition, driving test, racing, pace-making, reliability trial or speedtesting;
- 3) use for the carriage of goods (other than samples) in connection with any trade or business; and
- 4) use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 5 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 185), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1
 Fire - \$0 Own Damage - \$750 Theft - \$0

Section 2
 Property Damage - \$0

Windscreen : Nil

Named Driver and Excess (where applicable)

MOHAMAD HAMIZAN BIN ABUL HAMED - \$750 (Own Damage), MD HAIROMAN BIN MD SUM - \$750 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
 For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6335 6200. Alternatively, You may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: BIKE PRODUCTION PTE LTD

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 185), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

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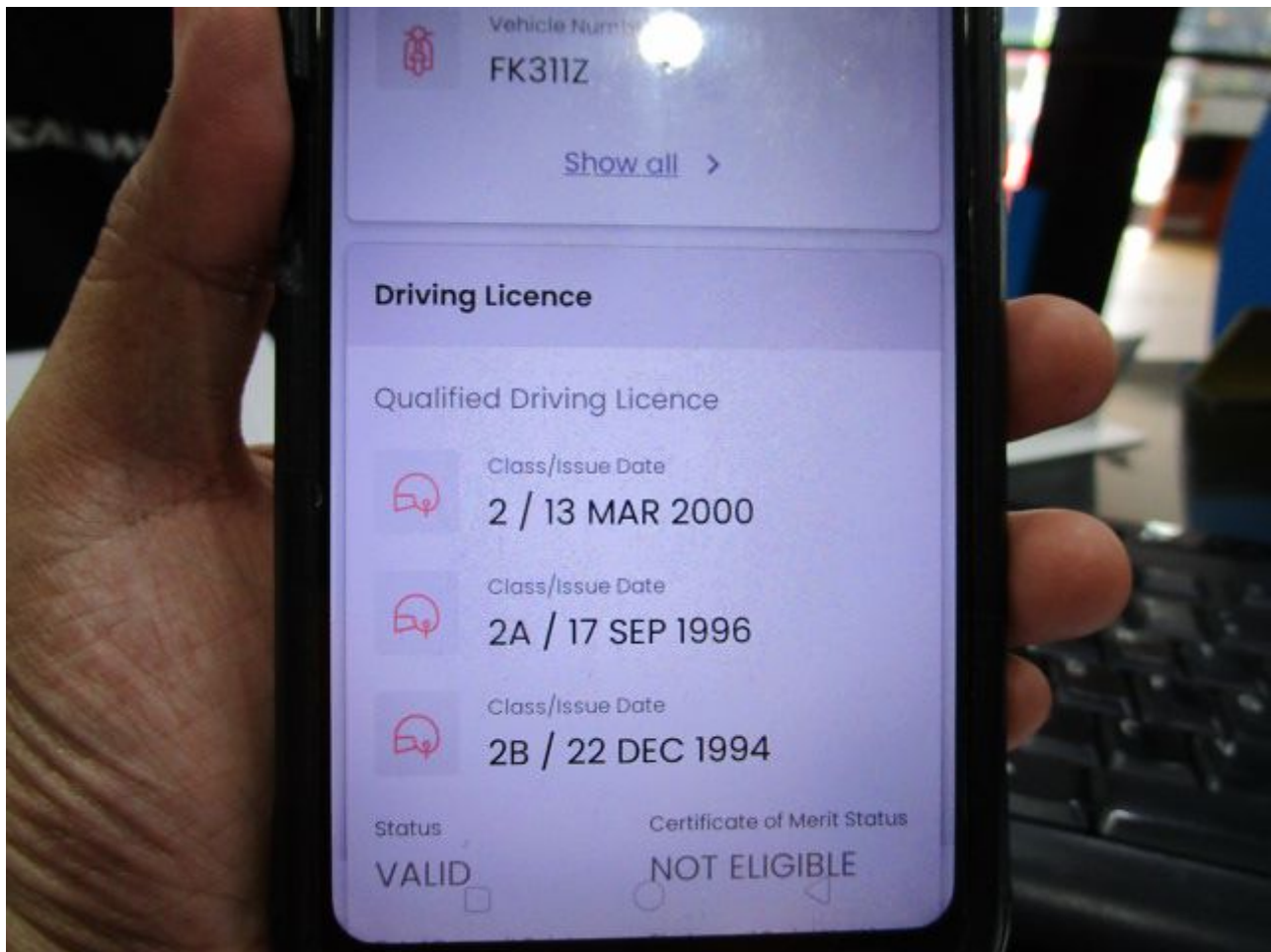
COWELL - BIKE PRODUCTION

88 BURN ROAD #09-09 TRIVEX

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

https://outlook.office.com/mail/braddell_cr@sparkcarcare.com/inbox/id/AAQKADhkM2FINGYyLWU3NzMtNDgxMi1iZDQ2LTtyOTE3ZDU5MGfjN... 1/2











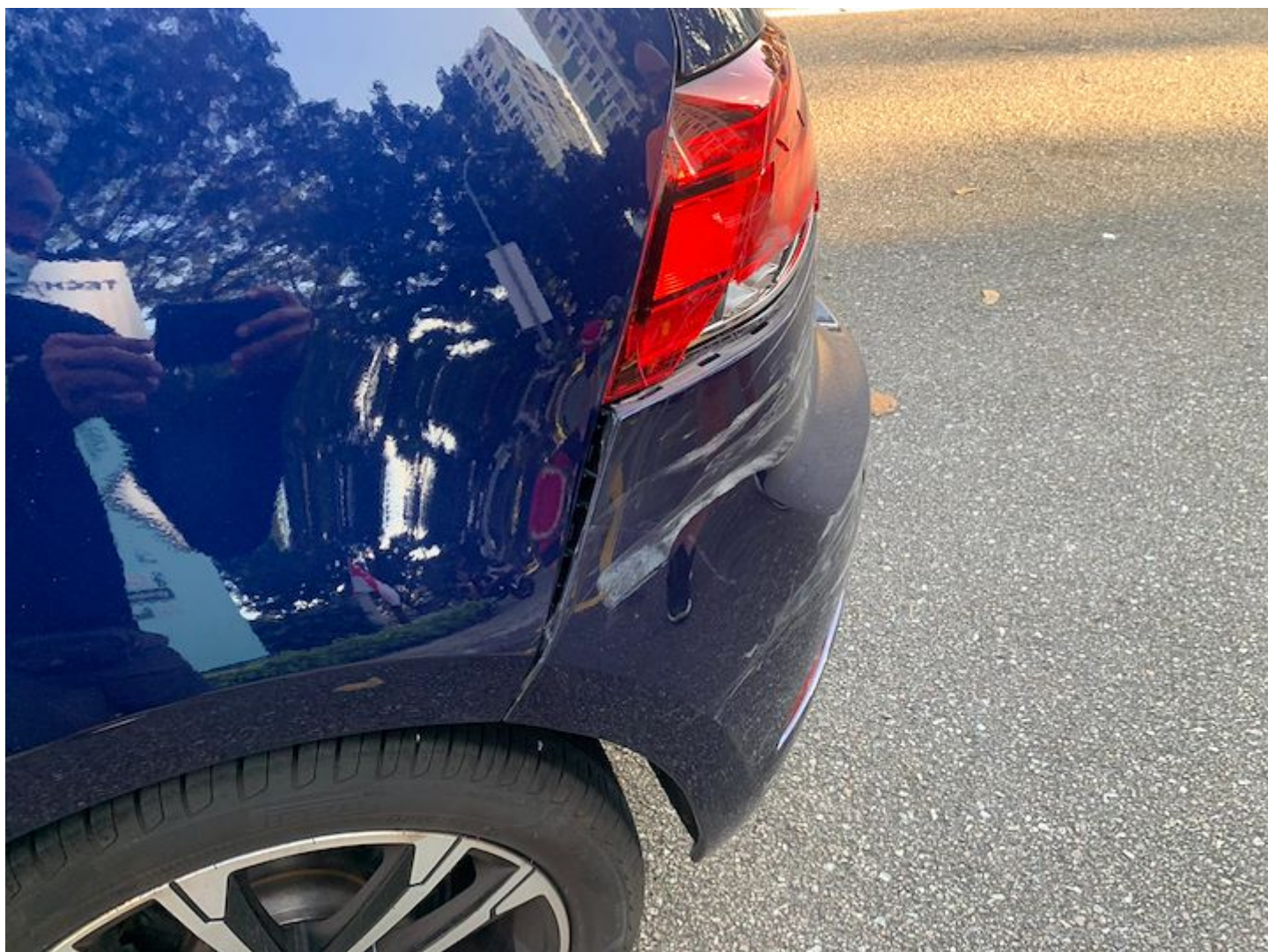






















**SINGAPORE
POLICE FORCE**



T/20210802/2042

Police Station Of Origin:
Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

1 of 3

Report No. T/20210802/2042

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 02/08/2021 13:31 | Vide Report No.: | Station Diary No.: 18 |
|--|------------------|--------------------------|

| Informant's Particulars | | | |
|--|------------|--|-----------------------------|
| Name of Informant: MD HAIROMAN BIN MD SUM | | Address: APT BLK 476 ANG MO KIO AVENUE 10 #03-810 SINGAPORE 560476 | |
| ID Type / ID No.: NRIC NO / S7123947J | | Contact No.: Home/Office: Mobile: 92410421 | |
| Nationality: SINGAPORE CITIZEN | | Email: | |
| Sex: Male | Age: 50 | Date of Birth: 18/07/1971 | Type of Informant: Rider |
| Race: Malay | | Language: English | Institution / School Name: |
| Occupation: BIKE COURIER | | Driving Licence Information: Class: 2B,2A,2 Date of Expiry: | |

| General Information of the Accident | | | | |
|--|---------------------------|---|--|------------------------------------|
| Type of Accident: | Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 01/08/2021 17:30 | Type of Location: Straight Road |
| Location: ANG MO KIO AVENUE 10 | | | | |
| 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 Rear | | | Anyone conveyed by ambulance: No | |

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------------|-------|--------|--------|-----------|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| FK311Z | Motorcycle | HONDA | ADV750 | Silver | | 0 |
| SMR8263G | Car | | | | | 0 |

| Details of Vehicle Insurance | | | | |
|------------------------------|--------------------------------------|---------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| FK311Z | AIG ASIA PACIFIC INSURANCE PTE. LTD. | 1900004396-02 | 10/01/2021 | 09/01/2022 |



**SINGAPORE
POLICE FORCE**



T/20210802/2042

2 of 3

Police Station Of Origin:
Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

Report No. T/20210802/2042

CONTINUATION OF REPORT

| Details of Person Involved | | | |
|-----------------------------------|------------------------|--|---------------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Rider | | | |
| Name | MD HAIROMAN BIN MD SUM | ID No. | S7123947J |
| Related Vehicle | FK311Z (Motorcycle) | Contact No. | 92410421 |
| Hospital/Clinic | ANG MO KIO POLYCLINIC | Class of Driving Licence & Expiry Date | Class: 2B,2A,2 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | 03 | Degree of Injury | NIL |
| Driver | | | |
| Name | TAN KIAN SOON JEREMY | ID No. | S8939417A |
| Related Vehicle | SMR8263G (Car) | Contact No. | 97546302 |
| 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 1/8/21 at about 1730hrs I was riding my motorcycle (FK311Z) along Ang Mo Kio Avenue 10 towards Ang Mo Kio Ave 1. It was a two lane road and I was on the right lane. While I was near Blk 401 Ang Mo Kio Ave 10, a vehicle (SMR8263G) which was in front of me suddenly jammed brakes. In order to avoid any collision I tried to swerve to my left side however could not and I collided onto the rear left side of the vehicle. Upon collision I fell off from my bike. The driver of the vehicle then came down and assisted me. The driver then called for an ambulance as I sustained some bruises.

Traffic police and ambulance came down to scene and attended to me. I refused to be conveyed to hospital. There are some light damages to my motorcycle however still able to ride. I am not sure on the cost of repair. On 2/8/21 I went to Ang Mo Kio Polyclinic for medical treatment and I was given 3 days of MC



**SINGAPORE
POLICE FORCE**



T/20210802/2042

Police Station Of Origin:
Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

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Report No. T/20210802/2042

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:

F /

Sgt 2 RAMESH S/O KOLILINGAM

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

02/08/2021 13:31

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MUHAMMAD ZICKIE BIN AHMAD
SUYUTI

Contact No.: 65476904

Classification Of Case:

Authentication Stamp
NP168



SN 03