

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	13/09/2021 14:20 (SGT)
Date of Accident	11/09/2021 12:00 (SGT)
Exact Location of Accident	Hougang Ave 10, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH3583Z
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	MOHAMED NIYAZ
NRIC No	S8981789G
Email Address	NIYAZEDUC@GMAIL.COM
Mobile Phone No	(Phone) +65-84028102
Alternative Phone No	+65-84028102

VEHICLE PARTICULARS

Manufacturer	Sym
Model	GTS200
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	Auto
CC	200

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	MC/00949361
Cover Note Number	-

DRIVER

Name of Driver	MOHAMED SADIQ MOHAMED NAFELL
Passport No/FIN	G3936864T

Date Of Birth	26/03/1993
Occupation	Indoor
Date Of Driving Pass	05/07/2021
Driving experience	2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82452526
Alt. Phone Number	-
Email Address	NAFELL0809@GMAIL.COM
Address	BLK 603 SENJA ROAD #20-67
Address complement	-
Postcode	670603
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Sibling
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 - Major/Minor Rd
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	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 - PROGRESSIVE CAR CARE PTE LTD 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	SLH9495L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
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 SADIQ MOHAMED NAFELL
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBH3583Z
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN

IMPORTANT NOTICE

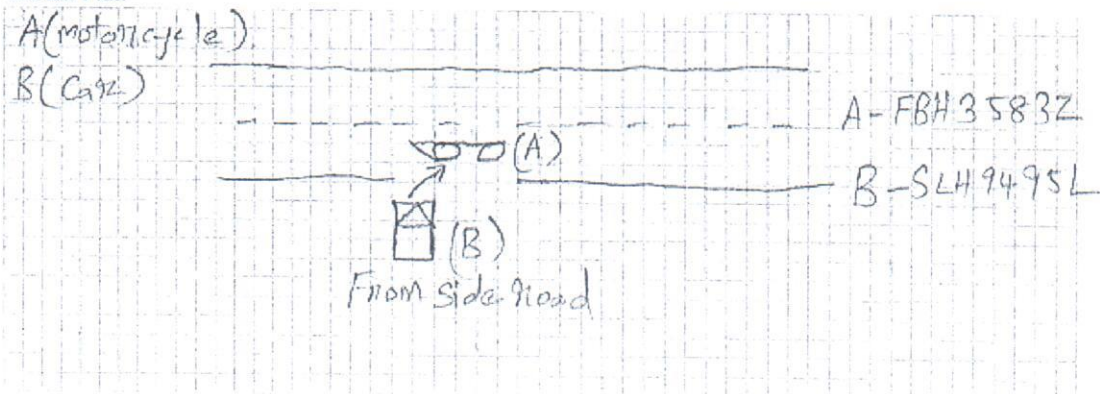
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, 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.

[Signature] 13/07/2021
Policyholder's Signature / Date & Time

[Signature] 13/09/2021
Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature]
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Refr 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.

13/09/2021
Policyholder's Signature / Date & Time

13/07/2021
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre
Personnel

YOUR POLICY SCHEDULE

This document forms part of your contract with us and should be read together with your Certificate of Insurance and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Motorcycle Insurance

Policy number	: MC/00949361		
Period of cover	: Policy begins 26/07/2021 and runs until 25/07/2022 (both dates inclusive)		
Premium	: S\$ 141.86 (inclusive of GST)		
Policy Excess	: S\$ 0.00		
Policyholder			
Policy holder	: Niyaz, Mohamed		
Mailing address	: 603 SENJA ROAD, 20-67, Singapore 670603		
E-mail address	: niyazeduc@gmail.com	Mobile Number	: 84028102
No Claims Discount (NCD)	: 30%	Offence Free Discount	: No
Driver Details			
Main Driver	: Niyaz, Mohamed		
Date of birth	: 28/02/1989	Marital status	: Married
Gender	: Male		
Driving experience	: > 5		
Named Driver			
Important Note: The policy only covers the main driver and the following named driver:			
Ref	Named Driver	Date of Birth	
1	Mohamed nafell, Mohamed sadiq	26/03/1993	
Motorcycle Details			
Vehicle Registration	: FBH3583Z	Chassis number	:
Make and model	: SYM GTS 200	Year of registration	: 2013
Motorcycle usage	: Private Use	Finance company/ Hire purchase	:
Third-Party Only Cover Details		Limits (Up to)	
✓ Third-party property damage		S\$ 500,000	
✓ Third-party death or bodily injury		Unlimited	
Medical expenses for driver and passengers		Not Covered	
Personal accident for driver		Not Covered	
NCD Protector Plus		Not Covered	
Any Rider 25 - 65 years old		Not Covered	
Any Rider 30 - 65 years old		Not Covered	

Direct Asia Insurance (Singapore) Pte. Ltd.


Underwriting Manager

REPUBLIC OF SINGAPORE

FIN G3936864T



Name
MOHAMED SADIQ MOHAMED
NAFELL

Date of Birth 26-03-1993 Sex M
Nationality INDIAN



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: G3936864T
Name:

MOHAMED SADIQ MOHAMED
NAFELL

Birth Date: 26 Mar 1993

Issue Date: 05 Jul 2021

Valid Till 04/07/2026



FA2415541

VISIT PASS
Immigration Regulations



FIN G3936864T

MULTIPLE JOURNEY VISA ISSUED

Date of Issue 30-03-2021 Date of Expiry 30-03-2023



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B	Motorcycles ≤ 200cc / Electric Motorcycles ≤ 15kW	05 Jul 2021
Class 3	Ambulances / Motor cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver / motor tractors or vehicles ≤ 2500kg	05 Jul 2021

NP 428A





SINGAPORE
POLICE FORCE



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

1 of 3
Report No T/20210911/7018

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/09/2021 15:07		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MOHAMED SADIQ MOHAMED NAFELL			Address:		
ID Type / ID No.: FIN NO / G3936864T			Contact No.: Home/Office:		Mobile: 82452526
Nationality: INDIAN			Email: nafell0809@gmail.com		
Sex: Male	Age: 28	Date of Birth: 26/03/1993	Type of Informant: Rider		
Race: Indian			Language: English		Institution / School Name:
Occupation: Desktop support engineer			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/09/2021 12:00	Type of Location: Straight Road
Location: HOUGANG AVENUE 10				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 40 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
FBH3583Z	Motorcycle				Seriously Damaged	0
SLH9495L	Car				Seriously Damaged	0



SINGAPORE
POLICE FORCE



1-20210911-7018

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Police Station Of Origin
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408866
Tel No 65470000

Report No: 1-20210911-7018

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMED SADIQ MOHAMED NAFELL	ID No.	G3936864T
Related Vehicle	FBH3583Z (Motorcycle)	Contact No.	82452526
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,3 Date of Expiry: NIL
Date	11/09/2021	Date	11/09/2021
No. of Days granted Medical Leave	04	Degree of	Serious

Brief Details.

ON THE STATED DATE AND TIME, I VEHICLE A BEARING (FBH3583Z) WAS TRAVELING STRAIGHT ON MY LANE. SUDDENLY, VEHICLE B BEARING (SLH9495L) CAME OUT FROM SMALL ROAD ON MY LEFT AND HIT ON TO ME AND MADE ME FALL ON MY RIGHT. WE EXCHANGED PARTICULARS AND LEFT THE SCENE.

AFTER THE ACCIDENT, I WENT TO INTEMEDICAL KOVAN TO CONSULT DOCTOR AS I FELT PAIN ON MY LEFT ELBOW, LEFT LEG AND LOWER BACK AND RECEIVED 4 DAYS MC.



**SINGAPORE
POLICE FORCE**

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



T.202109117018

3 of 3

Report No. T.202109117018

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 /
ANG YI TING, STEPHANIE
Contact No.: 65476414

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

Date/Time:
11/09/2021 15:07

Classification Of Case:

NP169

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REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8981789G



Name

MOHAMED NIYAZ

Race

INDIAN

Date of birth

28-02-1989

Country/Place of birth

INDIA

Sex

M

S8981789G



Owner FBH 3583E

6518011



NRIC No. S8981789G



Date of issue

08-10-2020

Address

APT BLK 603 SENJA ROAD

#20-67

SINGAPORE 670603

BIKE RECOVERY SERVICE

HP: 8298 6622

Business Reg. No: 201216510M

CASH SALE

NO: 02028

Date: 13/9/21

Particular: _____

Vehicle No: FBH 35832 Model No: G75 200

From: EROFIA TO PROGRESSIVE To: EROFIA

Time: (Day/Night): _____

Others: _____

CASH \$: 301

NOTE: Vehicle is towed at owner's risk. The Company accepts no responsibility for damages or others misdemeanour to your vehicle while being towed.



PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SLH9495L AND FBH3583Z ON 11/09/2021

1 message

Yenny Teo <yenny@legaloptions.biz>

Thu, Sep 16, 2021 at 1:02 PM

To: Subramaniam, Divyashni <Divyashni.Subramaniam@aig.com>

Cc: erofia2@gmail.com

In view of the current pandemic Covid-19 situation, we are encouraged to impose tighter workplace measures. Therefore, we are required to adopt a telecommuting policy for our practice. As such, all correspondences, discharge vouchers and documents shall be forwarded and/or submitted by way of softcopy only.

Dear Divyashni,

Our client proposes Marcus Chua from LKK Auto Consultants Pte Ltd.

The said surveyor may contact Mr Teo at 9069 6165, M/s Erofia Trading at 1 Kaki Bukit Avenue 6, Autobay @ Kaki Bukit #02-62, Singapore 417883.

*If we do not hear from you within 2 days of this email, our clients shall deem that you have agreed that the surveyor appointed by our clients shall be our single joint expert for this matter.

Thanks and regards,

Yenny

Junior Legal Secretary

LEGAL OPTIONS LLC

(GST Registration/UEN No. 201203825R)

Tel (65) 6513-2800 DID (65) 6513-2805 Fax (65) 6438-8275

Disclaimer

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