SN07219N000I / NTUC Income Insurance Co-operative Ltd ENTRY DATE & TIME: 23/09/2021 15:12 (SGT) SUBMITTED BY: Alwi Wee VERSION: 1 (23/09/2021 15:12 (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.

 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 Date of Accident Exact Location of Accident Additional Location Information	23/09/2021 15:12 (SGT) 21/09/2021 17:00 (SGT) Singapore BUKIT BATOK EAST AVE 3 TOWARDS BUKIT BATOK CENTRAL
Country/State of Loss	AFTER SPC IN LANE 2 Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number		FBK1759G
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	RWAVE SUPERBIKE PTE LTD
Company Reg No	201938994K
Email Address	RWAVEPTELTD@GMAIL.COM
Mobile Phone No	(Phone) +65-93696861
Alternative Phone No	+65-93696861

VEHICLE PARTICULARS

Yamaha
Fz1-s
-
Private use
No - Claiming third party
Motorcycle
Manual
1000

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdParty .
Fleet Policy	Yes
Policy Number	5115272908-01
Cover Note Number	-

DRIVER

Name of Driver MUHAMMAD ZULHIZAT BIN ABDUL RAHIM



NRIC No S9220400F Date Of Birth 19/06/1992 Occupation Indoor Date Of Driving Pass 31/08/2017 Driving experience 4 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-97910104 Alt. Phone Number Email Address MUHAMMADZULHIZAT@GMAIL.COM Address 115D CANBERRA WALK #05-181 Address complement Postcode 754115 Is the driver the policyholder? Nο If No, Relationship of the Driver with the Insured Hirer 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 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? Nο 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? Police Station Name Sembawang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005549999 Police Station Address 4 Sembawang Crescent Singapore 757633 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SLT641C Vehicle Manufacturer Vehicle Model Vehicle Variant

Private car

Vehicle Colour
Vehicle Category

Name of Driver	GOH HOCK MENG JARROD
NRIC No	S7503633G
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 Gender Phone No Address Address Complement	MUHAMMAD ZULHIZAT BIN ABDUL RAHIM Male (Phone) +65-97910104 115D CANBERRA WALK #05-181
Post Code	754115
Approximate Age Years Old	29
Injuries Sustained	L/R ELBOW
	LEFT ARM
	RIGHT PALM & WRIST
	L/R KNEECAP
	RIGHT CALF
	LEFT TOE
Injured person in which vehicle?	FBK1759G
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

DECLARATION	particulars are true in every respect.	0
	TILL LITTO	
	REFER TO GE	ARS
DESCRIBE CIRCUMSTANC	CES OF THE ACCIDENT	
BUKIT BATOK	EAST AVE 3 TOWARDS BUKIT B	ATOK CENTRAL AFTER SPC
	V12 V1 L2	
		1 ←
	STATIONARY VEHICLE V2 -	SLT641C
	VIII VIII VIII VIII VIII VIII VIII VII	BK1759G

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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. 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
- 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)
 - (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.

RWAVE SUPERBIKE PTE. LTD. Reg. No. 201938994K

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: 23 SEP 2021 14:55HRS

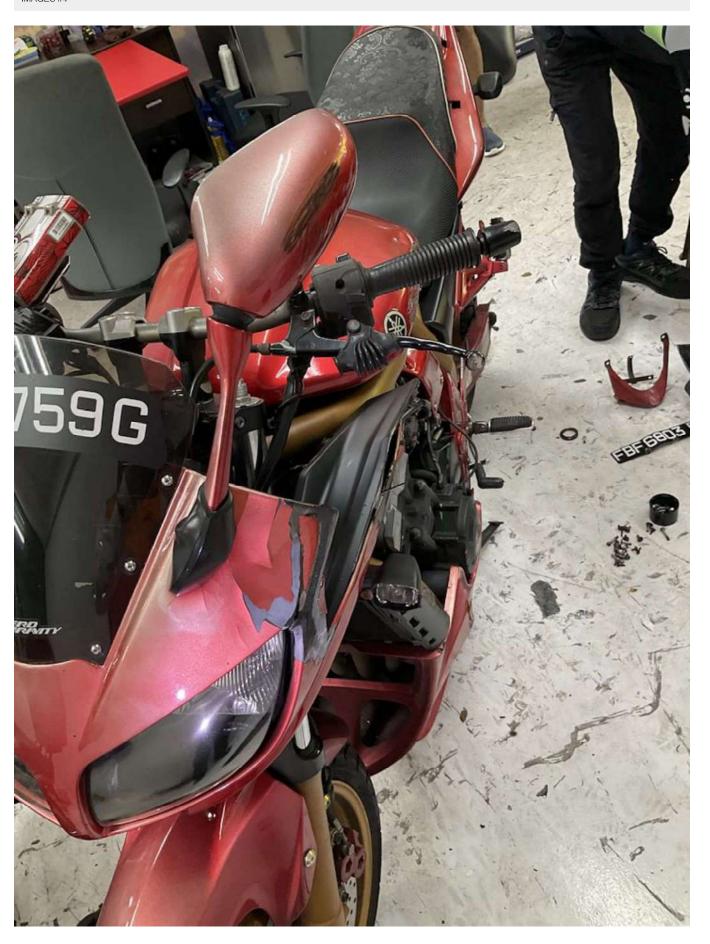
Reporting Centre Personnel's Signature

NRIC/FIN No.: \$994475

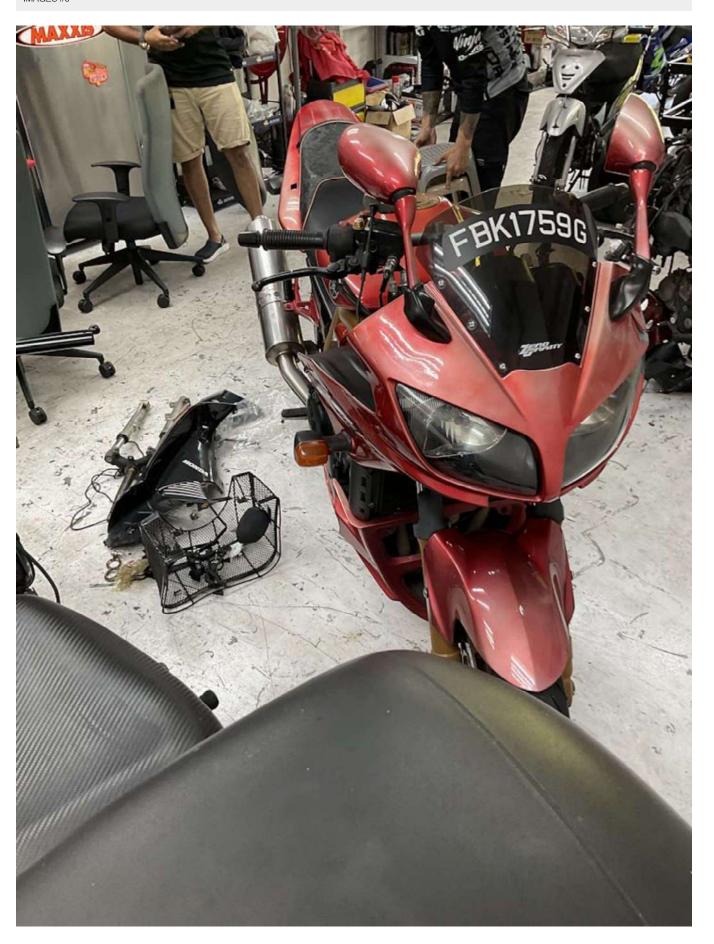














Report No. T/20210922/2040

Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE 757633

Tel No: 1800-5549999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/09/2021 13:44	Vide Report No.:	Station Diary No.
Informant's Particulars		Management and a second
Name of Informant: MUHAMMAD ZULHIZAT BIN ABDUL RAHIM	Address: APT BLK 115D CANBERRA WALK # 754115	105-181 SINGAPORE
ID T LID May	Contact No :	

ID Type	ID No.:	00F	Contact No.: Home/Office:	Mobile: 97910104
National	ty: ORE CITIZ		Email:	
Sex: Male	Age:	Date of Birth: 19/06/1992	Type of Informant: Rider	(2)
Race:			Language:	Institution / School Name:
Occupation: TRAFFIC MARSHALL		ALL	Driving Licence Information: Class: 2B,2A,2	Date of Expiry:

TRAFFIC MARSHALL General Information of the Accident Type of Location: Date/Time of Drink

Injury Accident: Type of Drive: Attended by Police 21/09/2021 17:00 Accident: Location:

BUKIT BATOK EAST AVENUE 3

Weather:	Road Surface:	Road Speed Limit:
translation and an amazines	Traffic Control:	Traffic Volume:
Traffic Flow:		Anyone conveyed by ambulance:

Details of V	ehicle Involve	a management	Model	Color	Condition	No of Passenge
Vehicle No.		Make	Model	TO STATE OF THE PARTY OF THE PA	Slightly	0
FBK1759G Motorcycle		Military and		Damaged		
Bichoos			The second second	THE STREET PARTY	Slightly	0
SLT641C	Car	A WEST AND DE			Damaged	THE THE PLANT

	OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.
Details of Person Involved	one laboration and the laboratio
Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



Report No. T/20210922

1/20210922/2040

Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE Tel No: 1800-5549999

CONTINUATION OF REPORT

Rider	MUHAMMAD ZULHIZAT BIN ABDUL		ID No.	S9220400F
Name	RAHIM		15 110.	002204001
Related Vehicle	FBK1759G (Motorcycle)		Contact No	97910104
Hospital/Clinic	T MEDICAL CLINIC		Class of Driving Licence & Expiry Date	Class: 2B,2A,2 Date of Expiry: NIL
Date Treatment	22/09/2021	Date Discharge 22/09		9/2021
	ted Medical Leave 05	Degree of	Injury Sligh	t
Driver		8年2月78年初日日	a see a see	
Name	GOH HOCK MENG JARROD		ID No.	S7503633G
Related Vehicle	SLT641C (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Disch			
No. of Days gra	Degree of Injury NIL			

Brief Details.

On 21.09.2021 at about 1700hrs, I was riding a rental motorcycle, FBK1759G along Bukit Batok East Ave 3 towards Bukit Batok. It was a two lanes road and I was riding on the left.

There was a vehicle, SLT641C driving on the right lane. He made a sudden lane change without signaling. The driver hit onto the front wheel of the motorcycle. As a result, I was not able to control the said motorcycle. I fell together with the motorcycle. The motorcycle skidded and hit the rear middle bumper.

I immediately called the rental company and the motorcycle was towed to their workshop. The damages of the rental motorcycle were dented on the tank of motorcycle, scratches and paint chipped off on the left hand side.

Subsequently, the driver came down from his vehicle to render help. The damages of the other vehicle was a slight dent on the rear left and rear centre bumper.

I believe a passer by had assisted to call for police and ambulance. However, I did not wish to be conveyed as I was still able to walk. However, I went to visit a clinic on 22.09.2021 and received a 5 days

The driver particulars: Goh Hock Meng Jarrod, S7503633G, Blk 121A Edgedale Plains #04-229 S(821121).