

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	01/10/2021 12:29 (SGT)
Date of Accident	30/09/2021 10:30 (SGT)
Exact Location of Accident	Compassvale Link, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP3023G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	MOHD AZMAN BIN NIK MOHD NAZIR
NRIC No	SXXXX818H
Email Address	teknofuzion08@hotmail.com
Mobile Phone No	(Phone) +65-90034214
Alternative Phone No	(Home) +65-66400684

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fs150f
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	149

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	5121181847
Cover Note Number	-

DRIVER

Name of Driver	MOHD AZMAN BIN NIK MOHD NAZIR
NRIC No	SXXXX818H

19/10/1979
Outdoor
02/12/2005
15 YEARS AND 9 MONTHS
Male
(Phone) +65-90034214
(Home) +65-66400684
teknofuzion08@hotmail.com
BLK 414B FERNVALE LINK #09-04
-
792414
Yes
-
No
-
-
Insurance Company of Other Vehicle Owned by Driver

19/10/1979
Outdoor
02/12/2005
15 YEARS AND 9 MONTHS
Male
(Phone) +65-90034214
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teknofuzion08@hotmail.com
BLK 414B FERNVALE LINK #09-04
-
792414
Yes
-
No
-
-
Insurance Company of Other Vehicle Owned by Driver

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Side Swipe
DRIZZLING
Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No
2
Yes
Yes
Yes
1
No

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address
Was notice of intended Prosecution given?
If yes, against whom?

Yes
Sengkang Neighbourhood Police Centre
(Phone) +65-18003438999
(Fax) +65-63438939
2 Sengkang Square #01-02
No
-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ACCIDENT STATEMENT AS ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Was there any audio recorded?

Yes
No
No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category

SLD2828C
Toyota
Vellfire
-
Black
Private car

Company Name
Damage
property damaged in accident
Passenger (Including Driver)

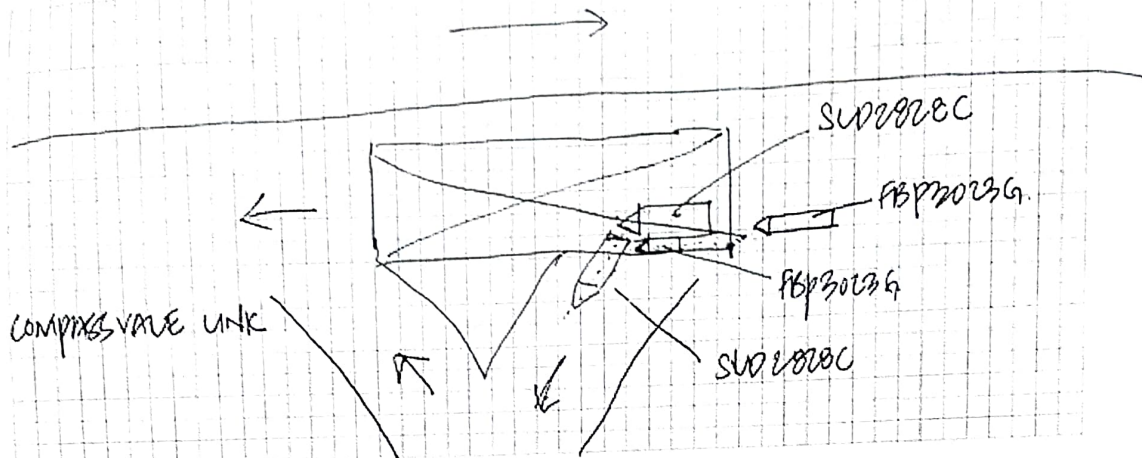
INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Gender
Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

MOHD AZMAN BIN NIK MOHD NAZIR
Male
(Phone) +65-90034214
BLK 414B FERNVALE LINK #09-04
-
792414
41
SLIGHT DEGREE OF INJURY - OBTAINED 2 DAYS MC
FBP3023G
No
Yes

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle ~~FBP~~ SUP2828C was in the yellow box while I was at the back of the vehicle. Condition of the road surface was ~~a bit~~ wet during that period. The driver moved the vehicle and I follow up the flow. Driver then suddenly made a left turn without signalling the vehicle. When I saw the vehicle was turning left, I made an emergency brake and try to avoid been hit. I was at about 20km/h while moving forward. When I was trying to avoid the vehicle by swerving my motorcycle to left, the car left front passenger hit by the motorcycle handle. The car did not stop moving when it hit, but however, driver kept on moving the vehicle and I fell. Driver then stopped the vehicle when she noticed that the vehicle had hit. Driver came out from the vehicle and said that she did not see me approaching. She said that the vehicle is wide that she could not see the blind spot.

DECLARATION

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

Polyholder's Signature
Date & Time: 01/10/21

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

Reporting Centre Personnel's Signature
Name: JOELLE TAN
NRIC/FIN No.: AMK AUTOPONT PTE LTD
01.10.2021