



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	28/01/2022 17:20 (SGT)
Date of Accident	27/01/2022 17:20 (SGT)
Exact Location of Accident	Clementi Ave 2, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBR3069P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TIJAN BIN MOHAMED RIDWAN
NRIC No	S8031559G
Email Address	tijanmr@yahoo.com.sg
Mobile Phone No	(Phone) +65-90099467
Alternative Phone No	+65-90099467

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	XMAX300
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	300

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5122839708
Cover Note Number	-

DRIVER

Name of Driver	TIJAN BIN MOHAMED RIDWAN
NRIC No	S8031559G



Date Of Birth	03/10/1980
Occupation	Indoor
Date Of Driving Pass	03/10/2018
Driving experience	3 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90099467
Alt. Phone Number	+65-90099467
Email Address	tijanmr@yahoo.com.sg
Address	BLK 364 CLEMENTI AVE 2 #12-451
Address complement	-
Postcode	120364
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	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 POLICE REPORT: T/20220128/7006.

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	SMT5940U
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	VEHICLE B
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS


INJURED 1

Name of injured person	TIJAN BIN MOHAMED RIDWAN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBR3069P
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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.



Policyholder's Signature / Date &
Time

Sketch Plan

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

Witnessed by Reporting Centre
Personnel



Describe Circumstances of the Accident

Refer to police report.

Declaration

We declare the foregoing particulars are true in every respect.

[Handwritten signature]

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel





















SINGAPORE
POLICE FORCE



T/20220128/7006

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

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Report No. T/20220128/7006

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/01/2022 12:28	Video Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: TIJAN BIN MOHAMED RIDWAN			Address: 364 CLEMENTI AVENUE 2 #12-451 SINGAPORE 120364		
ID Type / ID No.: NRIC NO / S8031559G			Contact No.: Home/Office: Mobile: 90099467		
Nationality: SINGAPORE CITIZEN			Email: TIJANMR@YAHOO.COM.SG		
Sex: Male	Age: 41	Date of Birth: 03/10/1980	Type of Informant: Rider		
Race: Malay			Language: English	Institution / School Name:	
Occupation: IT business process consultant/business analyst			Driving Licence Information: Class: 2B.2A		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/01/2022 17:20	Type of Location: T-Junction
Location: CLEMENTI AVENUE 2				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 5 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
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
FBR3089P	Motorcycle	YAMAHA	XMAX 300	Green	Slightly Damaged	0
SMT5940U	Car	SANGYANG		Blue		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20220128/7006

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

Report No. T/20220128/7006

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBR3069P	NTUC Income Insurance Co-Operative Limited			

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	TIJAN BIN MOHAMED RIDWAN		ID No.	S8031559G
Related Vehicle	FBR3069P (Motorcycle)		Contact No.	90099467
Hospital/Clinic	GLENEAGLES HOSPITAL		Class of Driving Licence & Expiry	Class: 2B,2A Date of Expiry: NIL
Date	27/01/2022		Date	27/01/2022
No. of Days granted Medical Leave		05	Degree of	Slight
Driver				
Name	LEROY MONG		ID No.	S7403934J
Related Vehicle	NIL		Contact No.	85001640
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

Brief Details.

On 27/01/2022 at about 1720hrs to 1725hrs. I was queuing up to exit the gantry of Cleemnti Ave 2 carpark (nearest block, Blk 350 Clementi Ave 2) on my motorcycle, Yamaha XMAX 300 bearing registration number FBR3069P. There was a yellow box just before the gantry thus I waited behind the yellow box as there was already two vehicles in front of me.

I wish to mention that the second vehicle as partially inside the yellow box. When I saw the first car leaving the gantry, I slowly moved off. However, when I noticed that the second vehicle did not move, I stopped as well.

Just after stopping, I was hit from behind and fell on my right side. I hit my head as I fell. I stayed laying down while passerbys helped me. They tried to bring me up however I had a headache thus requested them to give me awhile before I got back up.

After about 5 mins, I got up with some help and took some pictures of the accident. The



SINGAPORE
POLICE FORCE



T/20220128/7005

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

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Report No. T/20220128/7006

CONTINUATION OF REPORT

driver of the vehicle which hit me and a few CISCO officers who were nearby offered to call and ambulance for me however I refused. I then noticed that it was a Ssangyong car with registration number SMT5940U which hit me.

I picked up my bike and also exchanged particulars with the driver. Both driver and CISCO officers asked another time if I require ambulance which I rejected.

The CISCO officer then informed me that if I did not require ambulance assistance, I should move my vehicle aside and discuss with the driver further. This is also to prevent congestion.

During the discussion, the driver offered to compensate me via Private Settlement for the amount of S\$1000/- however I rejected and informed him that I would prefer claiming through insurance.

On the same day at about 2030hrs, I went to Gleneagles Hospital located at 6A Napier Road as I was feeling having a bad headache and pains on my neck, shoulder and at the back of the head. The doctor then suggested for me to go for a CT scan but the scan did not show any sever injuries. The doctor then gave me 5 days Medical Leave from 27/01/2022 to 31/01/2022.

Damages found on my motorcycle: Scratches on exhaust, right side fairing. Dented rear licence plate.



SINGAPORE
POLICE FORCE



T/20220128/7006

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

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Report No. T/20220128/7006

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 /
TAN JEOK LENG
Contact No.: 65476151

This report is lodged at Clementi NPC Kiosk 1
NP168

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

Date/Time:
28/01/2022 12:28

Classification Of Case:



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5122839708

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle

: FBR3069P

Chassis Number

: MH3SH0841LK009552

2. Name of Policyholder

: TIJAN BIN MOHAMED RIDWAN

3. Effective Date of Insurance

: 07 Jul 2021

4. Expiry Date of Insurance

: 03 Oct 2022

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1) : S\$500

EXCESS (SECTION 2) : N/A

EXCESS (THEFT OUTSIDE SINGAPORE) : PLEASE REFER OVERLEAF

INSURE WITH COE : YES

NAMED DRIVER (1) : TIJAN BIN MOHAMED RIDWAN

NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : LOOI'S MOTOR ENTERPRISE PTE LTD

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : DICKSON INSURANCE AGENCY PTE. LTD. (00000573832)

Date of Issue : 26 Dec 2021 13:25 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive