

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 25/06/2021 10:36 (SGT)
Date of Accident 24/06/2021 12:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information BLK 824 YISHUN ST. 81 OPEN CAR PARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FX361K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MOHAMED FAISAL BIN MOHAMED IBRAHIM
NRIC No
Email Address
Mobile Phone No (Phone)
Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda
Model CB400
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 399

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number D20MTMC01006898
Cover Note Number 27/10/20 - 26/10/21

DRIVER

Name of Driver MOHAMED FAISAL BIN MOHAMED IBRAHIM
NRIC No

Date Of Birth [REDACTED]
 Occupation Indoor
 Date Of Driving Pass 09/10/2018
 Driving experience 2 YEARS AND 8 MONTHS
 Gender Male
 Mobile Number (Phone) [REDACTED]
 Alt. Phone Number [REDACTED]
 Email Address [REDACTED]
 Address [REDACTED]
 Address complement -
 Postcode [REDACTED]
 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 Hit and run / Vandalism / Damaged whilst parked
 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? No
 Was any injured conveyed to hospital by ambulance? -
 Was any other vehicle or property damaged? Yes
 Number of Passengers (Including Driver) 0
 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 Yishun South Neighbourhood Police Centre
 Police Station Phone No (Phone) +65-18008522999
 Alt. Police Station Phone No (Fax) +65-68522239
 Police Station Address 32 Yishun Street 81 Singapore 768456
 Was notice of intended Prosecution given? No
 If yes, against whom? -

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment? Yes
 Was there any video captured by Car Camera? Yes
 Reasons for not uploading a video of the accident FOOTAGE PROVIDED BY NEIGHBOUR'S CAR IN-BUILT CAMERA AND WILL FORWARD TO REPAIR WORKSHOP.
 Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SH6608R
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -

Vehicle Colour	Blue
Vehicle Category	Taxi
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)	-

SKETCH PLAN

1. VEHICLE NO: FX361K

2. INSURER CO: Sompo

3. ACCIDENT DATE & TIME: 24/6/21 @ 12:00pm

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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.

[Handwritten Signature]

Policyholder's Signature / Date & Time

[Handwritten Signature]

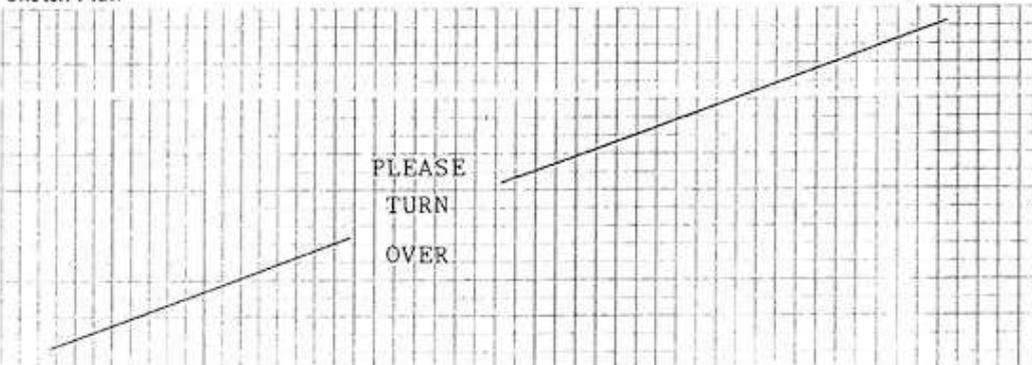
Driver's Signature (if driver is not the policyholder) / Date & Time

[Handwritten Signature] 24/6/21

Witnessed by Reporting Centre Person(s)

(45)

Sketch Plan

























**SINGAPORE
POLICE FORCE**



T/20210624/2032

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

1 of 3

Report No. T/20210624/2032

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/06/2021 13:08	Vide Report No.: L/20210624/0060	Station Diary No.: 20
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Informant's Particulars			
Name of Informant: MOHAMED FAISAL BIN MOHAMED IBRAHIM		Address: [REDACTED]	
ID Type / ID No: NRIC NO / [REDACTED]		Contact No.: Home/Office: [REDACTED] Mobile: [REDACTED]	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 28	Date of Birth: [REDACTED]	Type of Informant: Rider
Race: Indian		Language:	Institution / School Name:
Occupation: IMPORT AND EXPORT OFFICER		Driving Licence Information: Class: [REDACTED] Date of Expiry: [REDACTED]	

General Information of the Accident				
Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/06/2021 12:00	Type of Location: OPEN CARPARK	
Location: YISHUN STREET 81				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic		
Type of Collision: HIT AND RUN			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No. FX361K	Type Motorcycle	Make HONDA	Model CB400	Color Yellow	Condition Slightly Damaged	No of Passenger 0

Details of Vehicle Insurance				
Vehicle No. FX361K	Insurance Company TENET SOMPO INSURANCE PTE. LTD.	Insurance No D20MTMC0100689 8	Effective 27/10/2020	Expiry Date 26/10/2021



**SINGAPORE
POLICE FORCE**



T/20210624/2032

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

2 of 3

Report No. T/20210624/2032

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMED FAISAL BIN MOHAMED IBRAHIM	ID No.	[REDACTED]
Related Vehicle	NIL	Contact No.	[REDACTED]
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 the 23rd June 2021 at 1900hrs, I parked my motorcycle bearing plate number FX361K at Blk 824 Yishun Street 81 open carpark. I am unable to see the parking lot number as the number lot have faded however I parked near to lift B lobby. Everything was intact when I last parked my motorcycle. On the 24 June 2021 at 1200hrs, I wanted to pay my motorcycle installment payment at Bukit Merah and I noticed that 1) broken right mirror, 2) dented handle bar, 3) brake lever damage, 4) engine casing dented, 5) front fairing crack, 6) mis-alignment to my front wheel. I am sure that it was a hit and run and I called 999. Shortly after, Traffic Police came to access the situation. I was then given a case card and was asked to lodge a Police report. I have not send my motorcycle to the workshop and I estimated that the damages repair would be \$2800/-. There is no witness who had came forwarded regards to the accident. I am lodging the Police report insurance claim and to seek Traffic Police assistance.



**SINGAPORE
POLICE FORCE**



T/20210624/2032

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

3 of 3

Report No. T/20210624/2032

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:
L /
Staff Sgt NASRI BIN JUMARI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
24/06/2021 13:08

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt IRMAN BIN MOHAMAD SAID
Contact No.: 65476145

Classification Of Case:

Authentication Stamp

SN 085



Signature: _____

Singapore Police Force



TRAFFIC POLICE
AMENDMENT

Traffic Police Department
Charge Office
10 Ubi Avenue 3
Singapore 408865

NP 168 No. : T/20210624/2032 Name : Mohamed Faisal Bin
Mohamed Ibrahim
Accident Date/Time : 24/06/2021 @ 1200hrs Address : 824 Yishun Street 81 #08-588
S'pore 760824
Vehicle(s) Involved : FX361K
NRIC No : S9310999F
Tel No : 96364623
Date : 24/06/2021

Dear Sir / Madam

Accident involving FX 361K
along Blk 824 Yishun Street 81 open carpark on 24/06/2021 at 1200 hours

With reference to the above, I have on 24/06/2021 (date) 1308 hours (time) make a
police report at Yishun South NPC (Police Station/NPP/NPC)
In NP 168 – T/20210624/2032

On 24/06/2021 (date), 1529 hours (time) at Yishun South NPC
(Police Station/NPP/NPC), I make the following amendments to the above report;
I would like to state that my contact number is 96364623. To add on, my neighbor has
approached me regarding to the accident and had forwarded me the video. The vehicle that have
hit onto my motorcycle is a taxi bearing SH6608R.

Yours Faithfully,

(Signature)

FOR OFFICIAL USE

If a police officer recorded these amendments, please complete the following.

Name / Rank No : SS Nasri
Date and Time : 24/6/21 @ 1538hrs
Station Dairy No : -



Traffic Police Department
Charge Office
10 Ubi Avenue 3
Singapore 408865

Signature

: 

PR/FX361K/24062021



Primero Racing
20 Bukit Batok Crescent
Enterprise Centre, #01-19
Singapore 658080

T: 62623305 M: 81611427

Reg.: 53252665A

www.primeroracing.com

Gs/21/3642/PMR/jn

FINAL BILL FOR VEHICLE DAMAGE CLAIM FOR FX361K

NAME OF OWNER: **MOHAMED FAISAL BIN MOHAMED IBRAHIM**
ADDRESS: **C/O 20 BUKIT BATOK CRESCENT, #01-19 ENTERPRISE
CENTRE SINGAPORE 658080**

FINAL REPAIR COST

MAKE/MODEL: **HONDA CB400**

REGISTRATION NO: **FX361K**

1. TO CONTRACT LUMP SUM REPAIR AS RECOMMENDED BY
SURVEYOR : **S\$3,650.00**



TOTAL REPAIR COST: **S\$3,650.00**

**TOTAL SUM PAYABLE TO PRIMERO RACING IS THREE THOUSAND &
SIX HUNDRED FIFTY DOLLARS ONLY**



LEE APPRAISAL SERVICES

220A Sumang Lane #06-75 (S)821220
Tel: 9101 7844 Fax: 6996 6442

Business Reg. No.: 53387981K
Email: dylanlee.as@gmail.com

G9/21/3642/PMR/DL

Loss Adjuster, Automotive Inspection, Evaluation & Consultation

Our Reference : TP/2106/FX361K/PR

Mr Mohamed Faisal Bin Mohamed Ibrahim

Bill No. : LA21080021

C/O KSCGP Juris LLP
133 New Bridge Road #17-03
Chinatown Point
Singapore 059413

Bill Date : 30 Aug 2021

To our services rendered in connection with the below matters:-

<u>Description</u>	<u>Amount</u>
Survey fees	\$ 300.00
Transportation	\$ 180.00
Photographs (66) Copies	\$ 66.00
Total:	\$ 546.00

Dollars: Five Hundred And Forty Six Only.

Please quote our Bill No. or return a copy of our bill with your remittance.

Cheque should be made payable to "Lee Appraisal Services",
or via PayNow Corporate to UEN "53387981K".

LEE APPRAISAL SERVICES



Lee Kah Pang

Dip Mech Engr, BCompSc



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Email: dylanlee.as@gmail.com

Loss Adjuster, Automotive Inspection, Evaluation & Consultation

Our Reference : TP/2106/FX361K/PR

VEHICLE APPRAISAL REPORT

Mr Mohamed Faisal Bin Mohamed Ibrahim

Report Date : 30 Aug 2021

C/O KSCGP Juris LLP

133 New Bridge Road #17-03

Chinatown Point

Singapore 059413

REFERENCE

Your Reference No. : Not Advised
Type of Appraisal : Third Party
Date of Accident : 24 Jun 2021

Date of Inspection : 28 Jun 2021
Date of Re-inspection 1 : 03 Aug 2021
Date of Re-inspection 2 : 27 Aug 2021

PARTICULARS OF VEHICLE

Registration No. : FX361K
Make : Honda
Model : CB400
Color : Black
Manufacturing Year : 2005

First Reg Date : 11 May 2006
COE Expiry : 31 May 2026
Odometer : No key
Engine No. : NC23E3000298
Chassis No. : JH2NC39935M100309

CONDITIONS OF VEHICLE (STATIC CHECK AT TIME OF INSPECTION ONLY)

Front Brake : Serviceable
Rear Brake : Serviceable

Steering : Distorted
Modification : None

TYRE / CONDITION

<u>Location</u>	<u>Make & Size</u>	<u>Thread</u>
Front	Pirelli 120/60 R17	4 mm
Rear	Pirelli 160/60 R17	5 mm

DAMAGE PROFILE

The vehicle sustained damages on all sides.

Please refer to photographs and assessment of repairs for details.

ASSESSMENT SUMMARY

Repair cost to the vehicle is assessed as **\$3,650.00** on **lump sum basis**

Estimated period required for repairs: **(5) days**

Survey conducted at: **Primero Racing**

Enclosed (66) photographs depicting damages to the vehicle

The survey was conducted on a *WITHOUT PREJUDICE* basis.



LEE APPRAISAL SERVICES

220A Sumang Lane #06-75 (S)821220

Tel: 9101 7844

Fax: 6996 6442

Business Reg. No.: 53387981K

Email: dylanlee.as@gmail.com

Loss Adjuster, Automotive Inspection, Evaluation & Consultation

Our Reference : TP/2106/FX361K/PR

ASSESSMENT FOR REPAIR : FX361K

<u>Qty</u>	<u>Description</u>	<u>Condition</u>	<u>Repairer's Estimate</u>	<u>Our Assessment</u>
1 pc	Handle bar	Distorted	160.00	160.00 /-
1 set	Handle bar end	Bent	100.00	100.00 60-
1 set	Handle bar grip	Cut	46.00	46.00 /-
1 pc	Front fender	Cut	235.00	235.00 196-
2 pcs	Fork assy @ 750.00 700	Cut / Leaked	1,500.00	1,500.00 1400-
1 pc	Fork under bracket	Distorted	265.00	265.00 /-
1 pc	Front wheel	Warped	780.00	780.00 650-
1 pc	Front wheel axle	Cut	65.00	65.00 /-
1 pc	Under cover	Cut	155.00	155.00 /-
2 pcs	Body side cover @84.00	LH Broken	168.00	84.00 x nn
1 pc	Rear cover complete	Usable	325.00	~
			<u>3,799.00</u>	<u>3,390.00</u>
Less 10%			379.90	339.00
			<u>3,419.10</u>	<u>3,051.00</u>

Special Nett Items

1 set	Steering cone & bearing	Necessary	120.00	100.00 60-
1 set	Mirror	Broken	120.00	120.00 80-
1 pc	Clutch lever	Usable	86.00	~
1 pc	Brake lever	Broken	86.00	86.00 70-
1 pc	Head cowling	Cracked	292.00	292.00 240-
1 pair	Front side covers	Cut	215.00	215.00 /-
1 pc	Rear slider RH	Cut	60.00	50.00 /-
			<u>979.00</u>	<u>863.00</u>

Total Parts

4,398.10 3,914.00

Labour Charges

1	Repair fuel tank	300.00	280.00 100-
2	Renew damaged parts & repair affected areas	450.00	400.00 300-
		<u>750.00</u>	<u>680.00</u>

Total Parts & Labours Concluded

5,148.10 4,594.00

Lump Sum Repair Adjustment

3,650.00

3 days



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Email: dylanlee.as@gmail.com

Loss Adjuster, Automotive Inspection, Evaluation & Consultation

Our Reference : TP/2106/FX361K/PR

ADJUSTMENT/RECOMMENDATIONS

We have thoroughly inspected each and every item on the estimate against the physical damage found on the vehicle. We have listed the breakdown of our findings and our recommendations as per assessment above.

Yours faithfully,
LEE APPRAISAL SERVICES

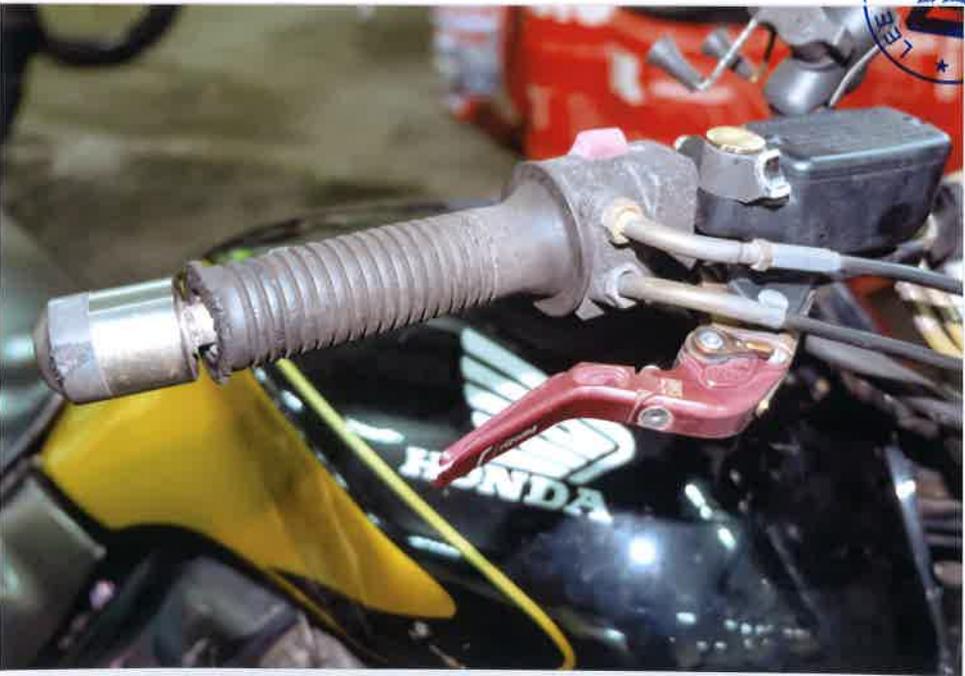
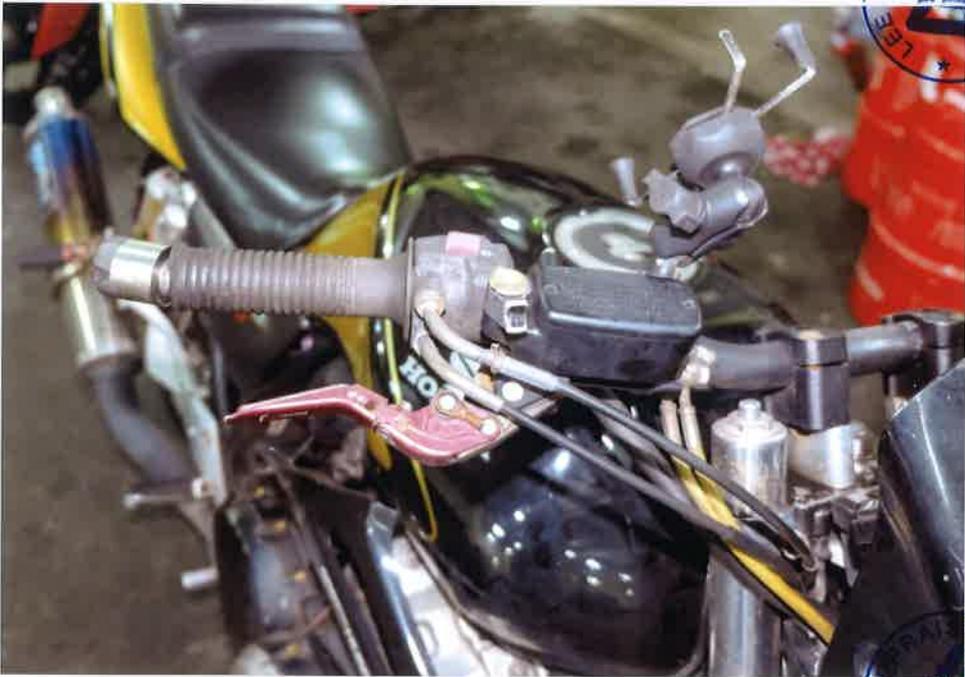


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Gs/21/3642/PMR/jr

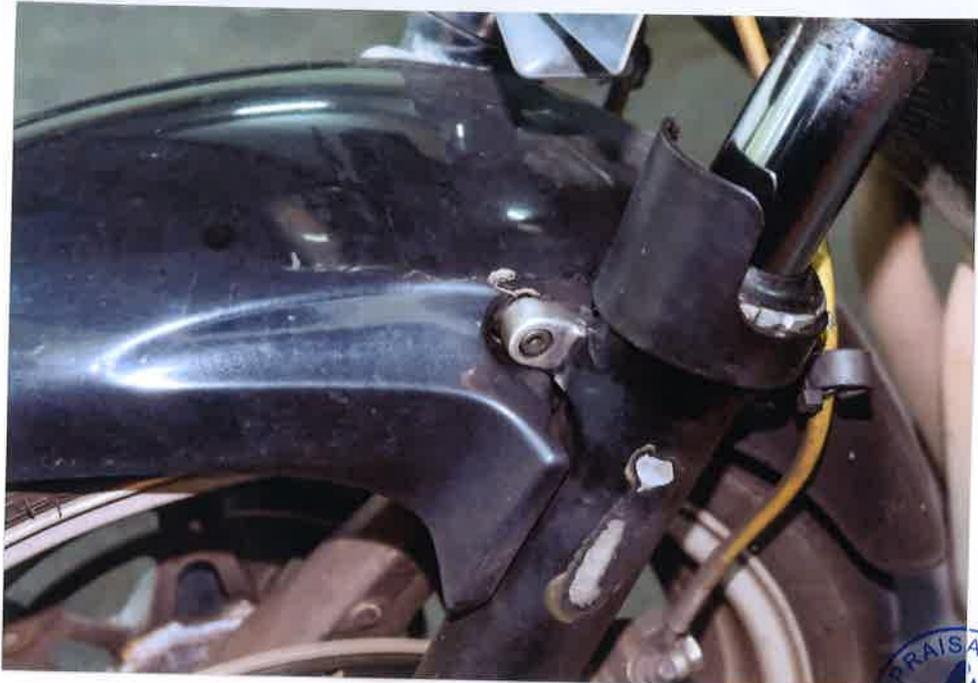


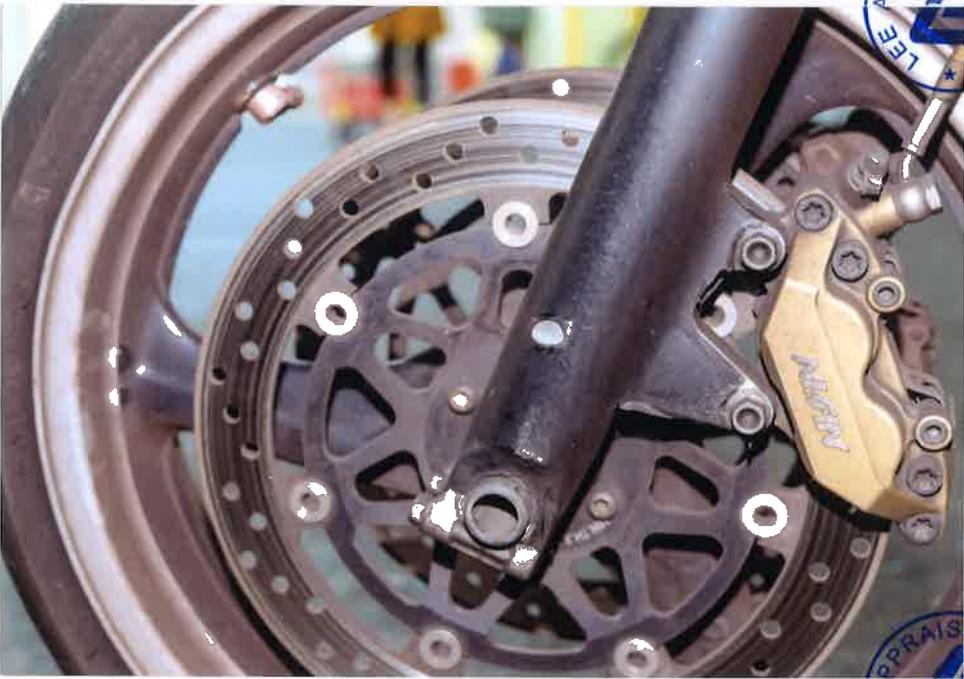








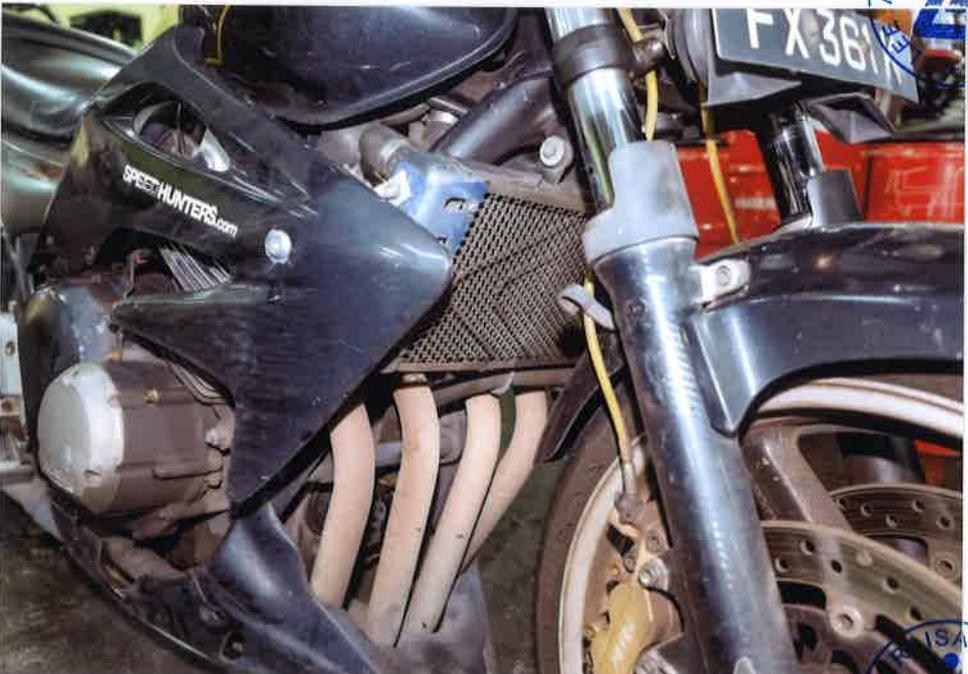




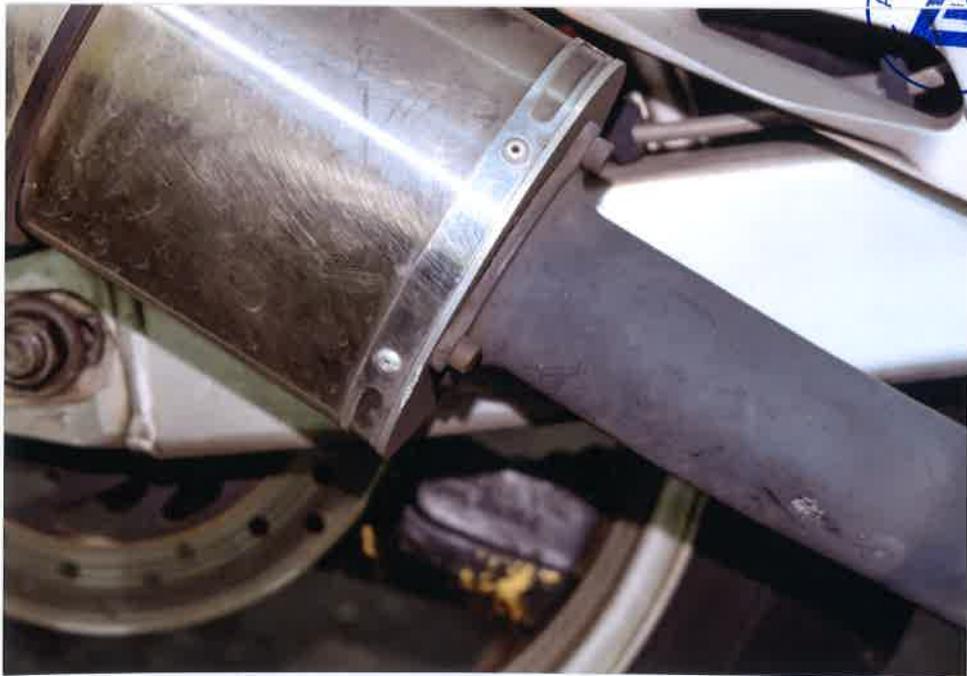










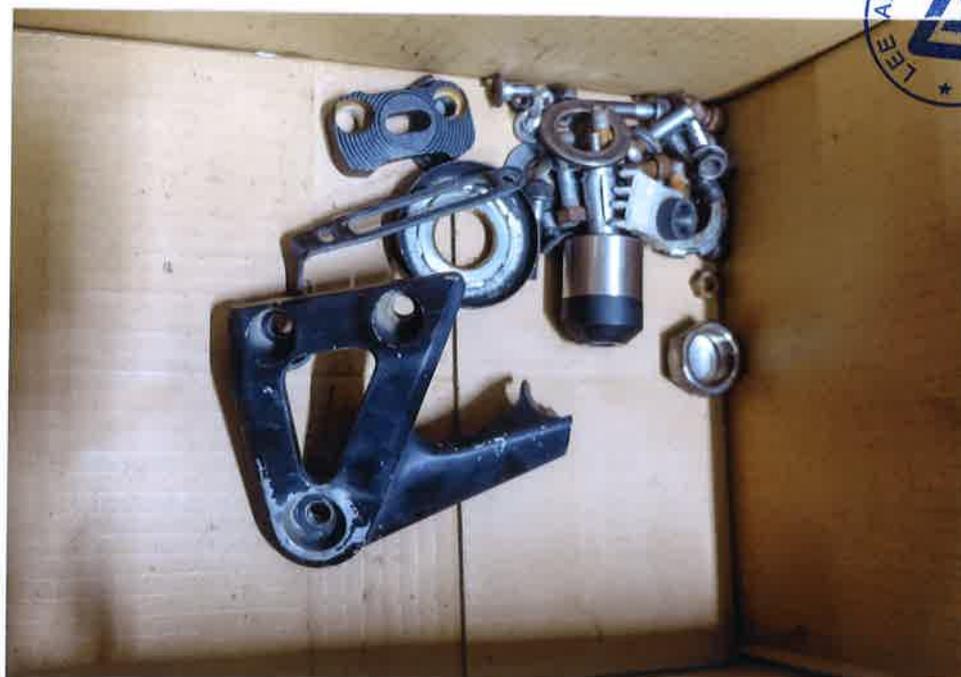




Re-Survey



Re-Survey



Re-Survey



Re-Survey





After Repair





After Repair





After Repair





After Repair



Your Ref : SH 6608R
Our Ref : **FX 361K/PMR/jn/cl**
Date : 25 June 2021

Fax : **6538 3708**
Tel : **3152 0986**
Email : **jaga@kscgp.com**

AXA INSURANCE PTE LTD

BY EMAIL ONLY

DATE OF ACCIDENT: 24 JUNE 2021

NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY / INSPECTIONS

We are instructed by the owner of FX 361K to notify you of a road traffic accident on 24 June 2021 at about 12.00 p.m. at Block 824 Yishun Street 81 open car park, involving our client's vehicle registration number FX 361K and vehicle registration number **SH 6608R** which was insured by you at the material time. A copy of the Singapore accident statement is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know within 2 working days excluding any intervening Saturday, Sunday and/or Public Holiday of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

NB. Any settlement or offer is on the express condition that this settlement is in respect of our client's claim for property-related damages only and shall not preclude client's driver/passenger from claiming injury-related damages arising from this accident.

Yours faithfully,

CL

Enc.

Your Ref : S1M03C10_TP
Our Ref : **FX 361K/PMR/jn/cl**
Date : 25 June 2021

Fax : **6538 3708**
Tel : **3152 0986**
Email : **jaga@kscgp.com**

AXA INSURANCE PTE LTD

BY EMAIL ONLY

DATE OF ACCIDENT: 24 JUNE 2021

NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY / INSPECTIONS

We refer to your email dated 25 June 2021.

Please be informed that our client is not agreeable to your proposed motor surveyors. Instead we propose you to choose a surveyor from our client's list of surveyors as appended below:-

S/no.	Name of Surveyor	Company Name
1.	Dylan Lee	Lee Appraisal Services
2.	Errol Tan	Pro Plus Automobile Engineers
3.	Dave Chang	Sincere Appraisal Services
4.	Lee Kok Weng	Lee Automobile Services

Please be informed that if we do not hear from you within 2 working days from the date hereof, we will assume, as per the Protocol, that you have no objections to our list of motor surveyors. You will be deemed to have agreed to any of the above motor surveyors as a "single joint expert". We will inform you who the "single joint expert" is in due course.

If you object to our client's list of motor surveyors, we will accordingly inform the client to instruct his choice of motor surveyor to conduct the pre-repair survey. Also, please let us know within 2 working days excluding any intervening Saturday, Sunday and/or Public Holiday of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle failing which our client will commence repairs thereafter without any further notice or reference to you. Please be informed that the said vehicle can be surveyed / inspected at:

Address : Primero Racing
20 Bukit Batok Crescent
#01-19 Enterprise Centre
Singapore 658080
Contact Person/Tel : Raj Kumar (Tel: 81611427 / 62623305)

Yours faithfully,

F CL

Your Ref : S1M03C10_TP

Our Ref : **FX 361K/PMR/jn/cl**

Date : 25 June 2021

Acknowledgement

This is to confirm that I _____ *[Full Name of Surveyor]* of _____ *[Surveyor's Company]* have completed as follows:-

(a) Pre- Repair Survey/Inspection on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(b) Pre- Repair Survey/Inspection (during dismantling) on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(c) Re-inspection of new replacement part (part by part) on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(d) Post – Repair Survey/Inspection on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Date of Request: 12/07/2021

Your Ref No: FX361K/PMR/jn/cl

Dear Sir/Madam,

Date of Accident: 23/06/2021 00:00 (SGT)

Vehicle No: FX361K

Place of Accident: Yishun Street 81, Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SH6608R	Yishun Street 81, Singapore	(29.00)	1	(27.10)
GST Amount				(1.90)
Total Amount Due (GST Inclusive)				(29.00)

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.

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 26/06/2021 16:08 (SGT)
Date of Accident 23/06/2021 22:20 (SGT)
Exact Location of Accident Yishun Street 81, Singapore
Additional Location Information AT BLK 824 YISHUN ST 81 CARPARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SH6608R

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD

VEHICLE PARTICULARS

Manufacturer Toyota
Model Prius
Variant -
Vehicle Category Taxi
Transmission Auto
CC 1798

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage ThirdPartyFireTheft
Fleet Policy Yes
Policy Number VFX/P2419138
Cover Note Number -

DRIVER

Name of Driver LOW HOCK HUAT
NRIC No S0171864I
Address APT BLK 612 ANG MO KIO AVENUE 4
Address complement #11-1125
Postcode SINGAPORE 560612
Does Driver Own Other Vehicles? No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Collision - Head to Rear
Weather Conditions Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No
Was anybody injured in the Accident? No
Was any other vehicle or property damaged? Yes
Number of Passengers (Including Driver) 1

CIRCUMSTANCES OF ACCIDENT

ON 23/06/21 AT 2220HRS I WAS DRIVING VEHICLE (SH6608R)AT BLK824 YISHUN ST 81 CARPARK.I REVERSED MY VEHICLE BECAUSE ITS WAS DEAD END.AS I WAS REVERSING MY VEHICLE FRONT LEFT HIT ONTO MOTORCYCLE B FRONT TYRE.MOTORCYCLE B FALL DOWN SO I CARRY THAT MOTORCYCLE AND PUT BACK TO SAME POSITION. UNABLETO EXCHANGE PARTICULAR AS NO ONE THERE.NO INJURIES.

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? Yes
Reasons for not uploading a video of the accident FILE NOT SUITABLE
Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number -
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Motorcycle
Name of Driver -
Insurance Company Name -

Describe Circumstances of the Accident

ON 23/06/21 AT 2220HRS I WAS DRIVING VEHICLE SH6608R AT BLK824 YISHUN ST 81 CARPARK.I REVERSED MY VEHICLE BECAUSE ITS WAS DEAD END.AS I WAS REVERSING MY VEHICLE FRONT LEFT HIT ONTO MOTORCYCLE B FRONT TYRE.MOTORCYCLE B FALL DOWN SO I CARRY THAT MOTORCYCLE AND PUT BACK TO SAME POSITION. UNABLE TO EXCHANGE PARTICULAR AS NO ONE THERE.NO INJURIES.

Declaration

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

 Policyholder's Signature / Date & Time

Low

 Driver's Signature (if driver is not the policyholder) / Date & Time
23/06/21 19:50 hrs

[Signature]

 Witnessed by Reporting Centre Personnel *Balaji*



Describe Circumstances of the Accident

ON 23/06/21 AT 2220HRS I WAS DRIVING VEHICLE SH6608R AT BLK824 YISHUN ST 81 CARPARK.I REVERSED MY VEHICLE BECAUSE ITS WAS DEAD END.AS I WAS REVERSING MY VEHICLE FRONT LEFT HIT ONTO MOTORCYCLE B FRONT TYRE.MOTORCYCLE B FALL DOWN SO I CARRY THAT MOTORCYCLE AND PUT BACK TO SAME POSITION. UNABLE TO EXCHANGE PARTICULAR AS NO ONE THERE.NO INJURIES.

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Policyholder's Signature / Date & Time

Low

Driver's Signature (if driver is not the policyholder) / Date & Time
23/06/21 19:50 hrs



Witnessed by Reporting Centre Personnel *Balaji*















Enquire Vehicle Owner Details

Enquire Vehicle Owner Details (As At 24 Jun 2021 / 12:00:00)

Vehicle Owner Details

Owner ID Type:

Company

Owner ID:

199303821R

Owner Name:

COMFORT TRANSPORTATION PTE LTD

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.:

383

Registered Street Name:

SIN MING DRIVE

Registered Unit No.:

-

Registered Building Name:

GAS BUILDING

Registered Postal Code:

575717

Vehicle Insurance Details

Vehicle No.:

SH6608R

Make Description/Model:

TOYOTA / PRIUS HYBRID 1.8 CVT

Insurance Company Name:

AXA INSURANCE PTE LTD

Save as PDF

OK →

Print

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 25 Jun 2021 / 13:12:05

Receipt Date/Time : 25 Jun 2021 / 13:12:04

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210625-002088

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SH6608R As at 24 Jun 2021/12:00:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SH6608R Enquiry Fee 20210625131058583730	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
Paid By				
	421808XXXXXX6463	eNETS Credit Card		7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.