

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 21/03/2022 17:39 (SGT)
Date of Accident 19/03/2022 19:30 (SGT)
Exact Location of Accident Bartley Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBC561H

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner MUNSHE CORPORATION PTE LTD
Company Reg No 201843285Z
Email Address MUNSHICORPORATIONBD@GMAIL.COM
Mobile Phone No (Phone) +65-83742531
Alternative Phone No (Office) +65-69287406

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Fb70bb1srdea
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Goods vehicle
Transmission Manual
CC 2977

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number Z22VC05010612
Cover Note Number -

DRIVER

Name of Driver UDDIN NIZAM
Passport No/FIN G2306528U

Date Of Birth	28/12/1982
Occupation	Outdoor
Date Of Driving Pass	12/11/2014
Driving experience	7 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83742531
Alt. Phone Number	-
Email Address	MUNSHICORPORATIONBD@GMAIL.COM
Address	101 KITCHENER ROAD #16-01 JALAN BESAR PLAZA
Address complement	-
Postcode	208511
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Collided into Motorcyclist
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?	Yes
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

AS PER POLICE REPORT NO. T/20220320/7007

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	FBM3637B
Vehicle Manufacturer	Yamaha
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Green
Vehicle Category	Motorcycle

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	-
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBM3637B
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	UDDIN NIZAM
Gender	Male
Phone No	(Phone) +65-83742531
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBC561H
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

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.



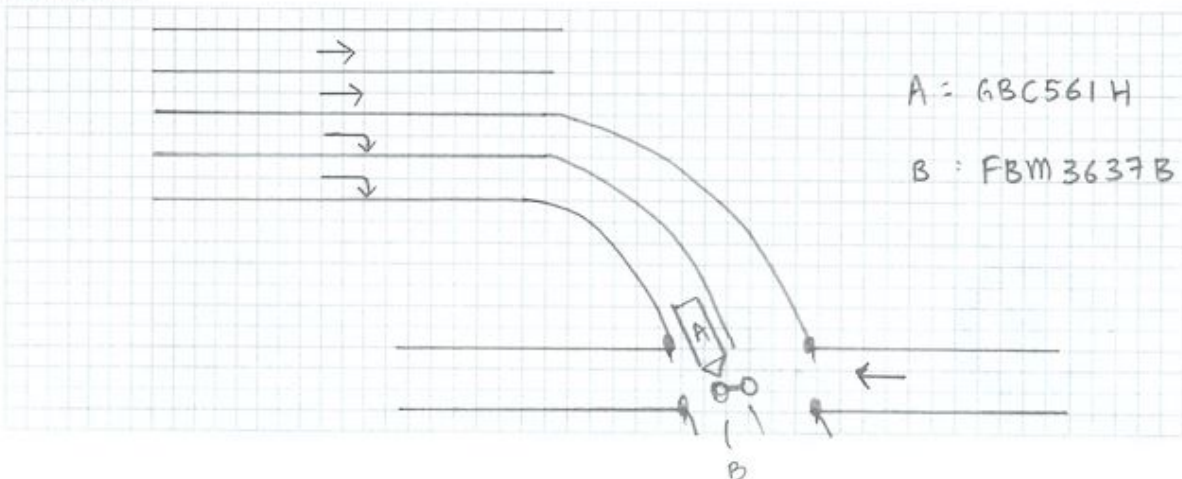
21/03/22



Policyholder's Signature / Date & Time

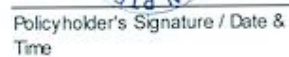
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

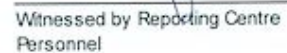
Sketch Plan

As per police report no. T/20220320/7007

We declare the foregoing particulars are true in every respect.



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



















CHASSIS NUMBER	
U.W	: 1800
M. L. W	: 3390
TYRE	: (F) 185 75R 15
SIZE	: (R) 185 75R 15 D
PASSENGER CAPACITY : 1 DRIVER 2 OTHERS	



**SINGAPORE
POLICE FORCE**



T/20220320/7007

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

1 of 3

Report No. T/20220320/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/03/2022 10:05	Vide Report No.: E/20220319/0170	Station Diary No.:
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Informant's Particulars

Name of Informant: UDDIN NIZAM			Address: 101 KITCHENER ROAD #16-01 JALAN BESAR PLAZA SINGAPORE 208511		
ID Type / ID No.: FIN NO / G2306528U			Contact No.: Home/Office: Mobile: 83742531		
Nationality: BANGLADESHI			Email: mdlton3542@gmail.com		
Sex: Male	Age: 39	Date of Birth: 28/12/1982	Type of Informant: Driver		
Race: Bangladeshi			Language: English		Institution / School Name:
Occupation: Worker Cum Driver			Driving Licence Information: Class: 3 Date of Expiry: 11/11/2024		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/03/2022 19:30	Type of Location: X-Junction
Location: BARTLEY ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBM3637B	Motorcycle	YAMAHA		Green	Slightly Damaged	0
GBC561H	Lorry	MITSUBISHI	FUSO	White	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20220320/7007

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

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Report No. T/20220320/7007

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	UDDIN NIZAM	ID No.	G2306528U
Related Vehicle	GBC561H (Lorry)	Contact No.	83742531
Hospital/Clinic	TEKKA CLINIC SURGERY	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: 11/11/2024
Date	19/03/2022	Date	19/03/2022
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

I was travelling along Upper Serangoon Road turning right into Bartley Road towards Kaki Bukit. After turning right into Bartley Road, I was on the right of 2 lanes. While I was along Bartley Road approaching the junction of Upper Serangoon Road, the traffic light was green and I wanted to go straight so I proceeded. While I was proceeding straight, suddenly a motorcycle came from my left side and hit onto the left front side of my lorry. After collision, the rider fell down and I stopped my lorry.



SINGAPORE
POLICE FORCE



T/20220320/7007

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

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Report No. T/20220320/7007

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 /
VILTON HIA WEE SIANG
Contact No.: 65476232

This report is lodged at Traffic Police Kiosk 2
NP168

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

Date/Time:
20/03/2022 10:05

Classification Of Case:

