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.

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 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 07/04/2022 16:25 (SGT) Date of Accident 06/04/2022 09:00 (SGT) Exact Location of Accident Singapore Additional Location Information **BKE TWDS PIE** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

155

Vehicle Registration Number FBT4767R

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner

MUHAMMAD AL-FARABI BIN AZMAN NRIC No. SXXXX556D

Email Address abbyila24@gmail.com Mobile Phone No (Phone) +65-82592824

Alternative Phone No +65-82592824

VEHICLE PARTICULARS

Manufacturer Yamaha Model Aerox

Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle?

No - Claiming third party Vehicle Category Motorcycle Transmission Auto

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd.

Type of Coverage ThirdPartyFireTheft

Fleet Policy

Policy Number A 300556531 VMP

Cover Note Number

DRIVER

CC

Name of Driver MUHAMMAD AL-FARABI BIN AZMAN

NRIC No. SXXXX556D Date Of Birth 22/02/1990 Occupation Indoor Date Of Driving Pass 14/04/2016 Driving experience 6 YEARS Gender Male Mobile Number (Phone) +65-82592824 Alt. Phone Number +65-82592824 Email Address abbyila24@gmail.com Address **BLK 180C MARSILING ROAD** Address complement #03-2244 Postcode 733180 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 - Change/cross lane 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο **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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE POLICE REPORT:T/20220406/7034 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number GBD1925F Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Commercial vehicle

Vehicle Category

 Name of Driver
 SIWALHOD BIN MARI

 NRIC No
 SXXXX333H

 Contact Number
 (Phone) +65-89126256

 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 MUHAMMAD AL-FARABI BIN AZMAN Gender Male Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained **SLIGHT** Injured person in which vehicle? FBT4767R Were seat belts worn? Was this injured conveyed to hospital by ambulance? No

WITNESS DETAILS

WITNESS 1

 Name
 IVAN

 Phone
 (Phone) +65-91682028

 Email

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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' law yers/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
- (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A= FBT 4767R

B = GBD 1925E

BKE towards PIE.

GED 1925E | BIKE A FBT 47671

184 1000

2nd lane

-	PIS	relex	to 1	he poto	report	1 :	7/200	2040	6/7034			
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We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre Personnel



T/20220406/7034

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

2 of 4 Report No. T/20220406/7034

CONTINUATION OF REPORT

215 WELVESON WITH SOUTH	ehicle Insurance	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		Control of the
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBT4767R	MSIG INSURANCE (SINGAPORE)	CN51009523		
	PTE. LTD.	CN31009523	05/03/2022	04/03/2023

Details of Pers	on Involved	CHI KIND	No. 1. THERE IS	4.00 K I	www.manage	
Any Pedestrian	Involved: No		AND DEPTHONESS OF	12501/11-6	EL COLL	
No. of Pedestria	ns Injured: NIL		Use of P	edestria	n Cross	cine: NA
Rider	1. 日本年 1961年	(463 FALE	000 011	cuestria	iii Cros	sing: NA
Name	MUHAMMAD AL-FA	ARABI BIN	AZMAN	ID N	0.	S9006556D
Related Vehicle	FBT4767R (Motorcy	/cle)		Cont	act No.	82592824
Hospital/Clinic	KHOO TECK PUAT	AL.	Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL	
Date	06/04/2022		Date			/2022
No. of Days gran	ited Medical Leave	03	Degree o	of	Slight	
Driver		8666	6年21 中国的 (新	8911-1-1-1	Oligin	
Name	SIWALHOD BIN MA	RI	an Allerta State	ID No.		S1670333H
Related Vehicle	GBD1925E (Lorry)		Contact No.		89126256	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL	
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f	NIL	

Brief Details.

I. Muhammad Al-Farabi Bin Azman, S9006556D, was travelling from woodlands BKE towards PIE as I'm going to work on a usual weekday morning. I was riding in lane 1 within the speed limit, below 90km/h. During my riding, I can see that it is already jam packed with vehicles. Not too sure whether there is any accident beyond the Mandai exit. From my point of view, on the 1st lane is not that jam & the vehicles was moving slowly. I rode slowly lane splitting, but more to the right side as to make the other vehicles see me in their side mirrors (for cars, lorries), decrease my speed as from my experience, there will always be some cars that will change lane abruptly. As I was riding, between 80km/h - 85 km/h, I saw that there was two bikes in front me in some distance away in lane 1. One of it, is FBJ9049A. It was like sudden to me that the lorry from the 2nd lane, GBD1925E, abrupt changed lane in front of me, I braked the hardest that I could but there was not enough braking distance between me & the lorry. If I was riding fast, it can cause more damages to me instead of the lorry. The injuries that I suffered is not that bad. It shows that I did, slow down & braked. I saw the lorry braked to avoid collision in front of him, which is a blue car taxi in 2nd lane before his



T/20/220406/7034

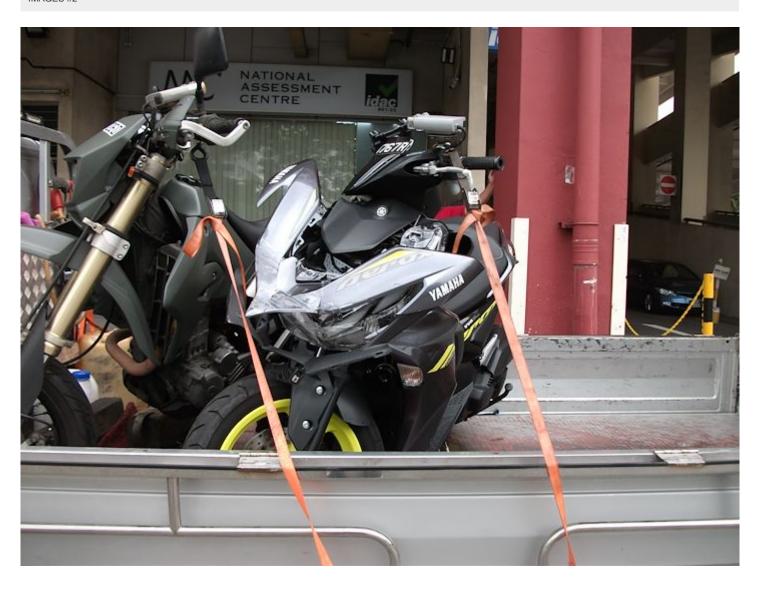
Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20220406/7034

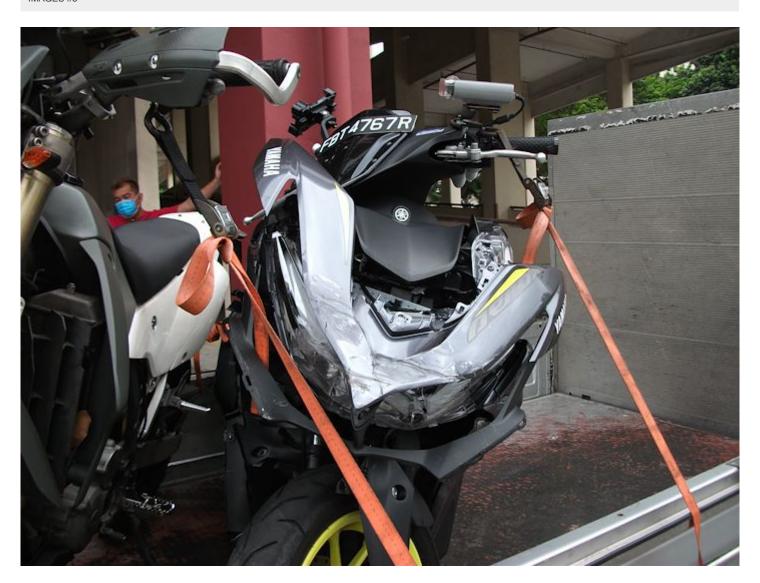
CONTINUATION OF REPORT

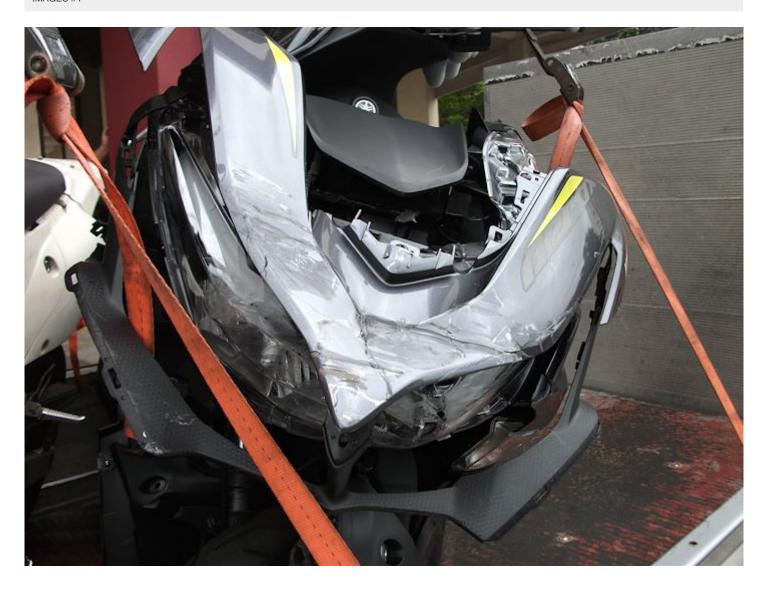
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The other driver police report number, L/20220406/7038





































Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 4 Report No. T/20220406/7034

REPORT OF A TRAFFIC ACCIDENT

e Report M 22 18:20	fade:	Vide Report No.: Station Dia			
nt's Particu	ılars				
Informant: MAD AL-FA	ARABI BIN	Address: 180C MARSILING ROAD #03-2244 SINGAPORE 733180			
/ ID No.:) / S90065	56D	Contact No.: Home/Office: Mobile: 82592824			
ty: ORE CITIZ	EN	Email: abbyila24@gmail.com			
Age: 32	Date of Birth: 22/02/1990	Type of Informant: Rider			
		Language: English	Institution / School Name:		
ion:		Driving Licence Information Class:	: Date of Expiry:		
	at's Particular Informant: MAD AL-F/ ID No.: 0 / S90065: by: DRE CITIZ Age: 32	Informant: MAD AL-FARABI BIN ID No.: 0 / S9006556D by: DRE CITIZEN Age: Date of Birth: 32 22/02/1990	Address		

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/04/2022 09:00	Type of Location BKE towards PIE, after SELETAR EXIT
Location: BUKIT TIMA	HEXPRESSWAY	1		
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
			9	사용 :

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
FBT4767R	Motorcycle	YAMAHA	AEROX GDR155A CVT	Grey		0
GBD1925E	Lorry		TOYOTA	Silver		0



T/20220406/7034

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

2 of 4 Report No. T/20220406/7034

CONTINUATION OF REPORT

Vehicle No.	Insurance Company	Insurance No	Effective	T	
BT4767R	MSIG INSURANCE (SINGAPORE)		Ellective	Expiry Date	
101410111	PTE. LTD.	CN51009523	05/03/2022	04/03/2023	

Details of Pers	on Involved	CHI KIND	No. 1. THERE IS	4.00 K I	www.manage	
Any Pedestrian	Involved: No		AND DEPTHONESS OF	12501/11-6	EL COLL	
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Name	MUHAMMAD AL-FA	ARABI BIN	AZMAN	ID N	0.	S9006556D
Related Vehicle	FBT4767R (Motorcy	/cle)		Cont	act No.	82592824
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Date	06/04/2022		Date			/2022
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Hospital/Clinic	NIL		Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL	
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f	NIL	

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Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 Report No. T/20220406/7034

CONTINUATION OF REPORT

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The other driver police report number, L/20220406/7038





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Report No. T/20220406/7034

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

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Signature Of Informant: The identity of the person making this report has Not applicable been authenticated by Singpass. No signature is required. Date/Time: Signature Of Interpreter: 06/04/2022 18:20 Not applicable Classification Of Case: Officer In Charge Of Case: TP / TPIB / MOHAMED SUFIAN BIN MOHAMED JUNID

NP168

Contact No.: 65476247