

# 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 .....	25/04/2022 18:24 (SGT)
Date of Accident .....	24/04/2022 12:50 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	PIE TOWARDS CHANGI AFTER ENG NEO EXIT
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	FBS593G
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	AHMAD SYAFI'I BIN A EFFENDI
NRIC No .....	S9131767B
Email Address .....	AFIERA1030@GMAIL.COM
Mobile Phone No .....	(Phone) +65-87488257
Alternative Phone No .....	+65-87488257

### VEHICLE PARTICULARS

Manufacturer .....	Yamaha
Model .....	Xmax
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 - 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 .....	ThirdParty
Fleet Policy .....	No
Policy Number .....	5120555496-01
Cover Note Number .....	-

### DRIVER

Name of Driver .....	AHMAD SYAFI'I BIN A EFFENDI
NRIC No .....	S9131767B

Date Of Birth .....	10/09/1991
Occupation .....	Outdoor
Date Of Driving Pass .....	31/12/2020
Driving experience .....	1 YEAR AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-87488257
Alt. Phone Number .....	+65-87488257
Email Address .....	AFIERA1030@GMAIL.COM
Address .....	BLK 242 #03-194
Address complement .....	BUKIT BATOK EAST AVENUE 5
Postcode .....	650242
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 .....	Chain Collision
Weather Conditions .....	CLOUDY
Road Surface .....	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	4
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 .....	Hong Kah North Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18005679999
Alt. Police Station Phone No .....	(Fax) +65-65652508
Police Station Address .....	Blk 370 Bukit Batok Street 31 #01-201 Singapore 650370
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT

#### 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 .....	SLE2715P
Vehicle Manufacturer .....	Subaru
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car

Name of Driver .....	UNKNOWN
- .....	UNKNOWN
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SJW2870C
Vehicle Manufacturer .....	Mazda
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	NA / Unknown
Name of Driver .....	UNKNOWN
- .....	UNKNOWN
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number .....	SMR191H
Vehicle Manufacturer .....	Mercedes
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	NA / Unknown
Name of Driver .....	UNKNOWN
- .....	UNKNOWN
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	UNKNOWN
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	AHMAD SYAFI'I BIN A EFFENDI
Gender .....	Male
Phone No .....	(Phone) +65-87488257
Address .....	BLK 242 #03-194
Address Complement .....	BUKIT BATOK EAST AVENUE 5
Post Code .....	650242
Approximate Age Years Old .....	30
Injuries Sustained .....	PAIN & INJURIES ON THE BACK OF THE NECK, ABRASION ON RIGHT ARM AND RIGHT SHIN.
Injured person in which vehicle? .....	FBS593G
Were seat belts worn? .....	No
Was this injured conveyed to hospital by ambulance? .....	Yes

SKETCH PLAN

IMPORTANT NOTICE

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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 25 Apr 2022

1757 Hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:


Reporting Centre Personnel's Signature

Name: Indra Hzi2

NRIC/FIN No: S994949

SKETCH PLAN

PIE toward Changi after Eng Neo Exit



A - SLE 2715P

B - FBS 593G

C - SJW 2870C

D - SMR 191H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report T/20220424/2057

**DECLARATION**

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

Policyholder's Signature

Date & Time: 25 Apr 2022

1757 Hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: Indra Aziz

NRIC/FIN No: S994949














**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Hong Kah North NPP  
370 Bukit Batok Street 31 #01-201  
SINGAPORE 650370  
Tel No: 1800-5679999

HONG KAH NORTH NPP  
BLK 370 BUKIT BATOK STREET 31  
SINGAPORE 650370  
TEL: 1800-567 9999



T/20220424/2057

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Report No. T/20220424/2057

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/04/2022 16:49		Vide Report No.: E/20220424/0102	Station Diary No.: 19
<b>Informant's Particulars</b>			
Name of Informant: AHMAD SYAFI' BIN A EFFENDI		Address: APT BLK 242 BUKIT BATOK EAST AVENUE 5 #03-194 SINGAPORE 650242	
ID Type / ID No.: NRIC NO / S9131767B		Contact No.: Home/Office: Mobile: 87488257	
Nationality: SINGAPORE CITIZEN		Email: afiera1030@gmail.com	
Sex: Male	Age: 30	Date of Birth: 10/09/1991	Type of Informant: Rider
Race: Malay		Language: English	Institution / School Name:
Occupation: Self Employed		Driving Licence Information: Class: 2B,2A,2 Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 24/04/2022 12:50	Type of Location: Straight Road
Location:  PAN-ISLAND EXPRESSWAY				
Weather: Cloudy		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Dual Carriage 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 Passenger
FBS593G	Motorcycle	YAMAHA	CZD300A / XMAX300	Blue	Seriously Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBS593G	NTUC Income Insurance Co-Operative Limited	5120555496-01	07/01/2022	06/01/2023


**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Hong Kah North NPP  
370 Bukit Batok Street 31 #01-201  
SINGAPORE 650370  
Tel No: 1800-5679999



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Report No. T/20220424/2057

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
<b>Rider</b>			
Name	AHMAD SYAFI'I BIN A EFFENDI	ID No.	S9131767B
Related Vehicle	NIL	Contact No.	87488257
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2 Date of Expiry: NIL
Date Treatment	24/04/2022	Date Discharge	24/04/2022
No. of Days granted Medical Leave	03	Degree of Injury	NIL

**Brief Details.**

On 24/04/2022 @ 1250 hrs, while I was riding my motorcycle, a blue XMAX300, FBS593G along the PIE towards Changi, on the 2nd lane, I realised that the road condition in front of me, was very heavy with many slow moving traffic. Then at one point some where after the Eng Neo exit, the vehicles in front of me came to a complete stop. I had also managed to stop my motorcycle behind a car with registration number SLE2715T. Then suddenly, another car, SJW2870C, from behind me, hit onto the back of my motorcycle. The hard impact that it made had caused my motorcycle to lurch forward and hit the back of the car in front of me. My motorcycle then fell onto its right side, bringing me along with it. I was still conscious. Not long after the paramedics came and assisted me.

I was conveyed by the ambulance to Tan Tock Seng hospital and was given an outpatient treatment. In addition I also received 3 days MC from 24-26 April 2022. I suffered pain and injuries on the back of my neck, abrasion on my right arm and abrasion my right shin. Some of the obvious damages to my motorcycle are : the front fork, front headlight, front wheel rim, rear suspension, rear taillight and rear wheel rim. A police officer had called me and advised me to lodge a police report.

**SINGAPORE  
POLICE FORCE**

T/20220424/2057

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Report No. T/20220424/2057

Police Station Of Origin:  
Hong Kah North NPP  
370 Bukit Batok Street 31 #01-201  
SINGAPORE 650370  
Tel No: 1800-5679999

**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:

J /

SI MOHAMAD ROHAIMEE BIN  
MOHAMAD SAMRI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

24/04/2022 16:49

Officer In Charge Of Case:

TP / GIT /

SI VILTON HIA WEE SIANG

Contact No.: 65476232

Classification Of Case:

NP168