

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 29/04/2022 13:38 (SGT)
Date of Accident 19/03/2022 07:30 (SGT)
Exact Location of Accident Jurong Island Hwy, Singapore
Additional Location Information JURONG ISLAND HIGHWAY
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number AP60E

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MUHAMMAD IMRAN BIN ABDUL HAMID
NRIC No S8236376I
Email Address IMRAN1634@GMAIL.COM
Mobile Phone No (Phone) +65-91993357
Alternative Phone No +65-91993357

VEHICLE PARTICULARS

Manufacturer Yamaha
Model Mt-09
Variant YAMAHA / MT-09 ABS TRACER
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 847

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number MC/00547791/03
Cover Note Number -

DRIVER

Name of Driver MUHAMMAD IMRAN BIN ABDUL HAMID
NRIC No S8236376I

Date Of Birth	21/10/1982
Occupation	Indoor
Date Of Driving Pass	03/05/2005
Driving experience	16 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91993357
Alt. Phone Number	+65-91993357
Email Address	IMRAN1634@GMAIL.COM
Address	APT BLK 642 BEDOK RESERVOIR ROAD #09-79
Address complement	-
Postcode	410642
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 - Cross Junction
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

REFER TO ATTACHED
STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD
TEL 67415336

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	YL7669R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	KANNAN KATHIRAVAN
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	MUHAMMAD IMRAN BIN ABDUL HAMID
Gender	Male
Phone No	(Phone) +65-91993357
Address	APT BLK 642 BEDOK RESERVOIR ROAD #09-79
Address Complement	-
Post Code	410642
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	AP60E
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**IMPORTANT NOTICE**

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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' 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 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;

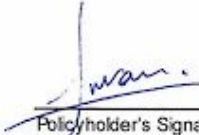


(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

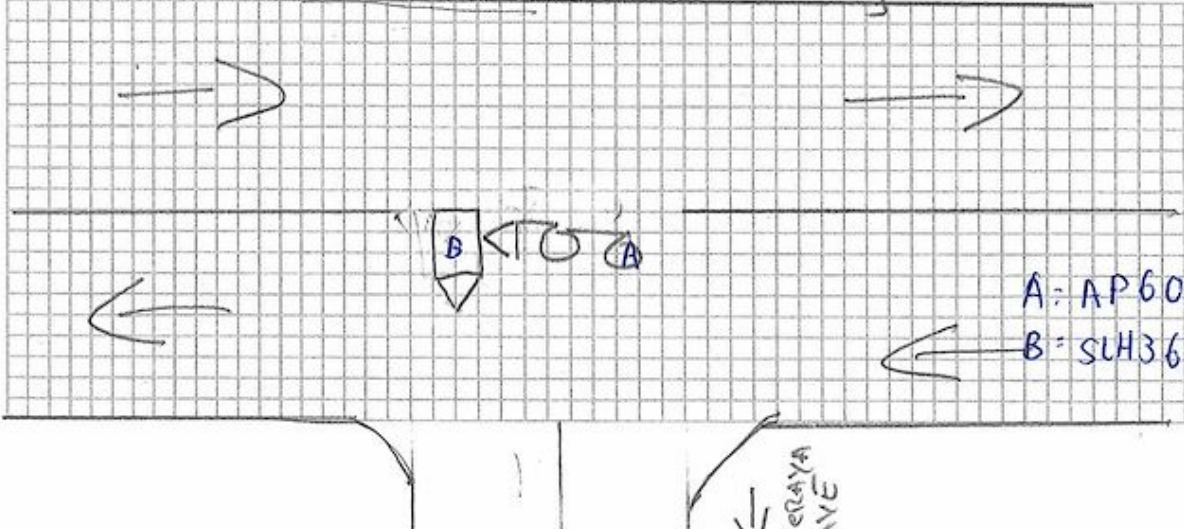
(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' 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 & Time	 Driver's Signature (If driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
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Sketch Plan *SURONG ISLAND H'WAY*



REFER TO POLICE REPORT.

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

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

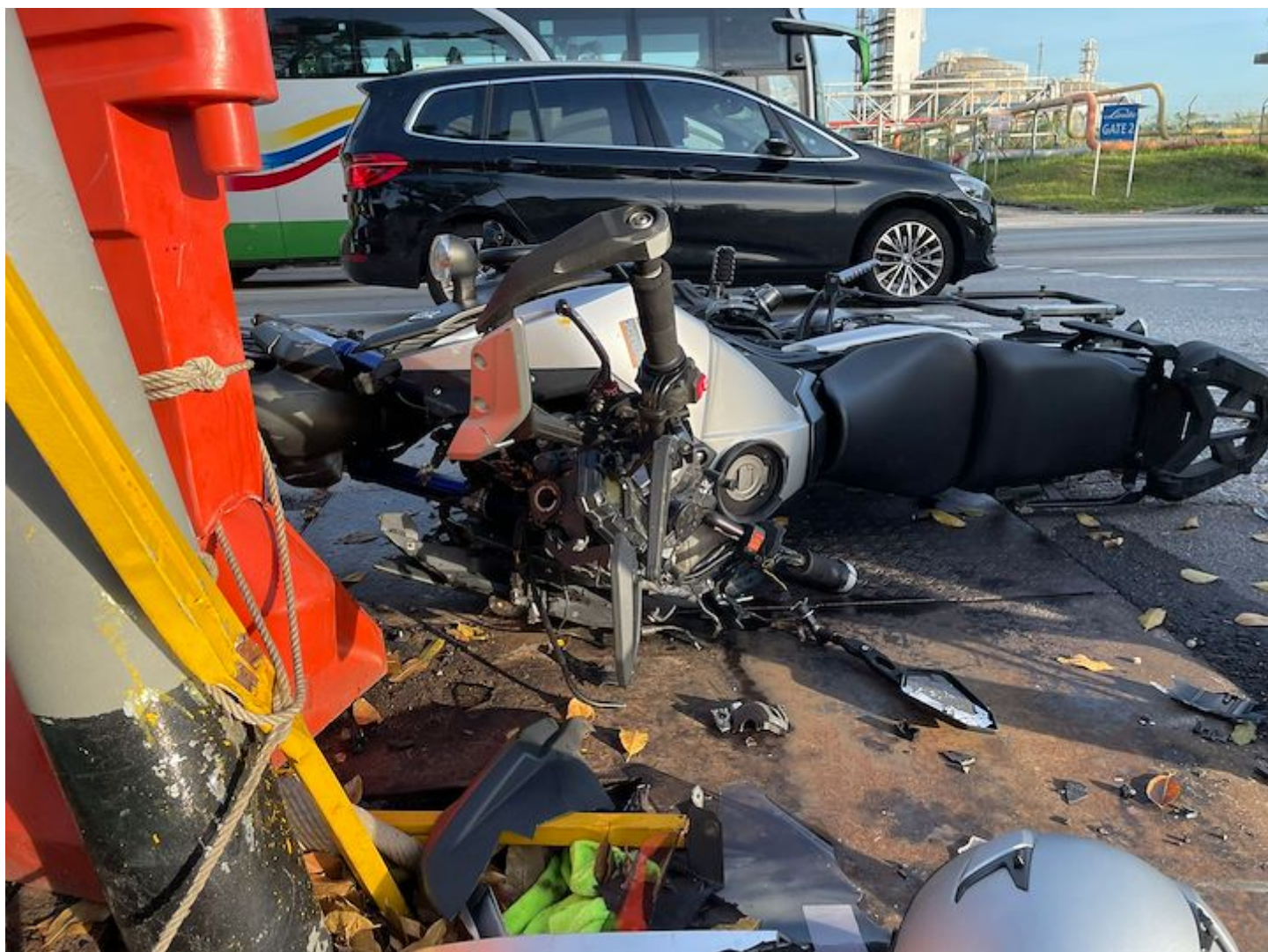
Witnessed by Reporting Centre
Personnel



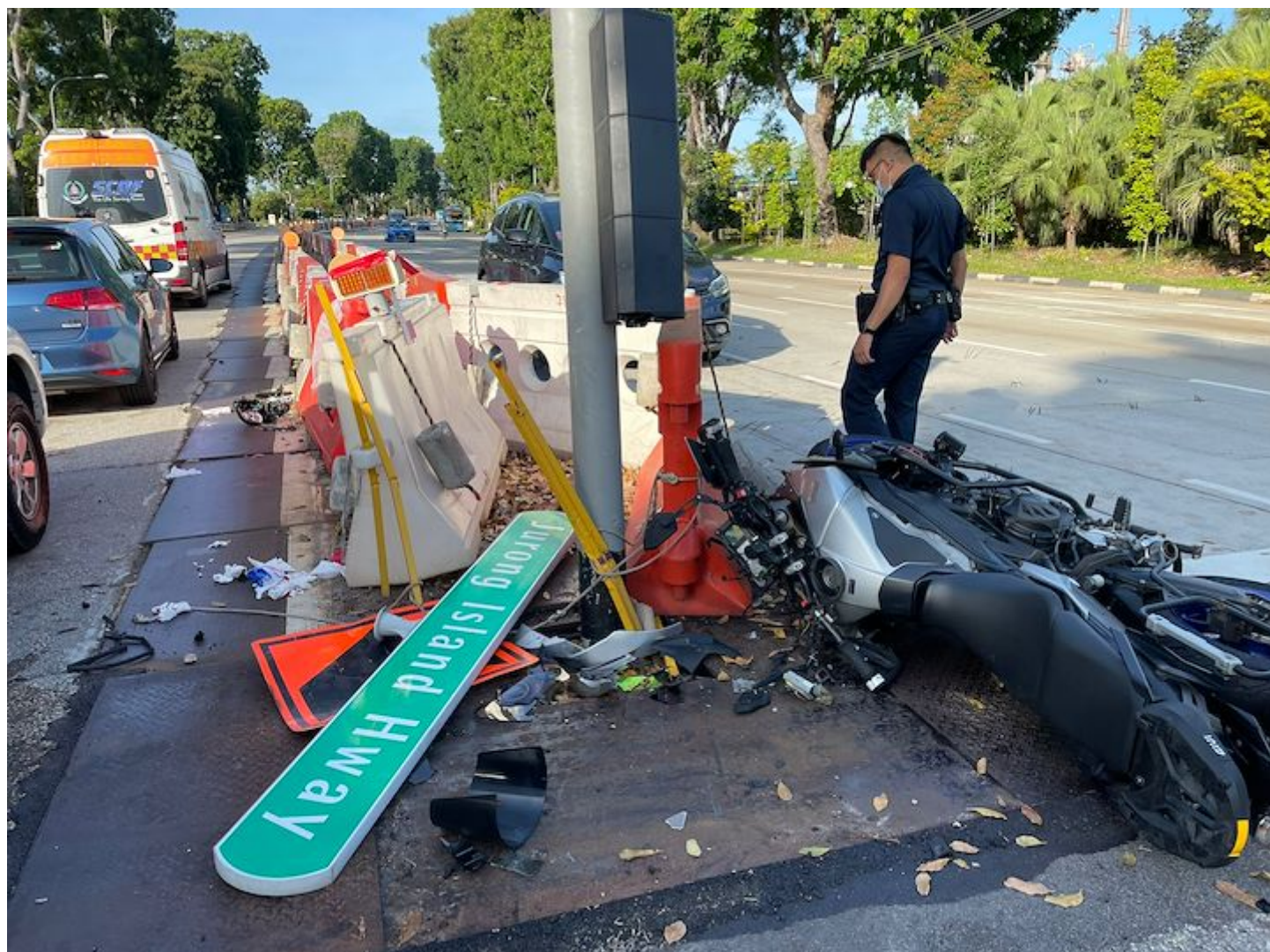
































**SINGAPORE
POLICE FORCE**



T/20220330/7023

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

1 of 3
Report No. T/20220330/7023

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/03/2022 17:12		Vide Report No.: D/20220319/0036		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMMAD IMRAN BIN ABDUL HAMID			Address: 642 BEDOK RESERVOIR ROAD #09-79 SINGAPORE 410642		
ID Type / ID No.: NRIC NO / S8236376I			Contact No.: Home/Office: Mobile: 91993357		
Nationality: SINGAPORE CITIZEN			Email: IMRAN1634@GMAIL.COM		
Sex: Male	Age: 39	Date of Birth: 21/10/1982	Type of Informant: Rider		
Race: Malay			Language: English		Institution / School Name:
Occupation: Fire-fighting and rescue officer			Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/03/2022 07:40	Type of Location: T-Junction
Location: SERAYA AVENUE				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 70 Km/h	
Traffic Flow: Dual Carriage 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
AP60E	Motorcycle	YAMAHA	MT-09+ABS+TRACER	Silver		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
AP60E	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MC/00547791/03	20/11/2018	19/11/2022



**SINGAPORE
POLICE FORCE**



T/20220330/7023

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

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Report No. T/20220330/7023

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD IMRAN BIN ABDUL HAMID	ID No.	S8236376I
Related Vehicle	AP60E (Motorcycle)	Contact No.	91993357
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date	19/03/2022	Date	22/03/2022
No. of Days granted Medical Leave	28	Degree of	Serious

Brief Details.

On the 19th of March at about 0740hrs, I was travelling my motorcycle bearing registration number (AP60E) along Jurong Island highway on my way to work (Jurong Island Fire Station, 70 Jurong Island Highway) at a cruising speed of 60-70 kmh. The weather was clear and traffic was moderate high with some construction plastic barrier works on the middle divider.

While I was reaching junction of Jurong Island Highway and Seraya Avenue riding on the lane 1 out of 4 lanes with the traffic to my favour. Suddenly a white motor-lorry bearing registration number YL7669R making a right turn towards Seraya Avenue, I am neither able to swerve to my right nor left. As there is a vehicle, I viewed from my left side mirror approaching as well as an incoming vehicle on the right.

Therefore, I applied Emergency brake and the lorry collided to me which causes me to flung on the left side rear lorry bars of the said motor lorry and was left unconscious for a few minutes before members of the public and few of my colleagues whom are trained rendered some medical assistance as well as controlling the traffic for my safety.

As a result of the accident, I suffered a fractured on my left arms, facial fractured on my right side and few abrasions as well as lacerations.



**SINGAPORE
POLICE FORCE**



T/20220330/7023

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

3 of 3
Report No. T/20220330/7023

CONTINUATION OF REPORTSketch 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 /
SYED MUHAMMAD ISA BIN OMAR
ALHABSHEE
Contact No.: 65476214
NP168

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

Date/Time:
30/03/2022 17:12

Classification Of Case: