

# 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 ..... 15/04/2021 12:16 (SGT)  
Date of Accident ..... 14/04/2021 08:25 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... Lorong 4 Toa Payoh  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... FBS3426L

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... MUHAMMAD SALIHIN BIN SUBARI  
NRIC No ..... S8540801A  
Email Address ..... SALIHINSUBARI@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-81026011  
Alternative Phone No ..... +65-81026011

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... ADV 150  
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 ..... Auto  
CC ..... 150

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5121457515  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... MUHAMMAD SALIHIN BIN SUBARI

Date Of Birth ..... 07/12/1985  
Occupation ..... Indoor  
Date Of Driving Pass ..... 07/01/2005  
Driving experience ..... 16 YEARS AND 3 MONTHS  
Gender ..... Male  
Mobile Number ..... (Phone) +65-81026011  
Alt. Phone Number ..... +65-81026011  
Email Address ..... SALIHINSUBARI@GMAIL.COM  
Address ..... BLK 57 #08-216 LORONG 5 TOA PAYOH  
Address complement ..... -  
Postcode ..... 310057  
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 - Opening Door of Vehicle  
Weather Conditions ..... Clear  
Road Surface ..... Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? ..... No  
Number of vehicles involved in the accident ..... 3  
Was anybody injured in the Accident? ..... Yes  
Was any injured conveyed to hospital by ambulance? ..... No  
Was any other material 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 ..... Toa Payoh Neighbourhood Police Centre  
Police Station Phone No ..... (Phone) +65-18002519999  
Alt. Police Station Phone No ..... (Fax) +65-63548749  
Police Station Address ..... 93 Toa Payoh Central Toa Payoh Community Building #01-02 Singapore 319194  
Was notice of intended Prosecution given? ..... No  
If yes, against whom? ..... -

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORTS / SKETCH PLAN

#### 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 ..... YP5702U  
Vehicle Manufacturer ..... -  
Vehicle Model ..... -  
Vehicle Variant ..... -  
Vehicle Colour ..... -

Vehicle Category ..... Commercial vehicle  
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) ..... -

## DETAILS OF OTHER VEHICLE PROPERTY 2

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

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person ..... MUHAMMAD SALIHIN BIN SUBARI  
Address ..... -  
Address Complement ..... -  
Post Code ..... -  
Approximate Age Years Old ..... -  
Injuries Sustained ..... -  
Injured person in which vehicle? ..... FBS3426L  
Were seat belts worn? ..... -  
Was this injured conveyed to hospital by ambulance? ..... No

INCOME MOTOR SERVICE CENTRE

Report No: MT \_\_\_\_\_

D.O.A: 14/04/2021Time: 08:25 hrsReport Date & Start Time: 15/04/2021 / 11:51Vehicle No: FBS3426L

Reporting Type:

**SKETCH PLAN****IMPORTANT NOTICE**

1. Please report correctly the details of the accident to speed up the claims process.
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6. The 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 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.

15/04/21 / 11:51

Policyholder's Signature / Date &amp; Time

15/04/21 / 11:51

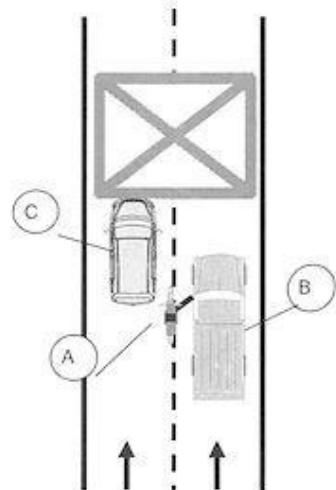
Driver's Signature (If driver is not the policyholder) / Date &amp; Time

 Alan Tang (S098825)  
 Customer Care Executive  
 Motor Service Centre

Witnessed by Reporting Centre Personnel

SKETCH PLAN #2

SKETCH PLAN



Lorong 4 Toa Payoh

Vehicle A: FBS3426L

Vehicle B: YP5702U

Vehicle C: Unknown

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

To add on, after seeing the accident video from the social media, I then recalled that after the open door of vehicle B hit my vehicle A, I lost my balance and I fell onto the rear right door and fender area of vehicle C.

Driver of vehicle C alighted from his vehicle C after collision, he checked his vehicle C and left thereafter.

Declaration

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

15/04/21 / 11:51

Policyholder's Signature / Date & Time

Alan Tang (S098825)  
Customer Care Executive  
Motor Service Centre

15/04/21 / 11:51

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

Witnessed by Reporting Centre Personnel

IMAGES



IMAGES #2



IMAGES #3



IMAGES #4



IMAGES #5



IMAGES #6




**SINGAPORE  
POLICE FORCE**


T/20210414/2080

Police Station Of Origin:  
 Toa Payoh N.P.C  
 93 Toa Payoh Central #01-02 Toa Payoh  
 Community Building SINGAPORE 319194  
 Tel No: 1800-2519999

1 of 3

Report No. T/20210414/2080

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/04/2021 15:54	Vide Report No.:	Station Diary No.: 68
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**Informant's Particulars**

Name of Informant: MUHAMMAD SALIHIN BIN SUBARI	Address: APT BLK 57 LORONG 5 TOA PAYOH #08-216 SINGAPORE 310057	
ID Type / ID No.: NRIC NO / S8540801A	Contact No.: Home/Office: Mobile: 81026011	
Nationality: SINGAPORE CITIZEN	Email:	
Sex: Male Age: 35 Date of Birth: 07/12/1985	Type of Informant: Rider	
Race: Javanese	Language:	Institution / School Name:
Occupation: SECURITY EXECUTIVE	Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

**General Information of the Accident**

Type of Accident: Others	Drink Drive: No	Date/Time of Accident: 14/04/2021 08:25	Type of Location: Straight Road
Location:  LORONG 4 TOA PAYOH			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBS3426L	Motorcycle	HONDA	ADV150 ABS CVT	Black	Slightly Damaged	0
YP5702U	Lorry					5

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBS3426L	NTUC Income Insurance Co-Operative Limited	5121457515	27/03/2021	26/03/2022



**SINGAPORE  
POLICE FORCE**



T/20210414/2080

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh  
Community Building SINGAPORE 319194  
Tel No: 1800-2519999

2 of 3

Report No. T/20210414/2080

**CONTINUATION OF REPORT****Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

Rider

Name	MUHAMMAD SALIHIN BIN SUBARI	ID No.	S8540801A
Related Vehicle	FBS3426L (Motorcycle)	Contact No.	81026011
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On 14.04.2021, at about 0825hrs, I was riding my motorbike bearing reg no FBS3426L along the two lanes road of Lorong 4 Toa Payoh. While I was approaching the T-junction of Lorong 4 and Lorong 6 Toa Payoh (near to Blk 73 Lorong 4 Toa Payoh), the traffic light was in red.

I was riding in between the two lanes, and when I was getting nearer to the yellow box area, a lorry bearing reg no YP5702U opened the left passenger door and I couldn't react in time. The impact and the door hit onto me on my right side mirror area, and I fell on the left together with my motorbike. I wish to state that there was a vehicle on my left when the lorry's door hit onto me and I did not land on the vehicle but on the ground.

As I do not wish to hold up the traffic, I immediately push my bike to the roadside and shortly after, Traffic Police came to the scene. Due to this accident, I suffered slight abrasion on right hand, and I went to consult a doctor at Tan Tock Seng Hospital and was given 3 days MC.



**SINGAPORE  
POLICE FORCE**



T/20210414/2080

Police Station Of Origin:  
Toa Payoh N.P.C  
93 Toa Payoh Central #01-02 Toa Payoh  
Community Building SINGAPORE 319194  
Tel No: 1800-2519999

CONTINUATION OF REPORT

3 of 3

Report No. T/20210414/2080

**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:  
E /  
Sgt 2 DARREN TAN YUANJIE

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
14/04/2021 15:54

Officer In Charge Of Case:  
TP / AEIT /  
SI MOHAMAD ZULFAZDLI BIN ABDULLAH  
Contact No.: 65476204



Classification Of Case:

SN 168

Authentication Stamp  
NP168

SIGNATURE

POLICE REPORT #4

100-00000000


**SINGAPORE  
POLICE FORCE**


T/20210419/2056

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

1 of 3

Report No. T/20210419/2056

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/04/2021 14:00	Vide Report No.: T/20210414/2080	Station Diary No.: 124
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**Informant's Particulars**

Name of Informant: MUHAMMAD SALIHIN BIN SUBARI	Address: APT BLK 57 LORONG 5 TOA PAYOH #08-216 SINGAPORE 310057
ID Type / ID No.: NRIC NO / S8540801A	Contact No.: Home/Office: Mobile: 81026011
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male Age: 35 Date of Birth: 07/12/1985	Type of Informant: Rider
Race: Javanese	Language:
Occupation: SECURITY EXECUTIVE	Driving Licence Information: Class: Date of Expiry:

**General Information of the Accident**

Type of Accident: Others	Injury Others	Drink Drive: No	Date/Time of Accident: 14/04/2021 08:25	Type of Location: Straight Road
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Location:

LORONG 4 TOA PAYOH

Weather: Clear	Road Surface: Dry	Road Speed Limit:
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction	Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBS3426L	Motorcycle	HONDA	ADV150 ABS CVT	Black	Slightly Damaged	0
YP5702U	Lorry					5

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBS3426L	NTUC Income Insurance Co-Operative Limited	5121457515	27/03/2021	26/03/2022



**SINGAPORE  
POLICE FORCE**



T/20210419/2056

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

2 of 3

Report No. T/20210419/2056

CONTINUATION OF REPORT

<b>Details of Person Involved</b>				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
<b>Rider</b>				
Name	MUHAMMAD SALIHIN BIN SUBARI	ID No.	S8540801A	
Related Vehicle	FBS3426L (Motorcycle)	Contact No.	81026011	
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	03	Degree of Injury	Slight	

#### Brief Details.

I had already made a report previously on the 14/04/2021 vide T/20210414/2080, however I am lodging this report again as there were slight amendments that I would like to make after I managed to see the details of the accident via video footage on social media.

I would like to state that after the lorry, YP5702U that was on my right opened the left passenger door, I could not react in time and the impact from the door hit onto my right mirror area which caused me to fall on the left together with my motorbike FBS3426L.

After viewing the video footage, I then recalled that after the said lorry's left door hit onto my motorbike, I lost my balance and fell onto the rear right door and fender area of another vehicle that was on the front left of my motorbike.

After that, the driver of the said vehicle alighted from his vehicle and made a check on his own vehicle before driving off thereafter.

That's all that I want to add on. The rest of the facts from the previous report remains the same.

**SINGAPORE  
POLICE FORCE**

T/20210419/2056

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

3 of 3

Report No. T/20210419/2056

**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 /  
Sgt 3 TAN GUAN POH

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
SI MOHAMAD ZULFAZDLI BIN ABDULLAH  
Contact No.: 65476204

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
19/04/2021 14:00

Classification Of Case:

SN 126



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE**  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: 566550020G / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

## **ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : SNO7214E00N Vehicle Registration No: FBS 3426L

Name(as shown in NRIC): MUHAMMAD SALIHIN BIN SUAMI NRIC/FIN/Passport No : S8540801A

(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate

Address : BLK 57 LORONG 5 TOA PAYOH #08-216 Singapore(310057)

Contact (Tel) : \_\_\_\_\_ Mobile No.: 8102601

**Email Address** : SalkinJean@gmail.com

Date of Accident : 14/04/2021 Time of Accident : 0825 hrs

**Place of Accident** : LORONG 4 TAN PAYOH

**Insurance Company:** NTUC INCOME

**(B) ADDITIONAL INFORMATION /AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Attached enclosed police report

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Policyholder's / Deedee's Signature

Policyholder / Driver  
Date: 10/01/2014

Alan Tang

**Reporting Centre Personnel's Signature**

Reporting centre  
Name: Alan Tang

NRIC/FIN No : S098825

Date: