

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 03/06/2022 17:00 (SGT)
Date of Accident 23/04/2022 00:20 (SGT)
Exact Location of Accident Kensington Park Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBN634Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner RUZAINI BIN RASHID
NRIC No SXXXX807G
Email Address ruzaini_bonch@hotmail.com
Mobile Phone No (Phone) +65-97573504
Alternative Phone No +65-97573504

VEHICLE PARTICULARS

Manufacturer Honda
Model Cb400
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 - Reporting only
Vehicle Category Motorcycle
Transmission Manual
CC 399

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D21MTMC01004076
Cover Note Number -

DRIVER

Name of Driver RUZAINI BIN RASHID
NRIC No SXXXX807G

| | |
|--|---------------------------|
| Date Of Birth | 29/05/1995 |
| Occupation | Indoor |
| Date Of Driving Pass | 23/02/2018 |
| Driving experience | 4 YEARS AND 2 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-97573504 |
| Alt. Phone Number | +65-97573504 |
| Email Address | ruzaini_bonch@hotmail.com |
| Address | BLK 215 BOON LAY PLACE |
| Address complement | #02-77 |
| Postcode | 640215 |
| 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 | Side Swipe |
| 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? | No |
| Was any other vehicle or property damaged? | Yes |
| Number of Passengers (Including Driver) | 2 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

PASSENGER 1

| | |
|--------------|-----------------|
| Name | SITI NUR AMIRAH |
| Gender | Female |

DETAILS OF POLICE ACTION

| | |
|---|----|
| Was the accident reported to the police? | No |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

Pls refer to the attached statement..

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 | FBN1688L |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| 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 | SITI NUR AMIRAH |
| Gender | Female |
| Phone No | - |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | SLIGHT |
| Injured person in which vehicle? | FBN634Z |
| Were seat belts worn? | - |
| Was this injured conveyed to hospital by ambulance? | No |

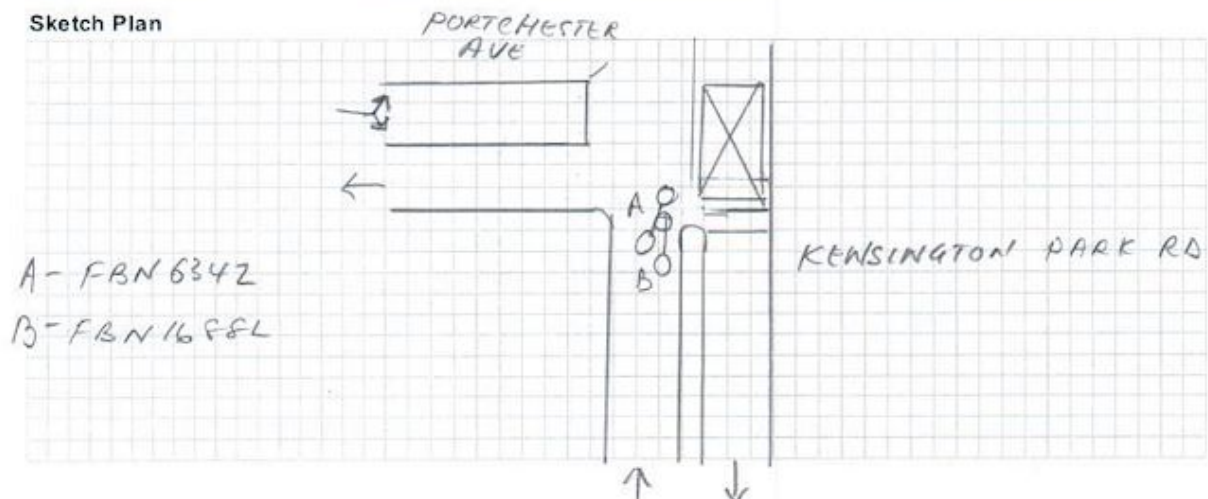
SKETCH PLAN**IMPORTANT NOTICE**

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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.

 3/6/21.
Policyholder's Signature / Date & Time

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

 03/06/22
Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

P/s refer to the statement.

Declaration

We declare the foregoing particulars are true in every respect.

3 3/6/22

Policyholder's Signature / Date &
Time

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

2/2/2003 03/06/22

Witnessed by Reporting Centre
Personnel

Hi Goodevening,

To whom it may concern,

Please refer to my reference no. CMTD2201430/
AGNESC

My vehicle FBN634Z was involved in an accident with another vehicle FBN1688L at Kensington Park Road on 23 April 2022 at around 0020 hrs LT.

When i was about to turn right to have a look on the other road, not knowing there was another vehicle behind, apparently the motorcycle wasn't able to come to a complete stop on time which caused it to hit the right side of my vehicle at a slow Km/h which resulted in a slight abrasion on both parties with no damage to the vehicles involved. We both exchanged particulars. We also both came to an mutual agreement that we would not want to pursue this matter. Hence why the delay in reporting this accident which could be prevented. On my end, there is no serious damage upon my vehicle which needed to be repaired. Therefore, i would not wish to pursue this matter. I have my wife as my pillion involved as witness if you need any clarification.

Thank you.









