

# 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 .....	04/07/2022 17:01 (SGT)
Reported by .....	Both
Date of Accident .....	02/07/2022 15:55 (SGT)
Exact Location of Accident .....	PIE, Singapore
Additional Location Information .....	(TUAS) BEFORE TOH GUAN EXIT
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	FBL9886P
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	PUTERA NUR MUHAMMAD IZZAT BIN ISKANDAR MULIA
NRIC No .....	SXXXX882I
Email Address .....	ptrizt@gmail.com
Mobile Phone No .....	(Phone) +65-93274317
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Yamaha
Model .....	Mt-03
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 .....	321

### INSURANCE COMPANY

Name of Insurance Company .....	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number .....	D22MTMC01003320

### DRIVER

Name of Driver .....	PUTERA NUR MUHAMMAD IZZAT BIN ISKANDAR MULIA
NRIC No .....	SXXXX882I
Date Of Birth .....	22/06/1990
Occupation .....	Outdoor

Date Of Driving Pass .....	13/01/2015
Driving experience .....	7 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-93274317
Alt. Phone Number .....	-
Email Address .....	ptrizt@gmail.com
Address .....	BLK 230 JURONG EAST STREET 21 #07-681
Address complement .....	-
Postcode .....	600230
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) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### 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

PLEASE REFER TO POLICE REPORT T/20220702/7036

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SMV9124Y
Vehicle Manufacturer .....	Skoda
Vehicle Model .....	Octavia
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	ER YONG SHENG, KENT
NRIC No .....	SXXXX069G
Contact Number .....	(Phone) +65-98526663
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 .....	PUTERA NUR MUHAMMAD IZZAT BIN ISKANDAR MULIA
Gender .....	Male
Phone No .....	(Phone) +65-93274317
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	FBL9886P
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	No

SKETCH PLANIMPORTANT NOTICE

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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 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)

I understand, acknowledge, agree and consent that :

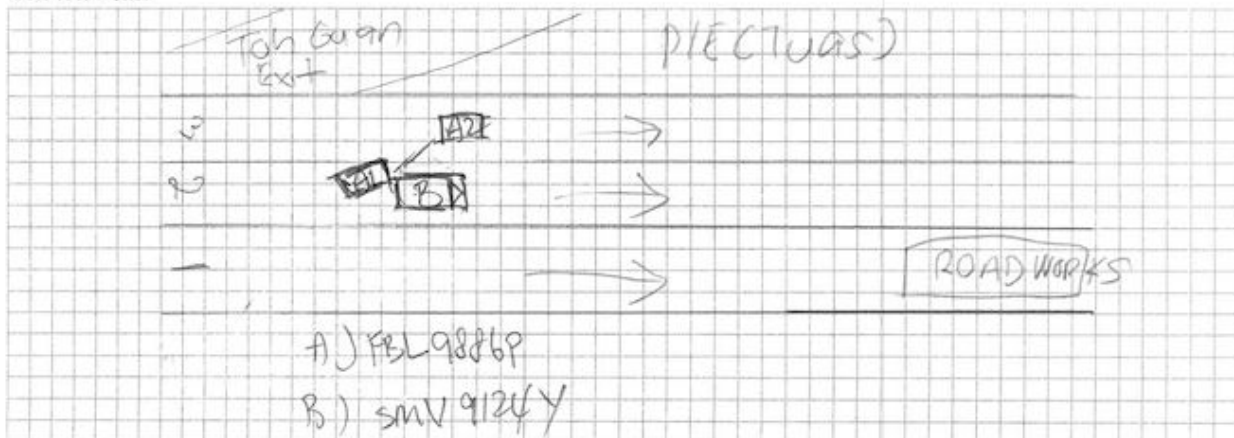
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

Policyholder's Signature / Date & Time  
4/7/22 @ 1450hrs

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

REFER to POLICE REPORT 1/2022 0702/2026

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time  
4/7/22 014591m

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

Witnessed by Reporting Centre Personnel  
08/07/2022

































**POLICE FORCE**

T/20220702/7036

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

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Report No. T/20220702/7036

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 02/07/2022 22:28		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: PUTERA NUR MUHAMMAD IZZAT BIN ISKANDAR MULIA			Address: 230 JURONG EAST STREET 21 #07-681 SINGAPORE 600230		
ID Type / ID No.: NRIC NO / S9020882I			Contact No.:		Mobile: 93274317
Nationality: SINGAPORE CITIZEN			Email: PTRIZT@GMAIL.COM		
Sex: Male	Age: 32	Date of Birth: 22/06/1990	Type of Informant: Rider		
Race: Malay			Language: English		Institution / School Name:
Occupation: IMMIGRATION OFFICER			Driving Licence Information: Class: 2B,2A,2,3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 02/07/2022 15:55	Type of Location: Expressway
Location:  PAN ISLAND EXPRESSWAY				
Weather: Sunny		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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	Conditio	No of
FBL9886P	Motorcycle	YAMAHA	MT-03 ABS (MTN320-A)	Blue		0
SMV9124Y	Car	SKODA	OCTAVIA 1.4 AMBITION TSI	Grey	Slightly Damaged	2





**SINGAPORE  
POLICE FORCE**



T/20220702/7036

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Report No. T/20220702/7036

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

## CONTINUATION OF REPORT

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBL9886P	TENET SOMPO INSURANCE PTE. LTD.	D22MTMC01003320	08/06/2022	07/06/2023

**Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

**Rider**

Name	PUTERA NUR MUHAMMAD IZZAT BIN ISKANDAR MULIA	ID No.	S9020882I
Related Vehicle	FBL9886P (Motorcycle)	Contact No.	93274317
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: 2B,2A,2,3 Date of Expiry: NIL
Date	02/07/2022	Date	02/07/2022
No. of Days granted Medical Leave	14	Degree of	Slight
<b>Driver</b>			
Name	ER YONG SHENG, KENT	ID No.	S8902069G
Related Vehicle	SMV9124Y (Car)	Contact No.	98526663
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,2A,2,3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

On the above mentioned date and time, I was riding on Lane 2 along PIE (TUAS) before Toh Guan Rd Exit, I hit the side of a motorcar bearing plate no. SMV 9124 Y. The said car was in motion when it suddenly brake and came to a gradual stop due to the traffic. I managed to break my motorbike and tried to filter towards Lane 3 when I hit the side of the said car before being flung from my motorbike. The damage to the said car was a slight scratch on the rear left bumper, left rear rims and a broken left side mirror. I sustained a fractured right phalanx finger and abrasions on my right leg and hands. I have pictures of the accident vehicle involved that is more than 2MB.



**SINGAPORE  
POLICE FORCE**



T/20220702/7036

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

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Report No. T/20220702/7036

**CONTINUATION OF REPORT**

Sketch 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 /  
MOHAMAD ZULFAZDLI BIN ABDULLAH  
Contact No.: 65476204

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

Date/Time:  
02/07/2022 22:28

Classification Of Case:

NP168