

# 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 Actual 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 ..... 09/10/2022 13:48 (SGT)  
Reported by ..... Both  
Date of Accident ..... 08/10/2022 19:30 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... ALONG BEACH ROAD  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... FBT302A

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... MUHAMMAD FARID HAKIM BIN MOHD HANIF  
NRIC No ..... S9725426E  
Email Address ..... faridhale24@gmail.com  
Mobile Phone No ..... (Phone) +65-83142874  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Yamaha  
Model ..... YZF-R1  
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 ..... Manual  
CC ..... 998

### INSURANCE COMPANY

Name of Insurance Company ..... FWD Singapore Pte. Ltd.  
Policy Number / Cover Note Number ..... PNMC2022-00003482

### DRIVER

Name of Driver ..... MUHAMMAD FARID HAKIM BIN MOHD HANIF  
NRIC No ..... S9725426E  
Date Of Birth ..... 26/07/1997  
Occupation ..... Outdoor

Date Of Driving Pass .....	04/02/2020
Driving experience .....	2 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-83142874
Alt. Phone Number .....	-
Email Address .....	faridhale24@gmail.com
Address .....	873 WOODLANDS STREET 81
Address complement .....	#07-260
Postcode .....	730873
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 - Head to Rear
Weather Conditions .....	Clear
Road Surface .....	Wet

#### 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
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### PASSENGER 1

Name .....	Passenger 1
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Woodlands Division Headquarters
Police Station Phone No .....	(Phone) +65-18004660000
Police Station Address .....	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

Accident between me and a car occurred on 081022 at 1930hrs at beach road block 3 main road. The car exited carpark and went straight to the second lane. Attempting to go to the first lane to turn right, the car moves at a slow speed due to congested road on the first lane. I was at the second lane saw the car was not moving on its own lane, I reduce my speed and brake. I swerve my bike to avoid contact but I graze his bumper. Me and my pillion fell from the bike. She was attended by paramedics and all was okay. Traffic police came and told us that we settle it by insurance claim. When we heading back, my pillion and I feel our body in pain and went to A&E at Khoo Teck Phuat at 2330hrs. I receive 3 days MC and she receive 5 days MC. So I decide to file a police report for sustain injury during accident

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SMT6344J
Vehicle Manufacturer .....	Mercedes
Vehicle Model .....	Cla180
Vehicle Variant .....	-
Vehicle Colour .....	Gray
Vehicle Category .....	Private car
Name of Driver .....	Ng Wei Hao, jonathan
NRIC No .....	S8313561A
Contact Number .....	(Phone) +65-90222226
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	MUHAMMAD FARID HAKIM BIN MOHD HANIF
Gender .....	Male
Phone No .....	(Phone) +65-83142874
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	Both insured and pillion injured. Both went to Khoo Teck Huat and was given mc Not conveyed by ambulance.
Injured person in which vehicle? .....	FBT302A
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

##### INJURED 2

Name of injured person .....	PASSENGER 1
Gender .....	Female
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	Both insured and pillion injured. Both went to Khoo Teck Huat and was given mc Not conveyed by ambulance.
Injured person in which vehicle? .....	FBT302A
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No



**Describe Circumstances of the Accident**

PLEASE REFER TO POLICE REPORT L/20221009/7010

**Declaration**

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

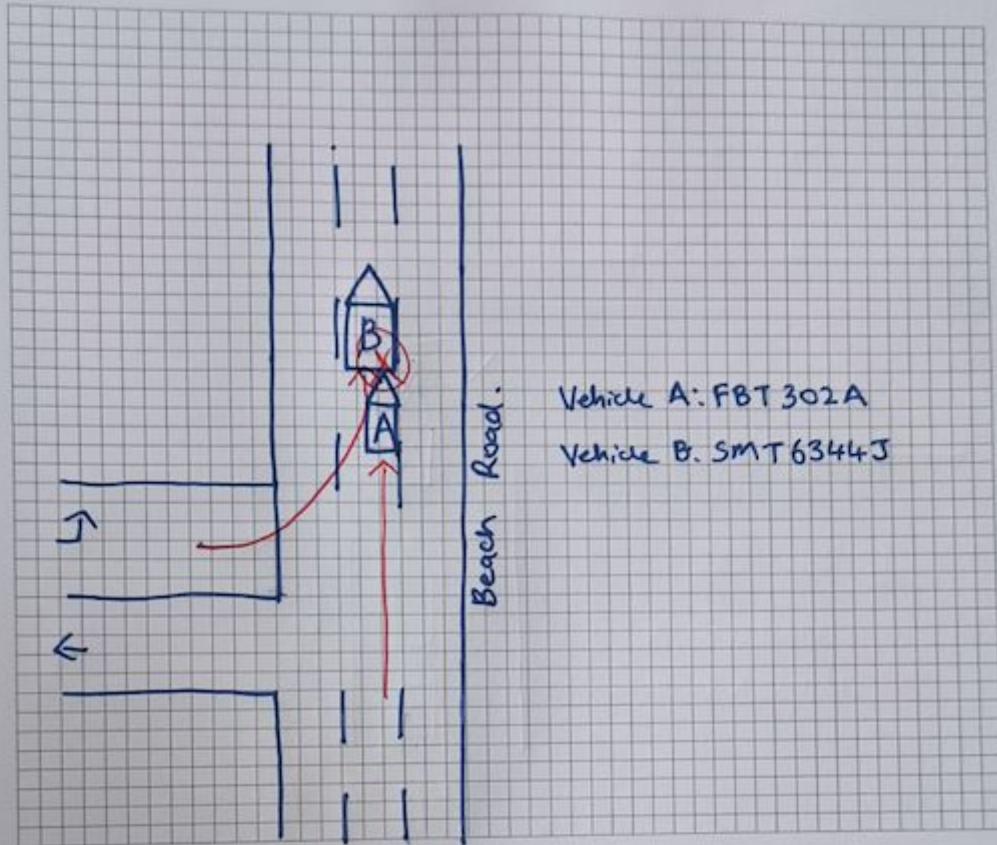
  
\_\_\_\_\_  
Policyholder's Signature / Date &  
Time 9 Oct 2022

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

\_\_\_\_\_  
Witnessed By Reporting Officer  
Mohamed Saifullah S/O Syed Masood  
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

ACCIDENT DIAGRAM

Ver. Jun2022



Vehicle A: FBT 302A

Vehicle B: SMT 6344J

Beach Road:

2.  
Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer  
Mohamed Saifullah S/O Syed Masood  
Witnessed by Reporting Centre  
Personnel

AJAX MARS PTE LTD























**SINGAPORE  
POLICE FORCE**



L/20221009/7010

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POLICE REPORT (NP299)

Report No. L/20221009/7010

Police Station Of Origin  
Woodlands Division HQ  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No:1800-4660000

Date/Time Report Made 09/10/2022 05:18	Vide Report No.		Station Diary No.	
Name Of Informant MUHAMMAD FARID HAKIM BIN MOHD HANIF	Address 873 WOODLANDS STREET 81 #07-260 SINGAPORE 730873			
ID Type / ID No. NRIC NO / S9725426E	Contact No. Home/Office:                      Mobile: 83142874			
Nationality SINGAPORE CITIZEN	Email Address FARIDHALE24@GMAIL.COM			
Occupation National Service Full Time	Sex Male	Age 25	Date of Birth 26/07/1997	Race Malay
Institution/School Name	Language English			
Date/Time Of Incident 08/10/2022 19:30 - 09/10/2022 04:30	Location Of Incident 873 WOODLANDS STREET 81 #07-260 SINGAPORE 730873			

### Brief details.

Accident between me and a car occurred on 081022 at 1930hrs at beach road block 3 main road. The car exited carpark and when to straight to the second lane. Attempting to go to the first lane to turn right,the car moves at a slow speed due to congested road on the first lane. I was at the second lane saw the car was not moving on its own lane,i reduce my speed and brake. I swerve my bike to avoid contact but i graze his bumper. Me and my pillion fell from the bike. She was attended by paramedics and all was okay. Traffic police came and told us that we settle it by insurance claim. When we heading back, my

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 09/10/2022 05:18
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



L/20221009/7010

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20221009/7010

pillion and i feel our body in pain and went to A&E at khoo teck phuat at 2330hrs . I receive 3 days mc and she receive 5 days mc. So i decide to file a police report for sustain injury during accident

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 09/10/2022 05:18
Officer In-Charge Of Case:	Classification Of Case:



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### Certificate of Insurance

Please call **+65-6322-2072** for FWD Emergency Assistance  
if Your Motorcycle breaks down or is involved in an accident.  
All accidents must be reported within 24 hours or by the next working day of the incident  
regardless of whether it will lead to a claim.

**Policy number:** PNMC2022-00003482

**Plan name:** Third Party Fire & Theft

**Motorcycle plate number:** FBT302A

**Your name (As the policyholder):** muhammad farid hakim bin mohd hanif

**Coverage start date:** 04/08/2022

**Coverage end date:** 03/08/2023

**Covered geographical area:** Singapore, West Malaysia and Southern Thailand

**Who is insured to ride:** You Only

**Finance company:**

**Important things to know:**

Your Policy comprises this Certificate of Insurance, the Contract, the Motorcycle Insurance Summary and any Endorsements attached by us. These documents should be read together as one. You must make sure that any person you give permission to ride Your Motorcycle understands your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Motorcycle is being used for personal use in accordance with your contract.

This Policy does not cover use for hire or reward, delivery of goods, and any renting or leasing purposes.

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

**Issued on:** 03/08/2022

**Khor Kee Eng**  
Chief Executive Officer  
FWD Singapore Pte Ltd

Please immediately inform us at **+65-6820-8888**  
or email us at **contact.sg@fwd.com** if any details in  
this Certificate of Insurance needs to be changed.