

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	03/11/2022 15:36 (SGT)
Reported by	Both
Date of Accident	22/10/2022 08:20 (SGT)
Exact Location of Accident	Yishun, Singapore
Additional Location Information	YISHUN AVE 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN9675X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	IZZAFY BIN IMRAN
NRIC No	T0039456J
Email Address	IZZAFY121471@GMAIL.COM
Mobile Phone No	(Phone) +65-91470775
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Brixton
Model	Bx125
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	125

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	AN3199799

DRIVER

Name of Driver	IZZAFY BIN IMRAN
NRIC No	T0039456J
Date Of Birth	14/11/2000
Occupation	Indoor

Date Of Driving Pass	16/02/2022
Driving experience	8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91470775
Alt. Phone Number	-
Email Address	IZZAFY121471@GMAIL.COM
Address	APT BLK 173A PUNGGOL FIELD #04-589
Address complement	-
Postcode	S821173
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	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	5
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
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.

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	GBK5911G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Goods 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	SME9014X
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. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	GBL8502D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods 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 4

Vehicle Registration Number	SHA8352G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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	IZZAFY BIN IMRAN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBN9675X
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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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' 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.

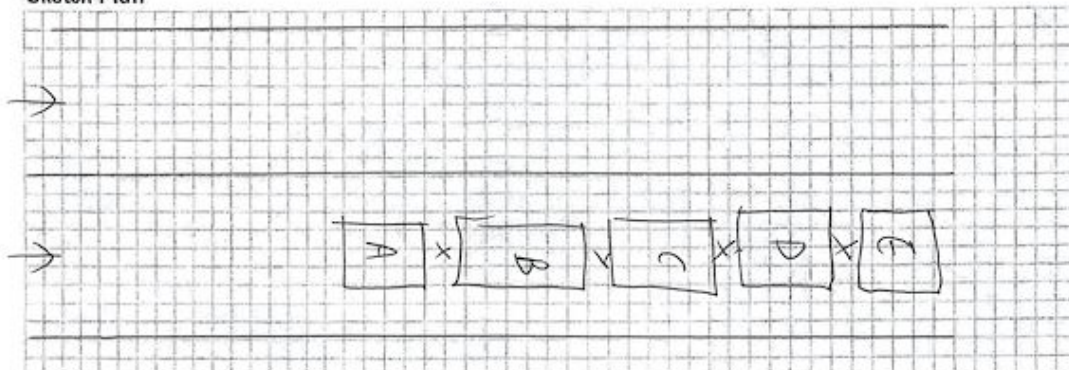


Policyholder's Signature / Date & Time
03 NOV 2022

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

Witnessed by Reporting Centre Personnel

Sketch Plan



- A → FB9675X
- B → GBK5911G
- C → SME9014X
- D → GBL8502D
- E → SHA8352G

Accident report **SS2G22B30002**

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Describe Circumstances of the Accident

Please Refer to police Report.

Declaration

We declare the foregoing particulars are true in every respect.



[Handwritten signature]

Policyholder's Signature / Date &
Time 03 NOV 2022

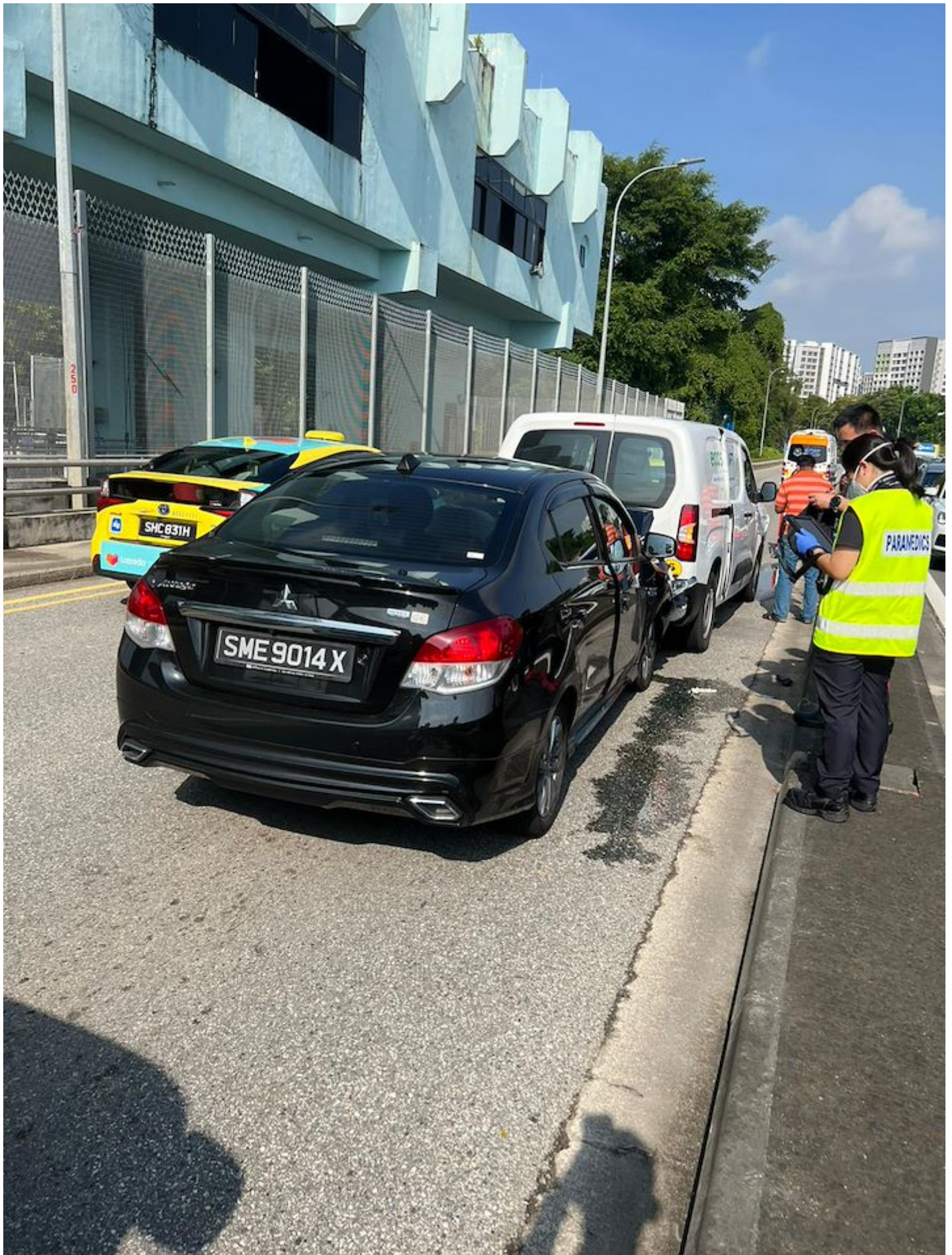


Driver's Signature (If driver is not the policyholder) / Date & Time



Id

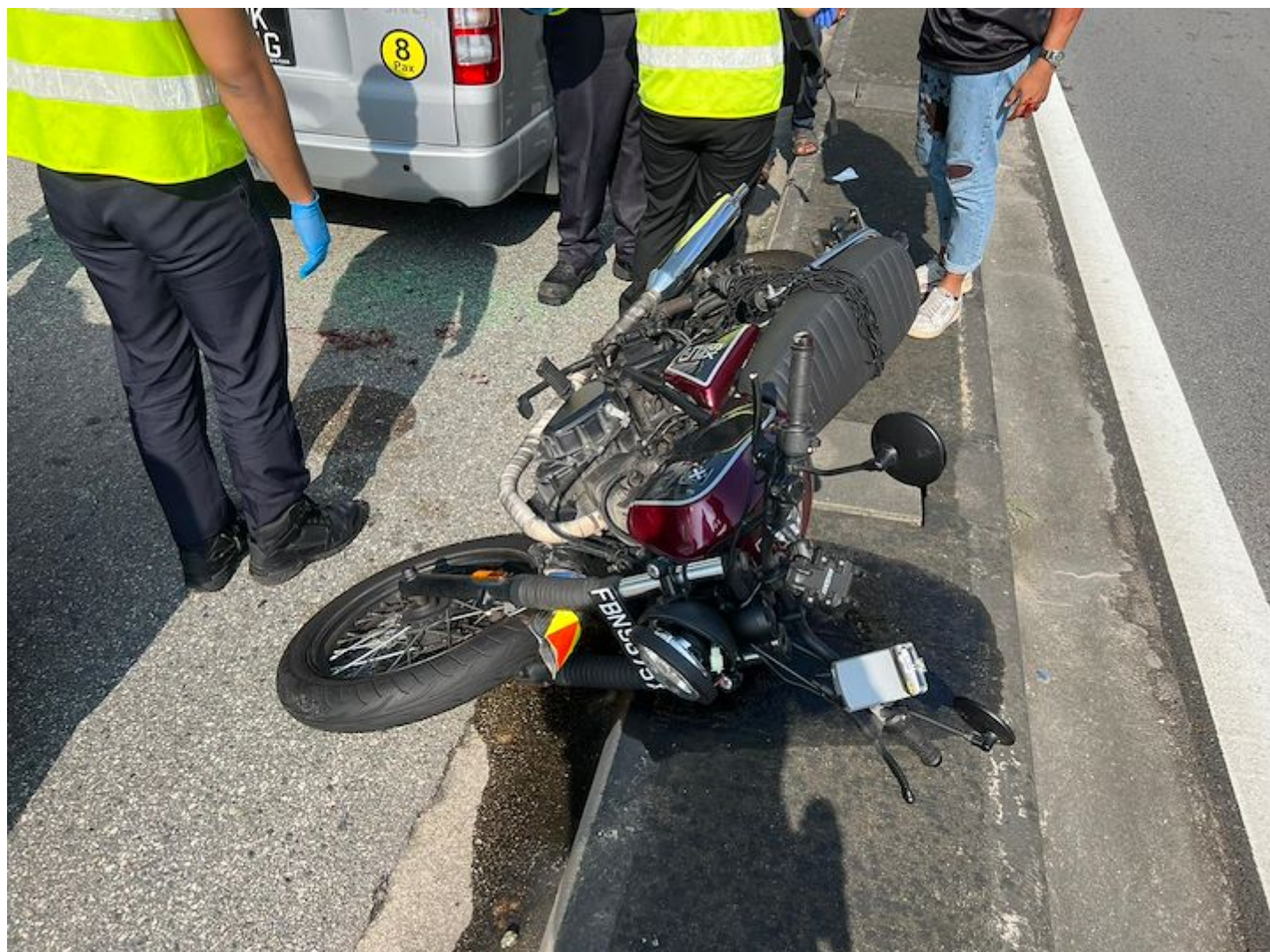
Witnessed by Reporting Centre
Personnel













**SINGAPORE
POLICE FORCE**



T/20221025/7077

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

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Report No. T/20221025/7077

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/10/2022 21:28		Vide Report No.: E/20221022/0082		Station Diary No.:	
Informant's Particulars					
Name of Informant: IZZAFY BIN IMRAN			Address: 173A PUNGGOL FIELD #04-589 SINGAPORE 821173		
ID Type / ID No.: NRIC NO / T0039456J			Contact No.: Home/Office: Mobile: 91470775		
Nationality: SINGAPORE CITIZEN			Email: IZZAFY121471@GMAIL.COM		
Sex: Male	Age: 21	Date of Birth: 14/11/2000	Type of Informant: Rider		
Race: Boyanese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 2B		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/10/2022 08:20	Type of Location: Bridge
Location: YISHUN AVE 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBN9675X	Motorcycle	BRIXTON	BX125	Red		0
GBK5911G	Van		HYUNDAI			1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**

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



T/20221025/7077

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Report No. T/20221025/7077

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 /
GOH WEI LI
Contact No.: 65476394

NP168

Signature Of Informant:

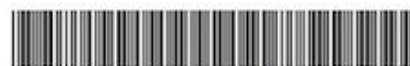
The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
25/10/2022 21:28

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20221025/7077

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

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Report No. T/20221025/7077

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBN9675X	AXA INSURANCE SINGAPORE PTE LTD	AN3199799	19/03/2022	18/03/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	IZZAFY BIN IMRAN		ID No. T0039456J
Related Vehicle	FBN9675X (Motorcycle)		Contact No. 91470775
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry Class: 2B Date of Expiry: NIL
Date	22/10/2022		Date 23/10/2022
No. of Days granted Medical Leave	09	Degree of	Serious

Brief Details.

It was a chain collision involving 4 other vehicles. Was riding at approx 45-50km/h when the Van in front of me sudden jam broke. With less time, I managed to react by e-braking my bike however, I still collided with the van hitting its rear windscreen.

I suffered a fracture on my front jaw and also suffered a very bad and deep laceration on my chin, bruises to the body and sprained my right wrist.

Was sent to Khoo Teck Puat hospital by ambulance where they did surgery on my chin and jaw.

Was hospitalised and got discharged on Sunday, 23/10/2022









