S10422BF0001 / 1ST AUTOWORKS PTE LTD ENTRY DATE & TIME: 15/11/2022 13:49 (SGT) SUBMITTED BY: Mohammad Suhaimi Bin Mohd Suadi Ong VERSION: 1 (15/11/2022 13:49 (SGT))

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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 15/11/2022 13:49 (SGT) Reported by Date of Accident 24/10/2022 13:21 (SGT) Exact Location of Accident Singapore Additional Location Information ALONG TAMPINES EXPRESSWAY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBF130C INSURED/POLICYHOLDER

999

Is company? No Name Of Registered Owner NURUL SAKINA BINTE ZAINUDIN NRIC No SXXXX509Z Fmail Address itsritzey@live.com Mobile Phone No (Phone) +65-90614249

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Cbr1000rr Variant HONDA / CBR1000RR 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 No - Claiming third party your vehicle? Vehicle Category Motorcycle Transmission Manual

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number

DRIVER

CC

Name of Driver MOHAMMAD RITZWAN BIN BAKRI NRIC No SXXXX000H Date Of Birth 08/04/1983 Occupation Indoor

Date Of Driving Pass	14/02/2005
Driving experience	17 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87830804
Alt. Phone Number	- -
Email Address	itsritzey@live.com
Address	258C COMPASSVALE ROAD #02-573 SPORE 543258
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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	Olda Outina
Weather Conditions	Side Swipe
Road Surface	Clear
Nodu Guriace	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? Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	Yes 1
Has the driver been approached by unknown person(s)	I
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	Ang Mo Kio Division Headquarters
Police Station Phone No	(Phone) +65-18002180000
Alt. Police Station Phone No	(Fax) +65-64814246
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCH PLAN/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	CPLIASEAK
Vehicle Manufacturer	GBH4854K
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender	MOHAMMAD RITZWAN BIN BAKRI
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBF130C
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

IMPORTANT NOTICE

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- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow
- 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 Traffic Police Department for investigation.
- 6. This report will be forwarded by the insurers to 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
- 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
- (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
- (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.

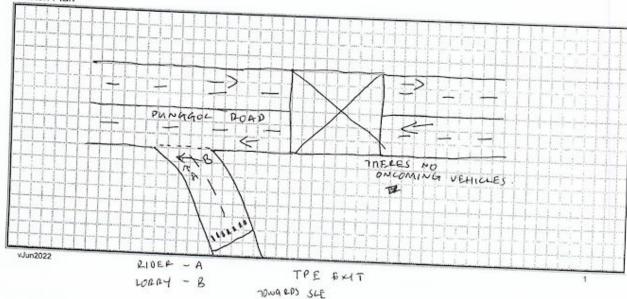
Policyholder's Signature / Date & Time

15/11/2022 12.43PM

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)





Describe Circumstance of the Accident
NOME I WAS KING AT TAMELIES CONSTRUCTS, I WAS FROM WOLK PLOINE BACK
HOME . I WAS HOING AT TAMBLES CONSTITUTED, I WAS FROM WOLL PLOING BACK
SENGRANG . AS ISLOWED DOWN AS THE EXPERIMENT THE FILTER CANE TOWARDS
ME TO A TIGHT STOT , DUE TO THE CONDENCY SWERVE IND MY CAME COLUERAN
TO THE TO THE TELESCOPE
AT AROUND BISHOURS PARTED TO GET HIM TO CALL THE AMBULANCE.
THE INCIDENT. AT ABOUND BZO HOURS AMBUCANCE CAME AND I WAS TAKEN TO CHANGE GENERAL HOSPITAL.
eclaration

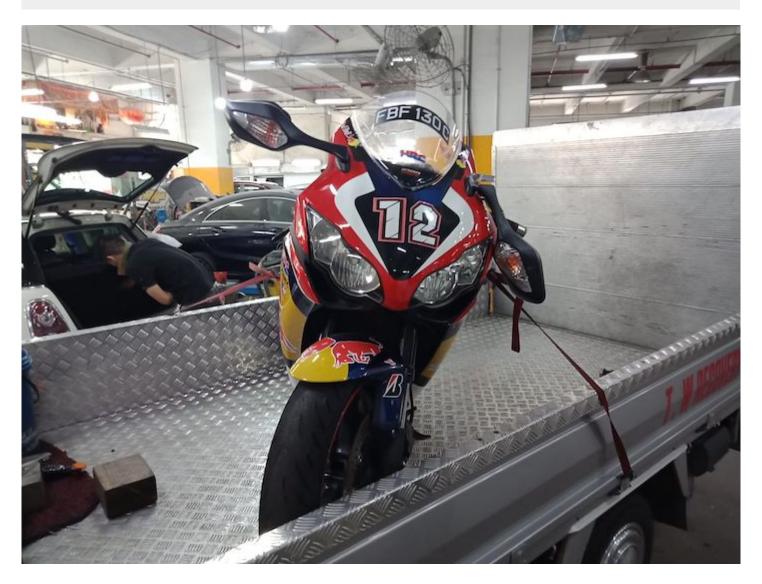
I/We declare the foregoing particulars are true in every respect.

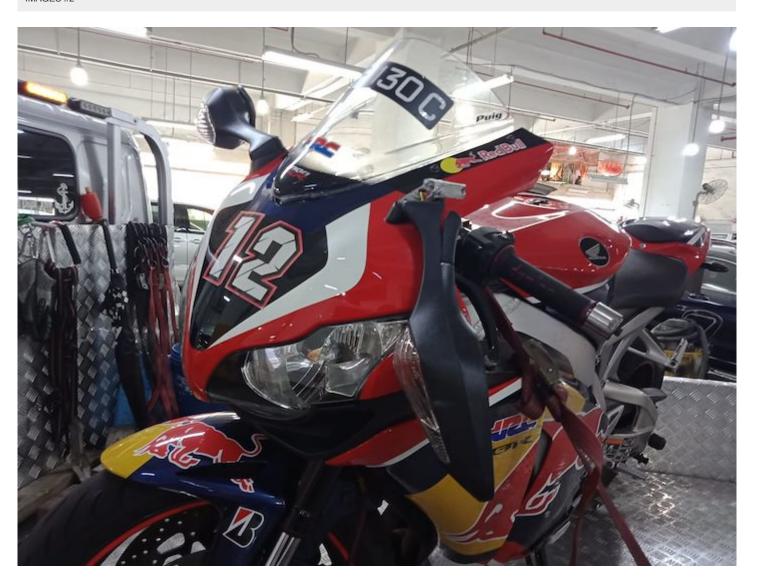
Policyholder's Signature / Date & Time

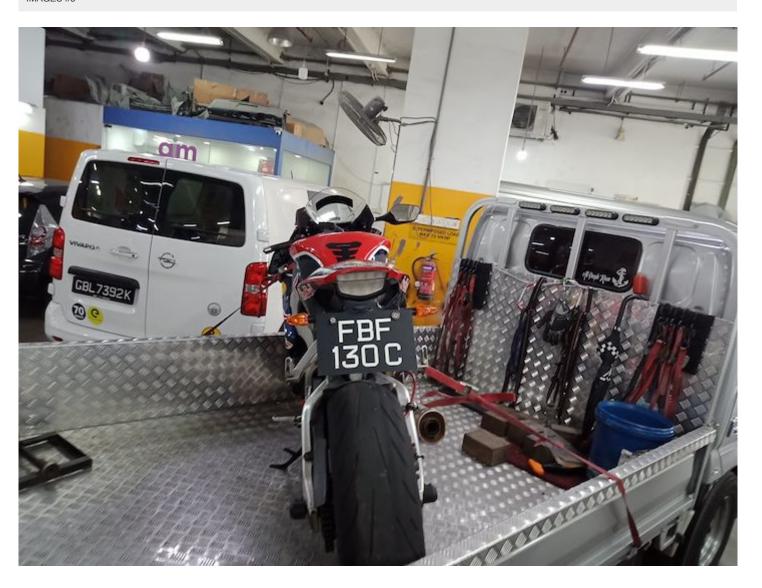
Actual Driver's Signature (if driver is not the policyholder)

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) JK 15/11/2002

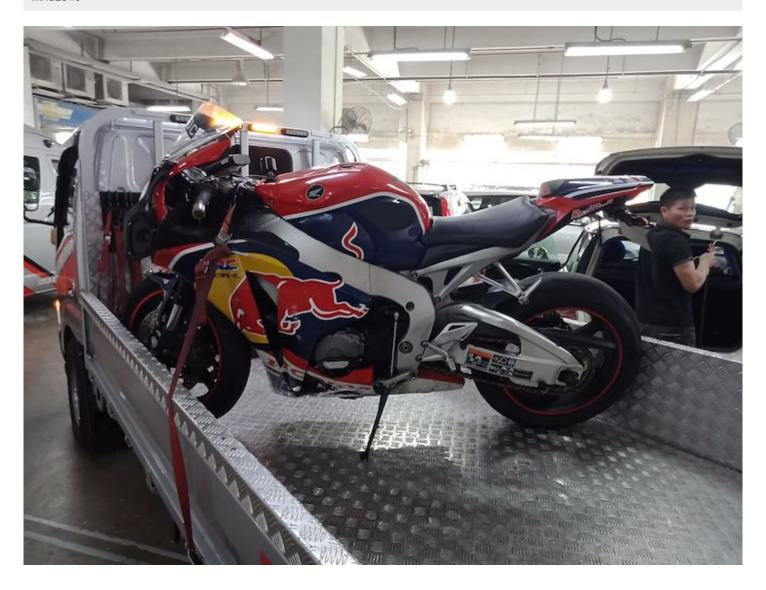
vJun2022















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Report No. F/20221101/7044

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No:1800-2180000

Date/Time Report Made 01/11/2022 14:08	Vide Re	port No.		Station Diary No.
Name Of Informant	Address			
MOHAMMAD RITZWAN BIN BAKRI	258C C 543258	OMPASSV/	ALE ROAD #02-57	73 SINGAPORE
ID Type / ID No.	Contact	No.		
NRIC NO / S8313000H	Home/C	office:	Mobile: 87830804	
Nationality	Email Address			
SINGAPORE CITIZEN	ITSRITZEY@LIVE.COM			
Occupation	Sex	Age	Date of Birth	Race
Other services managers	Male	39	08/04/1983	Javanese
Institution/School Name	Language English			
Date/Time Of Incident 31/10/2022 13:15 - 31/10/2022 14:00	Location Of Incident 189B RIVERVALE DRIVE RIVERVALE GATEWAY			
	SINGAPORE 542189			

Brief details.

On 31st October 2022 at around 1300hours, I was from work riding back home. I was riding at Tampines Expressway exiting the filter lane towards Sengkang. As I slowed down at the filter lane on the left, a lorry GBH 4854K infront at the right lane suddenly swerve into my lane cornering me to a tight spot. Due to that reckless driving and negligence of sudden change in lane, I quickly brake and bail to avoid any collision and thus fell off my bike and got into accident. That sudden impact to the kerb got me into a short few seconds of concussion which I'm only aware when the driver came out from the lorry to ask me

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: 01/11/2022 14:08	
Officer In-Charge Of Case:	Classification Of Case:	





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20221101/7044

how I am. I was in too much pain and was unable to move also unable communicate much apart then to get him to call the ambulance.

At around 1315hours passerby came to assist me and to take photos of the incident. At around 1320hours ambulance came and I was taken to Changi General Hospital. I'm still in hospital now in SSU still receiving my treatment and under observation while I'm sending this report.

Subjects Involved			
Suspect	200		
Person Name	Abdul A'ziz Bin Hj Mohamed Yusoff		
ID Type	NRIC NO	ID No	S9316209I
Gender	Male	Age	29
Race	Malay	Language	English
Occupation	Lorry driver	Address	946 Jurong West Street 91 #02- 673 SINGAPORE 640946
Mobile No	88949953	Complexion	Light tan
Build	Medium	Height About	170cm
Attire Last Worn	Black tshirt & khaki bermuda.	Hair Colour	Black
Hair Style	Short-Straight	Relation To Informant	No one.
Victim	1000 E	900000000000000000000000000000000000000	
Person Name	MOHAMMAD RITZWAN BIN B	BAKRI	
ID Type	NRIC NO	ID No	S8313000H
Gender	Male	Age	39
Race	Javanese	Language	English

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass.
Signature Of Interpreter: Not applicable	No signature is required. Date/Time: 01/11/2022 14:08
Officer In-Charge Of Case:	Classification Of Case:





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POLICE REPORT (NP299) CONTINUATION OF REPORT

Report No. F/20221101/7044

Occupation	Other services managers	Address	258C COMPASSVALE ROAD #02-573 SINGAPORE 543258
Mobile No	87830804	Is Informant A Victim?	Yes
Person Name	MOHAMMAD RITZWAN BIN	BAKRI (Informant)	

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 01/11/2022 14:08
Officer In-Charge Of Case:	Classification Of Case: