

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	17/01/2023 12:00 (SGT)
Reported by	Driver
Date of Accident	12/01/2023 11:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG MARGARET DRIVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBB4951U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	HAFIZAM BIN KAMARUZAMAN
NRIC No	S9921339F
Email Address	SHAHRLNIZAM1110@GMAIL.COM
Mobile Phone No	(Phone) +65-97229446
Alternative Phone No	-

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 - Claiming third party
Vehicle Category	Motorcycle
Transmission	Manual
CC	400

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5127070503

DRIVER

Name of Driver	MUHAMMAD SHAHRULNIZAM BIN MAZLAN
NRIC No	T0029702F
Date Of Birth	05/09/2000
Occupation	Indoor

Date Of Driving Pass	01/11/2022
Driving experience	2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91515073
Alt. Phone Number	-
Email Address	SHAHRLNIZAM1110@GMAIL.COM
Address	BLK 573B WOODLANDS DRIVE 16
Address complement	#07-648
Postcode	732573
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	Collision - Cross Junction
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?	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

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	ADVICE OI TO SUBMIT TO MOTORVIDEO@INCOME.COM.SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGP8335P
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Private car
Contact Number	-
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 SHAHRULNIZAM BIN MAZLAN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	ABRASION LEFT & RIGHT HAND LOWER BODY HIP ABRASION LEFT LEG ABRASION MUSCLE TENDERNESS ON WHOLE BODY FBB4951U
Injured person in which vehicle?	No
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	

WITNESS DETAILS

WITNESS 1

Name	FAIZAL BIN SULAIMAN
Phone	(Phone) +65-93909203
Email	-

SKETCH PLAN

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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:

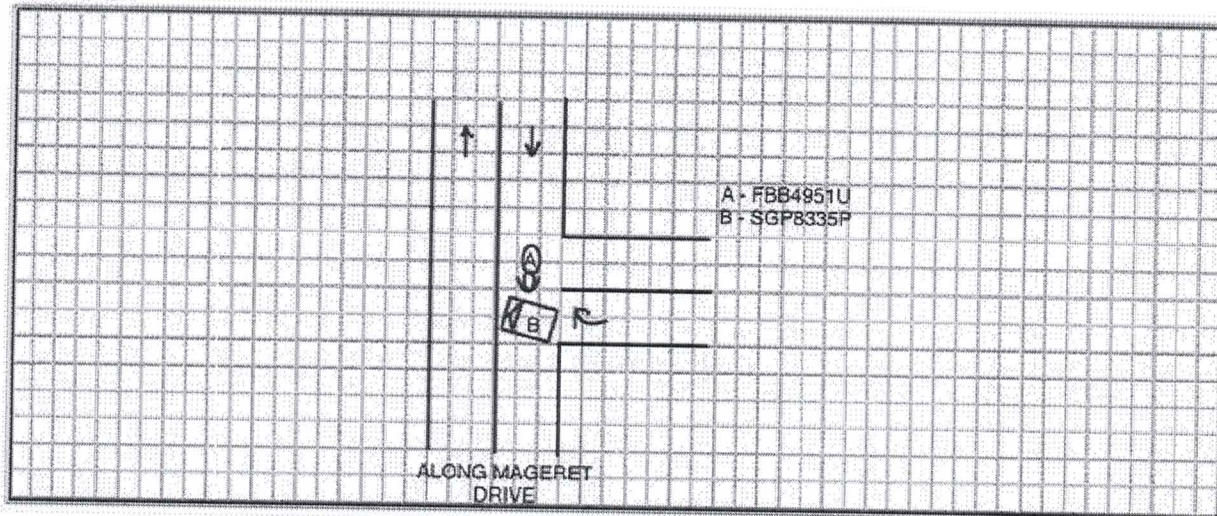
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

17/01/2023
Policyholder's Signature / Date & Time

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

MUAMMAR GADDAFI BIN MARZUKI
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

REFER TO GEARS

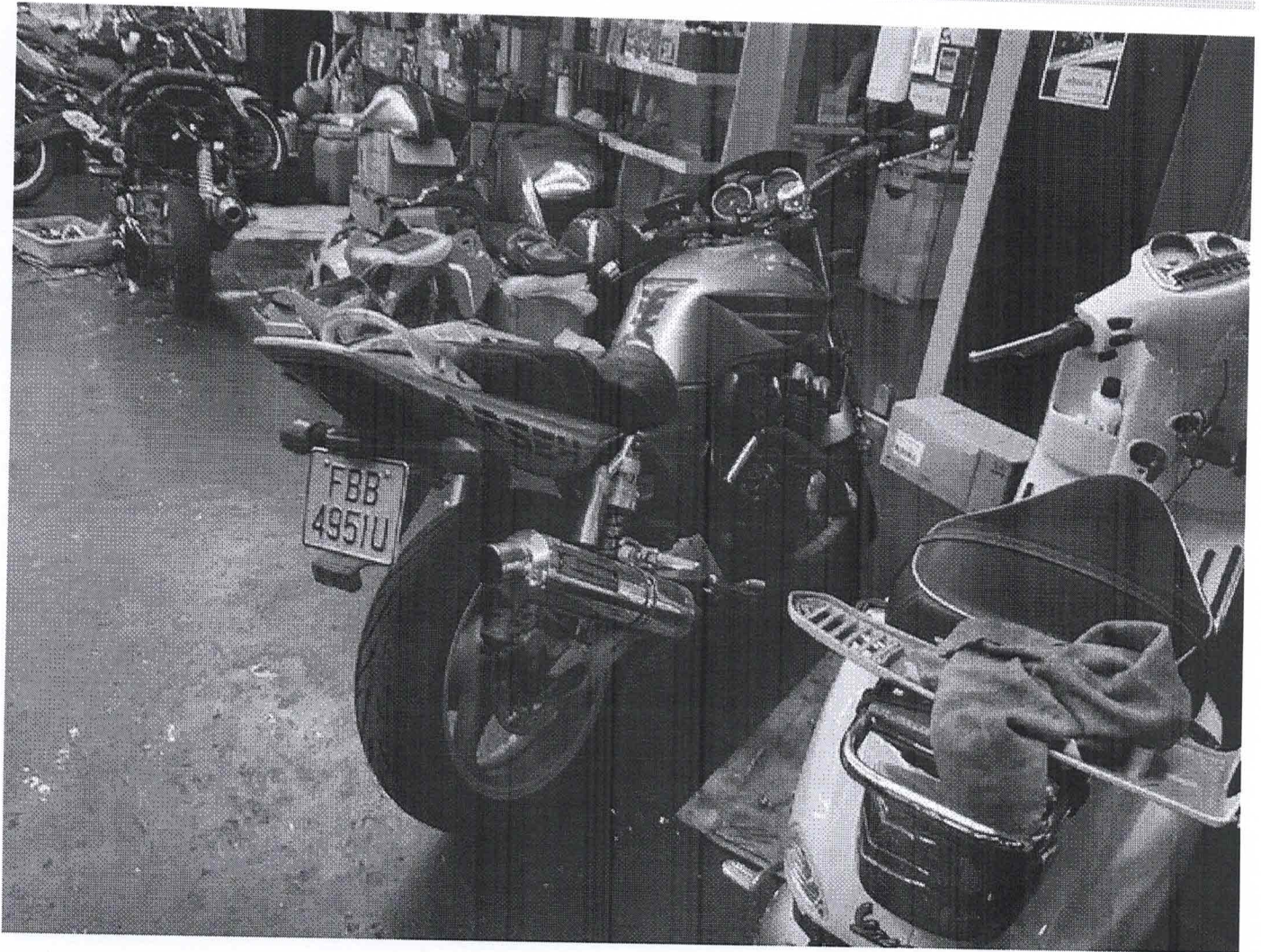
Declaration

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

17/01/2023
Policyholder's Signature / Date & Time

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

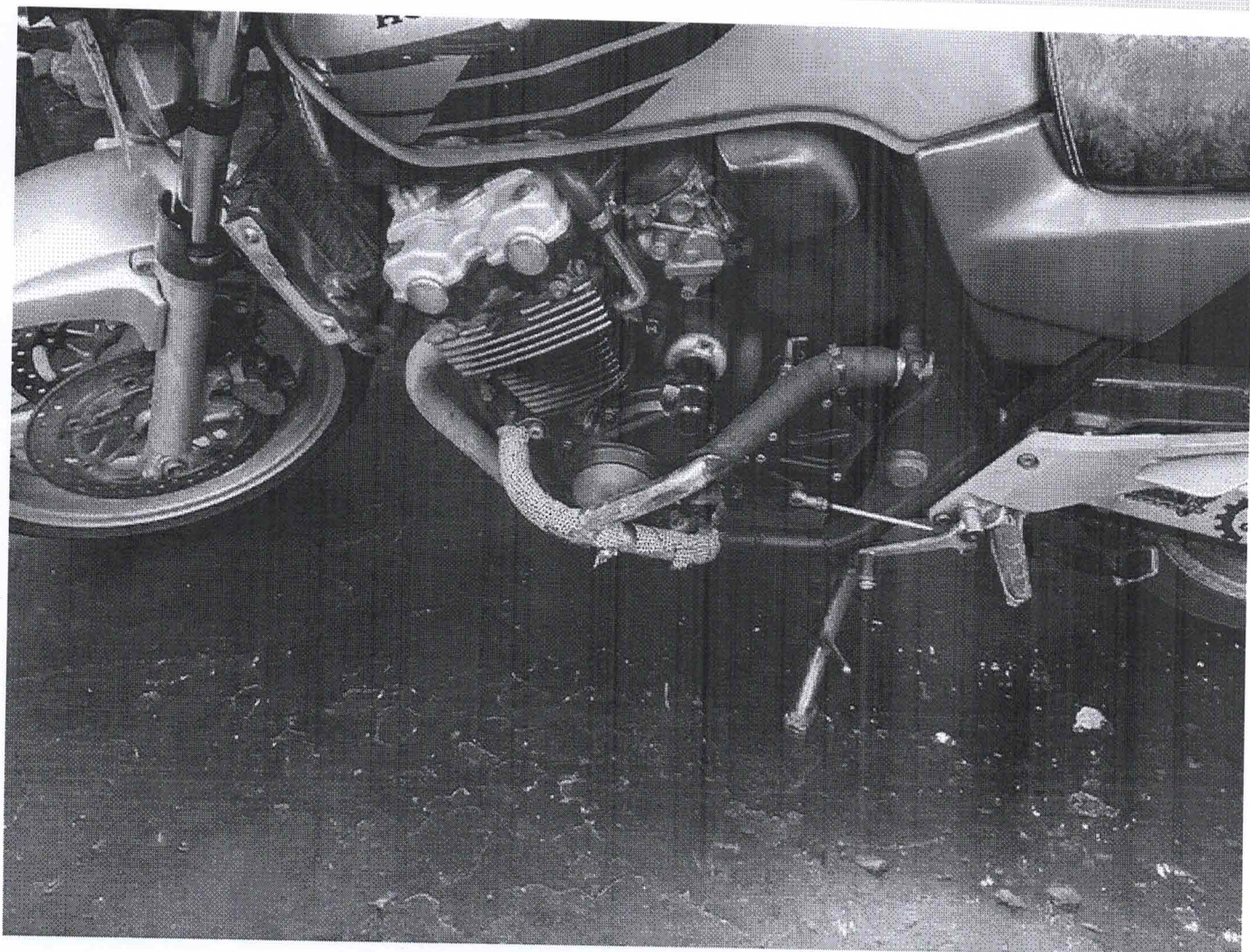
MUAMMAR GADDAFI BIN MARZUKI
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

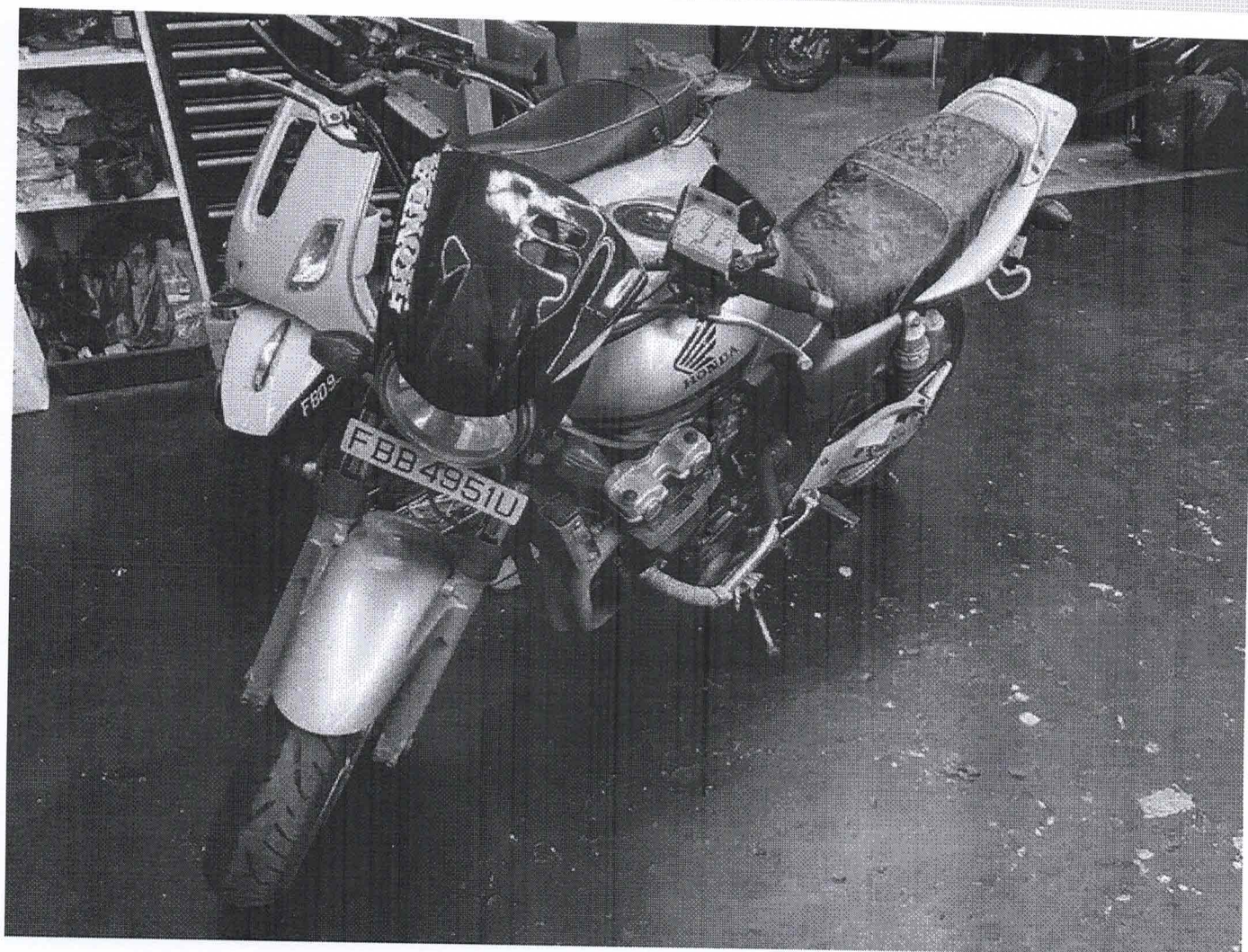


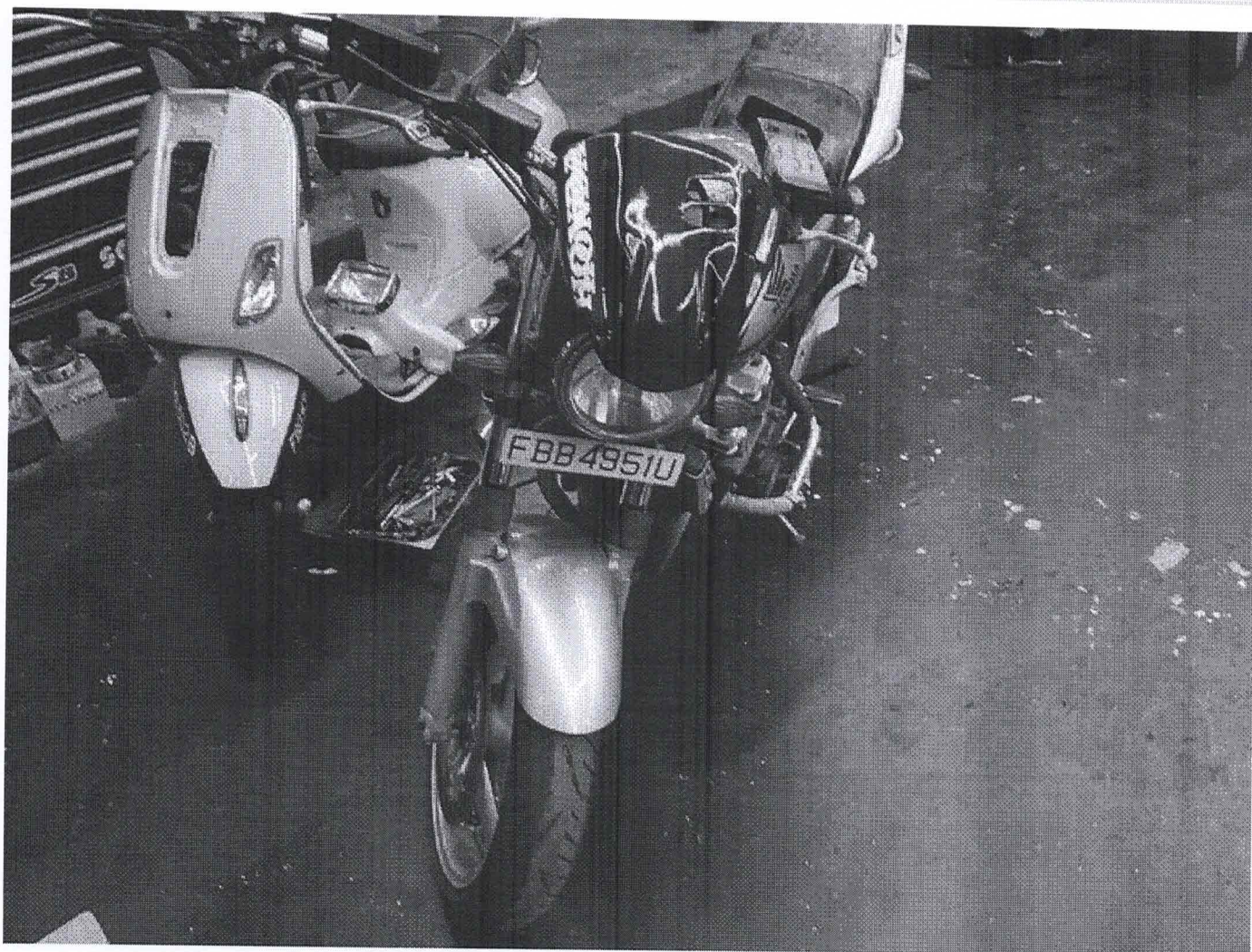














SINGAPORE POLICE FORCE



T/20230113/7058

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 406865
Tel No: 65470000

1 of 3

Report No. T/20230113/7058

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/01/2023 17:53		Vide Report No.: D/20230112/0045		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMMAD SHAHRULNIZAM BIN MAZLAN			Address: 5738 WOODLANDS DRIVE 16 #07-648 SINGAPORE 732673		
ID Type / ID No.: NRIC NO / T0029702F			Contact No.: Home/Office: Mobile: 91515073		
Nationality: SINGAPORE CITIZEN			Email: SHAHRULNIZAM1110@GMAIL.COM		
Sex: Male	Age: 22	Date of Birth: 05/09/2000	Type of Informant: Rider		
Race: Javanese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 2B,2A		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/01/2023 11:00	Type of Location: T-Junction
Location: MARGARET DRIVE				
Weather: Sunny		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of
FBB4951U	Motorcycle					0
SGP8335P	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20230113/7058

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

2 of 3

Report No. T/20230113/7058

CONTINUATION OF REPORT

Rider			
Name	MUHAMMAD SHAHRULNIZAM BIN MAZLAN	ID No.	T0029702F
Related Vehicle	FBF4951U (Motorcycle)	Contact No.	91515073
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry	Class: 2B,2A Date of Expiry: NIL
Date	12/01/2023	Date	13/01/2023
No. of Days granted Medical Leave	23	Degree of	Serious

Brief Details.

On 12 January 2023 at around 11am plus, i was riding on my motorcycle (FBF4951U) along Margaret Drive towards Queensway Secondary School from Dawson Road. I was cruising along the route and as i was riding towards the T junction right before Queensway Secondary School, i noticed a car inching out of the Stop line from Margaret Drive wanting to turn right heading towards Kay Siang Road. Once i saw that from a far, i slowed down but as im getting closer, i noticed theres still oncoming traffic stopping the car from turning right, so i continued my way through and at about 10-15 meters away from the T junction, the car suddenly move forward wanting to turn right. Upon seeing that, i applied my ebrake but unfortunately im unable to stop so i drop to my left and throw myself out of my bike resulting me to flew about a few meters and rolling afterwards before coming to a stop right beside the car. My hip then felt as though it was locked making me unable to move the lower part of my body. I stayed there for a few seconds before a witness from a van of the oncoming traffic came and help to marshal as well as assist me. He then called for an ambulance and i then waited until the ambulance arrive.

I have a in car cam video footage from a witness travelling along the same road but from the opposite direction as me who witnessed the whole thing

Below is the witness phone number
: +65 93909203
I couldnt get his name

**SINGAPORE
POLICE FORCE**

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



T/20230113/7058

3 of 3

Report No. T/20230113/7058

CONTINUATION OF REPORTSketch 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 /
NUR HAFIZAH BINTE NORIZAN
Contact No.: 96188347

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

Date/Time:
13/01/2023 17:53

Classification Of Case:

NP168