

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 Report	14/08/2019 14:17
Date Of Accident	13/06/2019 08:45
Exact Location Of Accident	WOODLANDS AVE 10
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBA6091T
Insured/Policyholder	
Name Of Registered Owner	MOHD SANIP BIN JASMAWI
NRIC No	S0356052Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81109360
Alternative Phone No	OFFICE-81109360

Vehicle Particulars

Manufacturer	HONDA
Model	CB400-399CC F3V
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5064228374-05
Cover Note Number	5064228374-05

Driver

Name of Driver	MOHD SANIP BIN JASMAWI
NRIC No	S0356052Z
Date Of Birth	29/08/1950
Occupation	INDOOR
Date Of Driving Pass	20/01/1989
Driving Experience	30 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81109360
Fax Number	
Contact Number	OFFICE-81109360
Email Address	NOEMAIL

Address	BLK 521 BEDOK NORTH AVE 1 #07-296
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBH9834K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	MOHD SANIP BIN JASMAWI
Approximate Age	68
Injuries Sustain	REFER TO MEDICAL REPORT
Injured person in which vehicle?	FBA6091T
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	BLK 521 BEDOK NORTH AVE 1 #07-296
Postcode	S460521

Sketch Plan



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S645500205 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : WFTF 19106219 Vehicle Registration No: F8A 6091T
Name (as shown in NRIC) : Mr Seng Guan Tan NRIC/FIN/Passport No : S0356052/2
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 81K 521, Bedok North Ave 1, #01-296 Singapore 460521
Contact (Tel) : 81109360 Mobile No. : _____
Email Address : _____
Date of Accident : 13 June 2019 Time of Accident : 08.48
Place of Accident : Woodlands Ave 10
Insurance Company : _____

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

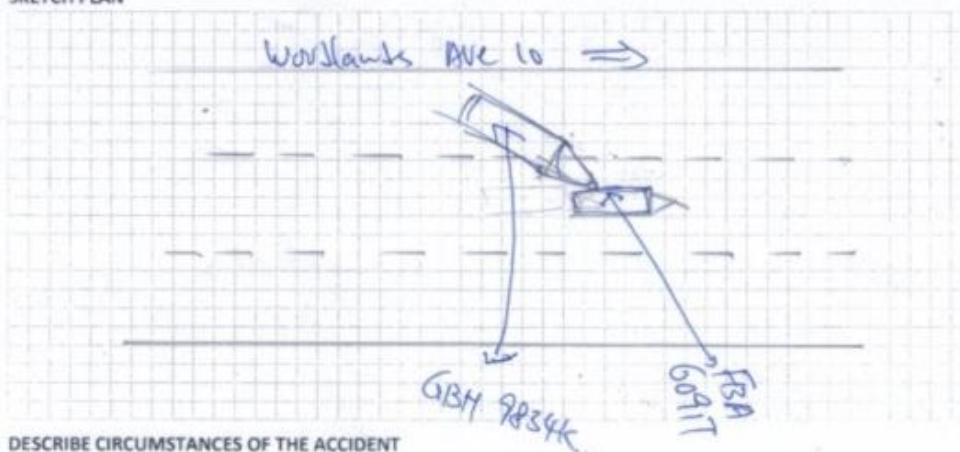
Refer to Police report

14/8/2019
Policyholder / Driver's Signature
Date:

14/8/19
Reporting Centre Personnel's Signature
Name Tan Lian Tan
NRIC/FIN No.: S125634PSC
Date:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police report

DECLARATION

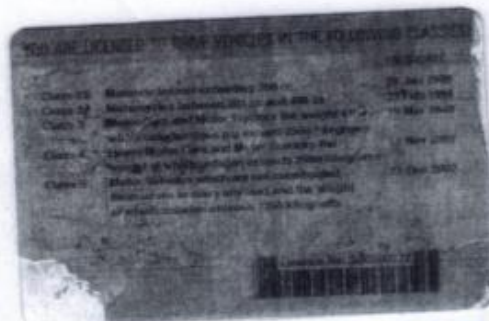
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature _____
Date & Time: 1/4/19
1/4/19

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

Reporting Centre Personnel's Signature
Name: Taslim Tarek
NRIC/FIN No.: S' 25134852

Driving License



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20/01/1989

Police Report



**SINGAPORE
POLICE FORCE**



T/20190629/2087

1 of 3

Report No. T/20190629/2087

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/06/2019 14:35		Vide Report No.:		Station Diary No.: 39	
Informant's Particulars:					
Name of Informant: MOHAMED SANIP BIN JASMAWI		Address: APT BLK 521 BEDOK NORTH AVENUE 1 #07-296 SINGAPORE 460521			
ID Type / ID No.: NRIC NO / S0356052Z		Contact No.: Home/Office: Mobile: 81109360			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 68	Date of Birth: 29/08/1950	Type of Informant: Rider		
Race: Javanese		Language: English		Institution / School Name:	
Occupation: Other heavy truck and lorry drivers		Driving Licence Information: Class:		Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 13/06/2019 08:45	Type of Location: Straight Road
Location: Along Road 1 WOODLANDS AVENUE 10				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Self Skid		Anyone conveyed by ambulance: No		

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBA6091T	Motorcycle	HONDA	CB400	Blue		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBA6091T	NTUC Income Insurance Co-Operative Limited	5064228374-05	24/02/2019	29/12/2019

Police Report



**SINGAPORE
POLICE FORCE**



T/20190629/2087

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

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Report No. T/20190629/2087

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Details of Person Involved			
Name	MOHAMED SANIP BIN JASMAW	ID No.	S0356052Z
Related Vehicle	FBA6091T (Motorcycle)	Contact No.	81109360
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	13/06/2019	Date Discharge	25/06/2019
No. of Days granted Medical Leave	31	Degree of Injury	Slight

Brief Details.

On 13/06/2019 at about 0848hrs, I was riding my motorcycle, FBA6091T, along Woodlands Ave 10. While I was riding, I noticed that there was something flashing ahead of me when suddenly there was a flash of light in front of me which caused me to skid and fall. I was unconscious until an ambulance came and conveyed me to the hospital. I do not remember clearly what happened during the accident.

I was conveyed to Khoo Teck Puat hospital and was discharged on the 25/06/2019. I received 31 days MC from 25/06/2019 to 25/07/2019.

I suffered a broken left collar bone and also two of my left rib cage.

Police Report



**SINGAPORE
POLICE FORCE**



T/20190629/2087

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

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Report No. T/20190629/2087

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /
Sgt 3 MUHAMMAD FAZLI BIN ZAILANI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
29/06/2019 14:35

Officer In Charge Of Case:

TP / GIT /
Sr Staff Sgt NOR FAIZAL BIN YAHYA
Contact No.: 65476202

Classification Of Case:

Authentication Stamp
NP168



SINGAPORE
POLICE FORCE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo

