

## 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 .....	23/02/2023 12:42 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	18/02/2023 19:25 (SGT)
Exact Location of Accident .....	Kg Java Rd, Singapore
Additional Location Information .....	-
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	FBG9156P
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	MOHAMED ALAUDEEN MOHIDEEN
NRIC No .....	GXXXX774N
Email Address .....	m.alaudeen@ymail.com
Mobile Phone No .....	(Phone) +65-83001130
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Yamaha
Model .....	XA 125 CVT
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 .....	Auto
CC .....	125

#### INSURANCE COMPANY

Name of Insurance Company .....	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	A 300508814 VMP

#### DRIVER

Name of Driver .....	MOHAMED ALAUDEEN MOHIDEEN
NRIC No .....	GXXXX774N
Date Of Birth .....	08/06/1970
Occupation .....	Indoor

Date Of Driving Pass .....	08/02/2009
Driving experience .....	14 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-83001130
Alt. Phone Number .....	-
Email Address .....	m.aladeen@ymail.com
Address .....	14 KITCHENER LINK #02-27
Address complement .....	CITY SQUARE RESIDENCES
Postcode .....	207223
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 .....	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) .....	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 .....	ALAUDEEN MUMTAJ BEGUM
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Central Division Headquarters
Police Station Phone No .....	(Phone) +65-18002240000
Alt. Police Station Phone No .....	(Fax) +65-62200877
Police Station Address .....	391 New Bridge Road #03-112 Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT A/20230220/7023

#### 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 .....	SHB5857G
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 .....	MOHAMED ALAUDEEN MOHIDEEN
Gender .....	Male
Phone No .....	(Phone) +65-83001130
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	FBG9156P
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	Yes

### INJURED 2

Name of injured person .....	ALAUDEEN MUMTAJ BEGUM
Gender .....	Female
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	FBG9156P
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	Yes

**SKETCH PLAN****IMPORTANT NOTICE**

1. Please report **correctly** the details of the accident to speed up the claims process.
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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. The 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.
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:

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

**SKETCH PLAN**

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As a police Report A/20230220/7023

DECLARATION

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

23/2

Policyholder's Signature Date  
& Time:

UJARMC SketchPlanForm V3

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

23/02/2023  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

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**SINGAPORE  
POLICE FORCE**



A/20230220/7023

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Report No. A/20230220/7023

**POLICE REPORT (NP299)**

Police Station Of Origin  
Central Division HQ  
391 New Bridge Road #03-112 Police  
Cantonment Complex SINGAPORE 088762  
Tel No:1800-2240000

Date/Time Report Made 20/02/2023 14:10	Vide Report No.	Station Diary No.
Name Of Informant MOHAMED ALAUDEEN MOHIDEEN	Address 14 KITCHENER LINK #02-27 CITY SQUARE RESIDENCES SINGAPORE 207223	
ID Type / ID No. FIN NO / G0020774N	Contact No. Home/Office:	Mobile: 83001130
Nationality INDIAN	Email Address M.ALAUDEEN@YMAIL.COM	
Occupation Administration manager	Sex Male	Age 52
Institution/School Name	Date of Birth 08/06/1970	Race Indian
Date/Time Of Incident 18/02/2023 19:25 - 18/02/2023 20:15	Language English	
	Location Of Incident 14 KITCHENER LINK #02-27 CITY SQUARE RESIDENCES SINGAPORE 207223	

**Brief details.****Vehicle Accident:**

I was on my Yamaha bike, FBG 9156P, with my wife. Awaiting for right turn into Hampshire Road from Kg Java Rd, once signal for right came along, I started to turn and a Strides taxi, vehicle no.: SHB 5857G, hit me from behind.

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

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

Date/Time:  
20/02/2023 14:10

Classification Of Case:





**SINGAPORE  
POLICE FORCE**



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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20230220/7023

My wife fell off the bike head landing backwards on the road. I rode little further and fell with my bike down on the road. She was slightly glared with the impact and took time to respond. Then some passersby and the taxi driver assisted to shift my wife towards the bus stop nearby. Later ambulance was called for and once it arrived I accompanied my wife on the ambulance to TTSH. In the hospital emergency, after the treatments we were discharged by 12 midnight.

Subjects Involved			
Mohamed Alaudeen Mohideen			
Person Name	MOHAMED ALAUDEEN MOHIDEEN		
ID Type	FIN NO	ID No	G0020774N
Gender	Male	Age	52
Race	Indian	Language	English
Occupation	Administration manager	Address	14 KITCHENER LINK #02-27 CITY SQUARE RESIDENCES SINGAPORE 207223
Mobile No	83001130	Is Informant A Victim?	Yes
Alaudeen Mumtaj Begum			
Person Name	ALAUDEEN MUMTAJ BEGUM		
ID Type	FIN NO	ID No	G6418826M
Gender	Female	Age	48
Race	Indian	Language	English
Occupation	Beautician	Address	14 KITCHNER LINK #02-27 CITY SQUARE RESIDENCE SINGAPORE 207223

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

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

Date/Time:  
20/02/2023 14:10

Classification Of Case:



**SINGAPORE  
POLICE FORCE**

A/20230220/7023

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20230220/7023

Mobile No	83001130	Relation To Informant	WIFE
Person Name			
MOHAMED ALAUDEEN MOHIDEEN (Informant)			

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

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

Date/Time:  
20/02/2023 14:10

Classification Of Case: