

[illegible]

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	13/03/2023 15:35 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	26/02/2023 11:30 (SGT)
Exact Location of Accident	Newton Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBR5532E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AZLI BIN ABD AZIZ
NRIC No	SXXXX922G
Email Address	hrliaison168@gmail.com
Mobile Phone No	(Phone) +65-94526842
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	Aerox
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Auto
CC	155

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	A 300455277 VMP

DRIVER

Name of Driver	AZLI BIN ABD AZIZ
NRIC No	SXXXX922G
Date Of Birth	16/06/1987
Occupation	Outdoor

* Date Of Driving Pass	05/09/2005
Driving experience	17 YEARS AND 5 MONTHS
Gender	Male
* Mobile Number	(Phone) +65-94526842
Alt. Phone Number	-
Email Address	hrliaison168@gmail.com
Address	BLK 801A KEAT HONG CLOSE #10-13
Address complement	-
Postcode	681801
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 on collision
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	Hong Kah North Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18005679999
Alt. Police Station Phone No	(Fax) +65-65652508
Police Station Address	Blk 370 Bukit Batok Street 31 #01-201 Singapore 650370
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230226/2051 AND E/20230302/7049 (TYPE OF COLLISION IS HEAD TO SIDE)

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	SHA4630E
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	AZLI BIN ABD AZIZ
Gender	Male
Phone No	(Phone) +65-94526842
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SERIOUS INJURIES
Injured person in which vehicle?	FBR5532E
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

WITNESS DETAILS

WITNESS 1

Name	SAFWAN
Phone	(Phone) +65-91142099
Email	-



SKETCH PLAN

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**.
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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

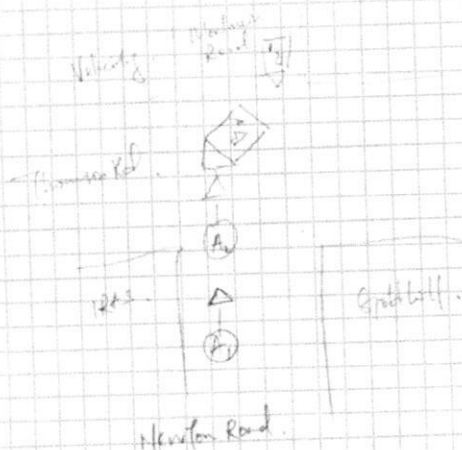
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



VEH A: FBR5332E

VEH B: SHA4630E


Describe Circumstances of the Accident


Refer to Police Reports

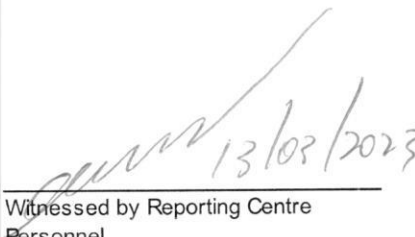
T/20230226/2051 AND E/20230302/7049

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE



T/20230226/2051

1 of 3

Report No. T/20230226/2051

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/02/2023 15:17	Vide Report No.:	Station Diary No.: 34
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Informant's Particulars

Name of Informant: AZLI BIN ABD AZIZ			Address: APT BLK 801A KEAT HONG CLOSE #10-13 SINGAPORE 681801	
ID Type / ID No.: NRIC NO / S8716922G			Contact No.: Home/Office: 94526842	Mobile:
Nationality: SINGAPORE CITIZEN			Email: azliaziz1606@gmail.com	
Sex: Male	Age: 35	Date of Birth: 16/06/1987	Type of Informant: Rider	
Race: Malay			Language:	Institution / School Name:
Occupation: Delivery Rider			Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/02/2023 11:30	Type of Location: X-Junction
Location: NEWTON ROAD				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 60 Km/h		
Traffic Flow: Two Way	Traffic Control:	Traffic Volume: Heavy		
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 Passenger
FBR5532E	Motorcycle	YAMAHA	AEROX 155A	Blue	Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBR5532E	MSIG INSURANCE (SINGAPORE) PTE. LTD.	300455377	30/07/2022	29/07/2023



**SINGAPORE
POLICE FORCE**



T/20230226/2051

2 of 3

Report No. T/20230226/2051

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	AZLI BIN ABD AZIZ	ID No.	S8716922G
Related Vehicle	NIL	Contact No.	94526842
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 25th February 2023, at 1130 hours I was riding on the second lane of Newton Rd towards Moulmein Rd nearby IRAS building and moving on from traffic light, my motorcycle front bearing the carplate of FBR5532E collided with a taxi left side. The taxi was driven by a female driver and was turning right from the opposite direction. I affirmed that the traffic light on my side was green and the taxi driver beat the red light. In addition, I have a witness by the name of Safwan, HP no: 9114 2099. Traffic police and ambulance attended to my incident and conveyed me to Tan Tock Seng Hospital.

From this accident, I suffered a dislocated shoulder on my right and swollen knees on both sides. I also got a 5 days MC ranging from 25/02/2023 to 01/03/2023. One of the TP IO called me yesterday to inform me to do a road traffic accident report. I am unsure of the incident report number and the IO name that called me yesterday.



**SINGAPORE
POLICE FORCE**



T/20230226/2051

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

3 of 3

Report No. T/20230226/2051

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:

J /

SC2 GOH JUN YUNG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

26/02/2023 15:17

Officer In Charge Of Case:

TP / GIT /

SI CHONG GUAN FATT

Contact No.: 65472077

Classification Of Case:

NP168



SINGAPORE POLICE FORCE



E/20230302/7049

1 of 2

POLICE REPORT (NP299)

Report No. E/20230302/7049

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No:1800-3910000

Date/Time Report Made 02/03/2023 21:28	Vide Report No.	Station Diary No.
Name Of Informant AZLI BIN ABD AZIZ	Address 801A KEAT HONG CLOSE #10-13 SINGAPORE 681801	
ID Type / ID No. NRIC NO / S8716922G	Contact No. Home/Office:	Mobile: 94526842
Nationality SINGAPORE CITIZEN	Email Address azliaziz1606@gmail.com	
Occupation Grab Food Rider	Sex Male	Age 35
Institution/School Name	Date of Birth 16/06/1987	Race Malay
Date/Time Of Incident 25/02/2023 11:30	Location Of Incident NEWTON ROAD	

Brief details.

Vide T20230226/2051

I wish to add on to my initial report:

My Samsung Note 20 had also been damaged due to the collision. The front screen cracked and the back of my phone had also cracked open.

After I was discharged from TTSH with 5 days MC, I started feeling aches and soreness over my neck,

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:
02/03/2023 21:28

Classification Of Case:



**SINGAPORE
POLICE FORCE**



E/20230302/7049

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20230302/7049

upper and lower back areas on top of my right shoulder and knees reported at TTSH.

The pain did not go away and as such, I decided to follow up at my wife's company doctor Unihealth Jurong East on 02/03/2023.

I was given another 5 days MC.

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:
02/03/2023 21:28

Classification Of Case:

5

Date of Accident : 26/02/2023 Accident Time: 1130 (24-HR-Format)
Accident Place : Along NEWTON ROAD jn of Moulmein Road
Vehicle. No. (Car Plate No.) : FBR5532E Make/Model: Yamaha Aerox 155
Insurance Company : MSIG Policy No: A 300455377 VMP
Owner or Company Name /IC No. : AZLI BIN ABD AZIZ
Owner or Company Contact No. : 94526842 Owner's Hp _____ Company Tel _____
DRIVER'S Name / IC No. : Same as Owner
DRIVER'S Date Of Birth : 16/06/1987 DRIVER'S License Pass Date 05/09/2005
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Self
DRIVER'S Address : 801A Keat Hong Close #10-13 Singapore 681801
DRIVER'S Contact No./ Alt No. : 1) 94526842 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : hrliaison168@gmail.com
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): 1
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
Any Injury (If YES, Pls state): _____

Other Party Driver's Particular (if any)

Vehicle. No: <u>SHA4630E</u>	Vehicle. No: _____
Vehicle Make\Model: _____	Vehicle Make\Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:



MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co.Reg No. 200412212G GST Reg. No. 20-0412212G
A Member of **MS&AD** INSURANCE GROUP

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

MOTORCYCLE Third Party Fire And Theft

Certificate No. A 300455377 VMP

Excess : SGD300

Windscreen Excess : NIL

1. Index Mark and Registration Number of Vehicle
FBR5532E

2. Name of Policyholder
AZLI BIN ABD AZIZ

3. Effective Date of the Commencement of Insurance for the purposes of the Act
30/07/2022

4. Date of Expiry of Insurance
29/07/2023

5. Persons or Classes of Persons entitled to drive*
AZLI BIN ABD AZIZ

*Provided that the person driving is permitted in accordance with the licensing or other laws or laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use *

Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. The Policy does not cover

- (1) Use for hire or reward.
- (2) Use for racing pace-making reliability trial or speed-testing.
- (3) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (4) Use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or

**MSIG**

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 Tel +65 6827 7888, Fax +65 6827 7800
 Co.Reg No. 200412212G GST Reg. No. 20-0412212G
 A Member of **MS&AD** INSURANCE GROUP

Administered by:

**WTT INSURANCE AGENCIES PTE. LTD.**

(ROC: 198002162D)

5001 Beach Road #02-77/78 Golden Mile Complex Singapore 398157
 Tel: 62946259 / 62965445 Fax: 62966206 Email: wttins@singnet.com.sg

利發摩啤(私人)有限公司
LEE HUAT MOTORING PTE. LTD.
 Co. Reg. No: 201705673Z
 673 & 875, Upper Bukit Timah Road
 Singapore 678176
 Tel: 67691717, 67600626
 Fax: 67691294

MOTORCYCLE ENDORSEMENT

POLICYHOLDER INFORMATION

Name	: AZLI BIN ABD AZIZ	Date of Issue	: 21/07/2022
Address	: BLK 801A KEAT HONG CLOSE #10-13 Singapore 681801	Policy No.	: A 300455377 VMP
		Account No.	: 3275
		Scheme Code	: 1M1009
		Period of Insurance	: 30/07/2022 to 29/07/2023
		Premium	: SGD0.00
			(inclusive of GST)

RISK NUMBER 1

Insured Details

Registration No.	: FBR5532E	Year of Registration	: 2020
Make/Model	: Yamaha Motorcycle AEROX 155	Capacity	: 155 C.C.
Engine No.	: G3M1E050404	Seating Capacity	: 02 (Incl. Driver)
Chassis No.	: MLESG584111050403		

Coverage Details

Type of Cover	: Third Party Fire And Theft	Sum Insured	: Market Value at the Time of Loss
No Claim Discount	: 15%	NCD Protector	: Not Covered
Annual Premium	: SGD223.55		
Food Delivery Use	: Yes	Vehicle for Commercial purpose	: Yes
Excess	: SGD300 (Excess Fire And Theft) SGD600 (Theft Outside Singapore Excess)		
Main Rider	: AZLI BIN ABD AZIZ	Personal Accident Covered	: Yes
Additional Rider(s)	:		

Limitations As To Use : Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. The Policy does not cover

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- (3) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (4) Use for any purpose in connection with the Motor Trade.

ENDORSEMENT NOTE

ENDORSEMENT NO. 001

EFFECTIVE DATE: 30/07/2022

It is hereby noted that the following Clause is hereby added:

Food and/or Parcel Delivery Services Extension

It is hereby declared and agreed that the Policy is extended to cover use for food and/or parcel delivery services. Item (iii) under Limitation as to Use is deemed to be deleted. Extension is subject to a minimum pro-rated additional premium of S \$50.00.

Withdrawal of this extension, a refund premium is allowed based on pro-rata basis and subject to a minimum retention of S \$50.00 on the additional premium paid. No refund will be payable if any claim has arisen during the period of the extended cover.

Subject otherwise to the terms exceptions and conditions of this Policy.

SIGNED FOR AND ON BEHALF OF THE COMPANY



Mack Eng
Chief Executive Officer
MSIG Insurance (Singapore) Pte. Ltd.