

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	07/03/2023 17:56 (SGT)
Reported by	Driver
Date of Accident	06/03/2023 18:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE(TUAS) AFTER PAYA LEBAR
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBT4731T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MUHAMMAD AFFIL BIN JUMANI
NRIC No	S8614519G
Email Address	AHMADSAIFUDDINAW@GMAIL.COM
Mobile Phone No	(Phone) +65-87755770
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	Jupiter mx 135
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	135

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5126216872

DRIVER

Name of Driver	AHMAD SAIFUDDIN BIN ABDUL WAHAB
NRIC No	S9445314C
Date Of Birth	09/12/1994
Occupation	Outdoor

Date Of Driving Pass	03/11/2020
Driving experience	2 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87755770
Alt. Phone Number	-
Email Address	AHMADSAIFUDDINAW@GMAIL.COM
Address	BLK 416 WOODLANDS STREET 41 #04-153
Address complement	-
Postcode	730416
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Relative
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	Side Swipe
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?	No
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 NO :
T/20230307/7063

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	FILE TOO BIG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLS7230P
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LOW YEW SENG
NRIC No	S7073979H
Contact Number	(Phone) +65-90476187
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	AHMAD SAIFUDDIN BIN ABDUL WAHAB
Gender	Male
Phone No	(Phone) +65-87755770
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	RIGHT TOES ABRASION, ABRASIONS ON RIGHT HAND. SWOLLEN RIGHT SHIN. ABRASIONS ON LEFT HAND. ABRASIONS ON RIGHT SHOULDER
Injured person in which vehicle?	FBT4731T
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

WITNESS DETAILS

WITNESS 1

Name	JEROME
Phone	(Phone) +65-90040403
Email	-

Describe Circumstance of the Accident

REFER TO POLICE REPORT NO :
T/20230307/7063

Declaration

I/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
& Time07/03/2023
17:30HRSWitnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)MOHAMMAD YUNOS BIN ABDUL SAMAD
S099951

2

SKETCH PLAN

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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
(Name as in NRIC/ID card)

MOHAMMAD YUNOS BIN ABDUL SAMAD
S099951

Sketch Plan

A - FBT4731T
 B - SLS7230P

PIE(TUAS)



**SINGAPORE
POLICE FORCE**



T/20230307/7063

1 of 3

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

Report No. T/20230307/7063

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/03/2023 17:23		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: AHMAD SAIFUDDIN BIN ABDUL WAHAB			Address: 416 WOODLANDS STREET 41 #04-153 SINGAPORE 730416		
ID Type / ID No.: NRIC NO / S9445314C			Contact No.: Home/Office: Mobile: 87755770		
Nationality: SINGAPORE CITIZEN			Email: AHMADSAIFUDDINAW@GMAIL.COM		
Sex: Male	Age: 28	Date of Birth: 09/12/1994	Type of Informant: Rider		
Race: Boyanese			Language: English		Institution / School Name:
Occupation: Grab delivery Rider			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/03/2023 18:40	Type of Location: Straight Road
Location: ALJUNIED CRESCENT				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBT4731T	Motorcycle	YAMAHA	Jupiter 135	Black	Slightly Damaged	0
SLS7230P	Car	TOYOTA	Corrola altis	Grey		0



**SINGAPORE
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T/20230307/7063

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

2 of 3

Report No. T/20230307/7063

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	AHMAD SAIFUDDIN BIN ABDUL WAHAB	ID No.	S9445314C
Related Vehicle	FBT4731T (Motorcycle)	Contact No.	87755770
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry	Class: 2B Date of Expiry: NIL
Date	06/03/2023	Date	07/03/2023
No. of Days granted Medical Leave	05	Degree of	Serious
Driver			
Name	LOW YEW SENG	ID No.	S7073979H
Related Vehicle	SLS7230P (Car)	Contact No.	90476187
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

Amendments for T/20220307/7052

On the above date n time, i was travelling along pie towards tuas after paya lebar exit on the 2nd of 4 lanes road from the right, i realized the extreme right lane was slow moving traffic when suddenly the said car which is from the right lane, lane change into 2nd lane without signal. i did applied brake to avoid but front portion of my bike side swipe into the said car right rear portion .an eye witness then approached me and provide me with cctv footage from his cam car.



**SINGAPORE
POLICE FORCE**



T/20230307/7063

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

3 of 3

Report No. T/20230307/7063

CONTINUATION OF REPORT

Sketch 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 /
TAY CHUN KEEN
Contact No.: 65476436

NP168

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

Date/Time:
07/03/2023 17:23

Classification Of Case: