SN09234L000C / National Assessment Centre Services [408933] ENTRY DATE & TIME: 21/04/2023 17:54 (SGT) SUBMITTED BY: NIVITHA VERSION: 1 (21/04/2023 17:54 (SGT))

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 witholding 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 21/04/2023 17:54 (SGT) Reported by **Actual Driver** Date of Accident 13/04/2023 17:25 (SGT) Exact Location of Accident Singapore Additional Location Information SCOTTS ROAD & STEVEN ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBK9031U

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner ROSET LIMOUSINE SERVICES PTE LTD Company Reg No 2XXXXX722Z Email Address khierthii@rosetlimo.com Mobile Phone No (Phone) +65-68445225 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Yamaha Model JUPITER 115 Z1 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 No - Claiming third party your vehicle? Vehicle Category Motorcycle Transmission Manual CC 1832

INSURANCE COMPANY

Name of Insurance Company **EQ Insurance Company Ltd** Policy Number / Cover Note Number DMMFHQ22-000008

DRIVER

Name of Driver **BUSTHONUL ABIDIN BIN ZAINAL** NRIC No SXXXX091H Date Of Birth 27/04/1986 Occupation Outdoor

Date Of Driving Pass 26/06/2007 Driving experience 15 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-87547317 Alt. Phone Number Email Address khierthii@rosetlimo.com Address APT BLK 416A FERNVALE LINK Address complement # 06-106 Postcode 791416 Is the driver the policyholder? If No, Relationship of the Driver with the Insured RENTAL-LEASING Does Driver Own Other Vehicles? 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? Yes Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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 **FOREIGN VEHICLE 1** Vehicle Registration Number PHB9446 Vehicle Category Motorcycle **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Orchard Neighbourhood Police Centre Police Station Phone No (Phone) +65-18007359999 Alt. Police Station Phone No (Fax) +65-67331934 Police Station Address 51 Killiney Road Singapore 239572 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230413/2111 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 PHB9446 Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Motorcycle Name of Driver SEOW LEE AUN Passport No/FIN GXXXXX6932 Contact Number (Phone) +65-84028432 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKD5343B Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car 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 **BUSTHONUL ABIDIN BIN ZAINAL** Gender Male Phone No (Phone) +65-87547317 Address APT BLK 416A FERNVALE LINK Address Complement # 06-106 Post Code 791416 Approximate Age Years Old Injuries Sustained **BODYPAIN** Injured person in which vehicle? FBK9031U Were seat belts worn? Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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)

Lunderstand, 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

AR REG. NO .: 2 201605563H

Policyholder's Signature Date & Time

Sketch Plan

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

fell

Scotts Road & Steven Road

Witnessed by Reporting Centr

A: FBK 90314

B: PHB 9446

C: SKD 5343B

scribe Circumstances of the	ie Accident	
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	7/20130413/2111	
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T/202204/2044

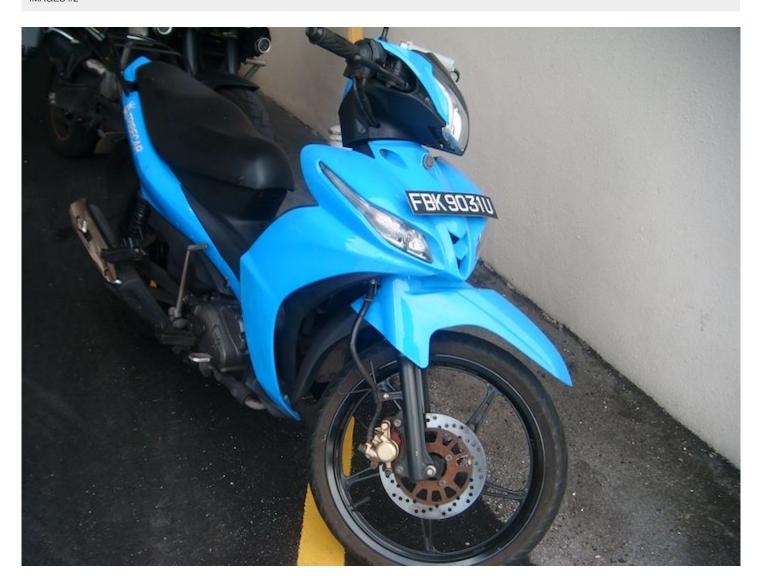
Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999 2 of 3 Report No. T/20230413/2111

CONTINUATION OF REPORT

Brief Details.

Happened on 13/04/2023 at around 1725hrs at the junction between Scotts Road and Stevens Road just after Thong Tech Building Bus stop. I was riding along Scotts Road on the second lane and there was heavy traffic around me, a bike suddenly came out in between the two cars, and I was not able to avoid it as it was too sudden. I hit the bike that came out suddenly and I let go of my bike and I fell to the side and my back body hit a vehicle on the front right-side bumper which was stationary on the 3rd lane due to the traffic light being red. I will have to contact Tribecar for the bike insurance details as it's a rental and I don't have the insurance details on hand with me. I am lodging this report for record and insurance claims purposes.

























T/20230413/2111

Police Station Of Origin: Orchard N.P.C

51 Killiney Road SINGAPORE 239572

Tel No: 1800-7359999

1 of 3 Report No. T/20230413/2111

REPORT	OF A	TRAFFIC	ACCIDENT

Date/Time Report Made: 13/04/2023 19:47		Made:	Vide Report No.:	Station Diary No.: 127	
Informa	nt's Partic	ulars	MANUFACTURE STREET		
Name of Informant: BUSTHONUL ABIDIN BIN ZAINAL ARIFIN			Address: APT BLK 416A FERNVALE LINK #06-106 SINGAPORE 791416		
ID Type / ID No.: NRIC NO / S8614091H		Contact No.: Home/Office:	Mobile: 87547317		
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 36	Date of Birth: 27/04/1986	Type of Informant: Rider		
Race: Indonesian		Language:			
Occupation: SELF EMPLOYED		Driving Licence Informat Class: 2,3	tion: Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/04/2023 17:25	Type of Location Y-Junction			
Location: SCOTTS ROA Lamp Post Nu							
Weather: Roa Cloudy Dry		Road Surface: Dry					
Traffic Flow: One Way		Traffic Control: Traffic Light - Worl	Vicinity and the second	Traffic Volume: Heavy			
Type of Collisi		To Side		Anyone conveyed by			

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
FBK9031U	Motorcycle	YAMAHA	Jupiter	Blue	Slightly Damaged	0
PHB9446	Motorcycle				Slightly Damaged	0
SKD5343B	Car					0



T/20/20/42/20/44

Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999 2 of 3 Report No. T/20230413/2111

CONTINUATION OF REPORT

Brief Details.

Happened on 13/04/2023 at around 1725hrs at the junction between Scotts Road and Stevens Road just after Thong Tech Building Bus stop. I was riding along Scotts Road on the second lane and there was heavy traffic around me, a bike suddenly came out in between the two cars, and I was not able to avoid it as it was too sudden. I hit the bike that came out suddenly and I let go of my bike and I fell to the side and my back body hit a vehicle on the front right-side bumper which was stationary on the 3rd lane due to the traffic light being red. I will have to contact Tribecar for the bike insurance details as it's a rental and I don't have the insurance details on hand with me. I am lodging this report for record and insurance claims purposes.





Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999 3 of 3 Report No. T/20230413/2111

CONTINUATION OF REPORT

Signature of Officer Recording The Report: E / SGT 1 NEO ZHI XUN

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / AEIT / SR STAFF SGT MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219

NP168

Date/Time:
13/04/2023 19:47

Classification Of Case:

Signature Of Informant: