Your NCD will be affected due to late reporting

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	TRIBECAR PTE LTD
Company Reg No	2XXXXX563H
Email Address	support@tribecar.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 your vehicle?	No - Claiming third party
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	Male
Mobile Number	(Phone) +65-87547317
Alt. Phone Number	-
Email Address	support@tribecar.com
Address	APT BLK 416A FERNVALE LINK
Address complement	# 06-106
Postcode	791416
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RENTAL-LEASING
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?	Yes
Number of vehicles involved in the accident	3
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	-

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?	No
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

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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.

TRIBECAR PTE LTD REG. NO.: 201605563H

Policyholder's Signature / Date & Time

21/04/23

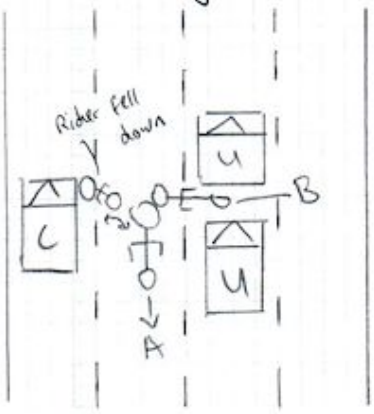
Driver's Signature (if driver is not the policyholder) / Date & Time

21/4/2023

Witnessed by Reporting Centre Personnel

Sketch Plan

Scotts Road & Steven Road



A: FBK 90314

B: PHB 9446

C: SKD 5343B

Describe Circumstances of the Accident

Refer to Police Report
T/20230413/2111

Declaration

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

TRIBECAR PTE LTD
REG. NO.: 201605563H

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/20230413/2111

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

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.

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5

IMAGES #6

IMAGES #7

IMAGES #8

IMAGES #9

IMAGES #10

IMAGES #11


MH3UE112OFJ05
Tribecar Bikes
Return with a
FULL Tank of Fuel!

SINGAPORE POLICE FORCE

T/20230413/2111

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

Report No. T/20230413/2111

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
13/04/2023 19:47		127

Informant's Particulars

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 Information: Class: 2,3 Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/04/2023 17:25	Type of Location: Y-Junction
Location: SCOTTS ROAD Lamp Post Number: 32/2				
Weather: Cloudy		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

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

SINGAPORE POLICE FORCE

T/20230413/2111

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

Report No. T/20230413/2111

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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.

SINGAPORE POLICE FORCE

T/20230413/2111

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

Report No. T/20230413/2111

CONTINUATION OF REPORT

Signature of Officer Recording The Report: E / SGT 1 NEO ZHI XUN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 13/04/2023 19:47
Officer In Charge Of Case: TP / AEIT / SR STAFF SGT MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	Classification Of Case:

NP168

GENERAL INSURANCE ASSOCIATION
RECORD MANAGEMENT CENTRE

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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN09234L000C Vehicle Registration No: FBK9031Y

Name (as shown in NRIC): Busthonul Abidin Bin Zainal NRIC/FIN/Passport No: S8614091H

(*Vehicle Driver/~~Policyholder~~) (*) Please delete as appropriate

Address: Apt Blk 416A Fernvale link #06-106 Singapore (791416)

Contact (Tel): Mobile No.: 8754 7317

Email Address: support@tribecar.com

Date of Accident: 13/04/2023 Time of Accident: 17:25

Place of Accident: Scotts Road & Steven Road

Insurance Company: GQI

(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:

Amend Registered owner name - Tribecar pte ltd
Amend Registered owner ID - (201605563H)
Amend Actual Driver email address: support@tribecar.com
Amend email Address - support@tribecar.com

Policyholder / Actual Driver's Signature
Date:

4/5/2023
Reporting Centre Personnel's Signature
Name (as in NRIC/ID card):
Date: