

## 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 .....	25/04/2023 13:07 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	07/04/2023 21:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	ROBINSON ROAD
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	FBR6106X
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	RWAVE PTE. LTD
Company Reg No .....	201909822G
Email Address .....	RWAVEPTLTD@GMAIL.COM
Mobile Phone No .....	(Phone) +65-85884017
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Yamaha
Model .....	XSR155
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 .....	Manual
CC .....	160

#### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5108520408-04

#### DRIVER

Name of Driver .....	SYED ALWIE AL-HADDAD BIN SYED AHMAD
NRIC No .....	T0330757Z
Date Of Birth .....	31/10/2003
Occupation .....	Outdoor

Date Of Driving Pass .....	15/11/2022
Driving experience .....	5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91476301
Alt. Phone Number .....	-
Email Address .....	SYEDALWIE510@GMAIL.COM
Address .....	BLK 795 WOODLANDS DRIVE 72
Address complement .....	#02-15
Postcode .....	730795
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 - Change/cross lane
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 AND SKETCH PLAN

#### 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 .....	SHC881M
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	TAY CHIN TIEN
NRIC No .....	S7231335F
Contact Number .....	(Phone) +65-87831335
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	5

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	SYED ALWIE AL-HADDAD BIN SYED AHMAD
Gender .....	Male
Phone No .....	(Phone) +65-91476301
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	19
Injuries Sustained .....	MULTIPLE ABRASION
Injured person in which vehicle? .....	FBR6106X
Were seat belts worn? .....	No
Was this injured conveyed to hospital by ambulance? .....	No

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

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the Insurers to 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.

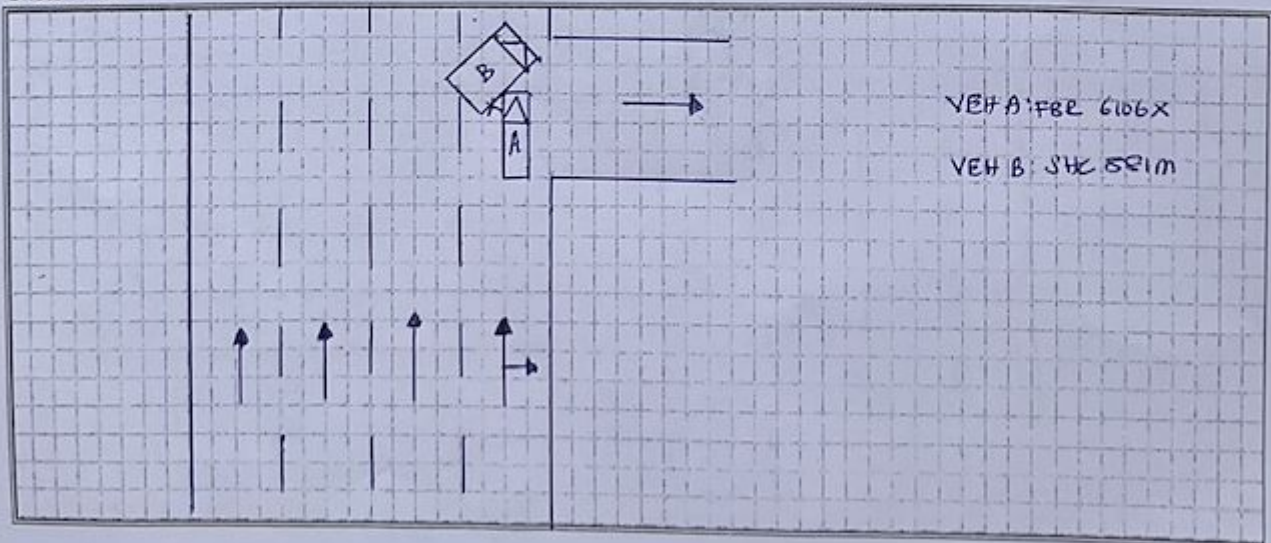
**RWAVE PTE LTD**  
Reg. No. 201909822G

25/04/2023 13:58PM  
Policyholder's Signature / Date & Time

25/04/2023 13:58PM  
Driver's Signature (if driver is not the policyholder) / Date & Time

25/04/2023 13:58PM  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

REFER TO LOSS REPORT  
AND POLICE REPORT

Declaration

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

**RWAVE PTE LTD**  
Reg. No. 201909822G

25/04/2023 13:01H  
Policyholder's Signature / Date & Time

25/04/2023 13:05H  
Driver's Signature (if driver is not the policyholder) / Date & Time

A. P. Rajan  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)















**SINGAPORE  
POLICE FORCE**



T/20230408/7030

1 of 3

Report No. T/20230408/7030

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

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made:  
08/04/2023 16:25

Vide Report No.:

Station Diary No.:

**Informant's Particulars**

Name of Informant: SYED ALWIE AL-HADDAD BIN SYED AHMAD			Address: APT BLK 795 WOODLANDS DRIVE 72 #02-15 SINGAPORE 730795		
ID Type / ID No.: NRIC NO / T0330757Z			Contact No.: Home/Office: Mobile: 91476301		
Nationality: SINGAPORE CITIZEN			Email: SYEDALWIE510@GMAIL.COM		
Sex: Male	Age: 19	Date of Birth: 31/10/2003	Type of Informant: Rider		
Race: Arab			Language: English		Institution / School Name:
Occupation:			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: 07/04/2023 21:00	Type of Location: Straight Road
Location: ROBINSON ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
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	Condition	No of
FBR6106X	Motorcycle					0
SHC881M	Car					0

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20230408/7030

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Report No. T/20230408/7030

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

**CONTINUATION OF REPORT**

Rider			
Name	SYED ALWIE AL-HADDAD BIN SYED AHMAD	ID No.	T0330757Z
Related Vehicle	FBR6106X (Motorcycle)	Contact No.	91476301
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	Slight

Brief Details.

Particulars

Rider : Syed Alwie Al-Hadad bin Syed Ahmad  
Driver : Tay Chin Tien

Vehicle information

Rider : FBR6106X  
Driver : SHC881M

At roughly 2100hrs when I was travelling at Robinson road on middle lane towards lau pa sat to deliver food I was hit by a taxi driver who did a right turn without signalling. I then jammed my brake but did not manage to stop in time and made contact with the right rear bumper of the taxi which made me flung out of the bike which resulted me to have road rash on my left ankle. Mr. Tay Chin then head out of the vehicle to assist me, admitted that it was his wrong and compensated me \$50 for the food that had fallen out. No photos of the incident was taking at that point of time as it was in the middle of the road. At 2340hrs I then called Mr Tay to my location @ 4 Jalan Ampas to exchange particular as No particular exchange was made during the time of impact, prior to that my uncle had asked him what happened which he replied that he did not see me and just changed lane which resulted in the accident. We then asked if we could view the footage of the accident and he mentioned that he doesn't know how to do it and it's installed via LTA so it cannot be tempered with to retrieve the Video. He then agree that he will try to go to an authorised workshop to retrieve the video.



**SINGAPORE  
POLICE FORCE**



T/20230408/7030

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Report No. T/20230408/7030

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

**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 / TPB /  
FAHKRUL RAZI BIN SUHAIME  
Contact No.: 65470000

NP168

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

Date/Time:  
08/04/2023 16:25

Classification Of Case:



## RENTAL AGREEMENT

Hirer's Name:	Syed Alwic Al-haddad bin Syed Ahmad
Hirer's Address:	795 woodlands drive 72 02-15
NRIC / Passport No:	T03307572
Driving License No:	
Contact No:	91476301
Email:	SyedAlwic510@gmail.com
Occupation:	Student

Emergency Contact Person:	Relation:	Contact:
Father	Father	90239126

## RENTAL DETAILS

License Plate:	RBR 79507	Make / Model:	R15 v3	Petrol:	Full
Rate:	\$ 230 + 30	Deposit:	\$ -	Daily / Weekly / Monthly:	Weekly
Start Date / Time:	15/11/20, 1:30pm	End Date / Time:		Comments:	

## Key Terms &amp; Conditions:

1. Singapore NRIC or Passport & Valid Singapore Driving License must be presented.
2. Only Registered Hirer is authorized to ride the vehicle.
3. Hirer is responsible for any damages, loss or fines to the rental bike.
4. In case of any accident, be it you are in the right or wrong, Hirer is responsible to pay for 3rd party section 2 excess of \$1500, \$3000 for drivers at least 21yrs old and with at least 1-year experience, \$4500 for drivers below 21 years old and less than 1-year experience.
5. It is the Hirer's Responsibility to make payment in advance if any extension of rental is required.
6. Servicing and maintenance of vehicle to be done every 2 weeks / 1500km at authorized workshop.
7. All wear and tear cost will be covered by the company except: Tyre Punctures, Bike Damages, Chain loose, and Engine Overhaul due to hirer's wilful negligence.
8. Collection and returning will be at authorized workshop,  
RWAVE PTE LTD, 50 Bukit Batok Street 23 #02-25 S (659578) Operating Hours: (Mon-Sat 10am - 9pm)
9. Any Traffic / Accident / Rental related issues contact James: 9369 6861 / Hong: 9773 3456.
10. Payment mode: Cash / Bank transfer to DBS Current 054-9064-327 / PayNow UEN: 201909822G or scan QR code below:
11. Refer to 2<sup>nd</sup> page for full terms & conditions.



RWAVE PTE LTD  
Reg. No. 201909822G

Rwave Pte Ltd

Hirer's Signature