Dute 111: 22 11/2017 15:55	Services (million)		7
and the second s	Vichtdesoription	Date & Pino Completed	Done by
REINO: NBA/TMI/7022801/Y.	SAS c-litting " '		
Veh No. STK 6954P	E-mall (within thes, AIC thes)		,
DOA: 17 11/2017 19:00	f-Motor Claim Form	7.1	
OD / TRT Reporting Only	1-Miotor 14/0 (14/11/100 shi	are then	
	I-Photo Uploaded	· · · · · · · · · · · · · · · · · · ·	
TP Insuret:	Assessment/Survey Report		A CONTRACT OF THE PARTY OF THE
	Ass'l Report by Pax / Hand t	Qwner/Wksp	
Bioteliag Aksbillio Waslau Akab \ OM! (		Tol; F	ex!
TP Paraleulari Yeli Nor SCK	(1888. INC)	)/Non·INC()	
Owner / Driver: (		Tel:	1 -
Policy No: (. ) Perio	od:( , · )	Cover Type: (	)
Confirmed by 1 '(	Dalei	Timve	)
	ote-Bst Status (WO): N: 0-20	%) P: 21-79%. P: 30-1	00%]
	arranty: YES( )/NO(	)	
	0()/\$2,000()		
General Replaces ( A Supple 2 and All Company			168 May 18
( ) Walk-In Gustomar i Customers Inform	nation striptly Confidential & Str	idly NO raier of repairer.	
( ) Total Loss Case   to e-mail Insurer Drive-In ( )/ Towed-In ( ): Invoice:		(	
) / / / / / / / / / / / / / / / / / / /	YES( ) / NO( )   To	owing Co: (	
Remorts		DALLTIME Complete	SELECTION BY
1) Apply for Transpar Allowance ( )/ Co	urksy Car ( ) '		
2) QC Check / Post Reptir Inspection 3) Upload Resurvey Photo (Repair Cost > \$30)	( )		
5) Chicag Kentrey Liew (Kepair Cost > 330	00)		
Infury :			<del></del>
			State of the state
			Bandara Are
			Bankston i
Section (IM) Fractions are a second process and the second			Stanton Communication of the C
			Manual Commence of State of St
onie Tune Lacijan:	1 105-88-651-15-61905-00		THINKINGS) I CARROLS)
onie Tune Lacijan:	Invalce Fran	irauon Ghrekulsi, kalik	AFL(5)
Prie Tunei Acijans	In value France	eration Chrokils (37). Georges (370):	AMU(S)
Meno 7207	Invoice Francisco	aration GhroRist St. S.	AMU(S)
Memoral Actions  Memoral Actions  Intrinsical Actio	Invalor Francisco	Pration (Ghrokiis) (Sh. Sh. Sh. Sh. Sh. Sh. Sh. Sh. Sh. Sh.	7
MANO7207	1) ARI Accident  2) DA Designa  3) TF Towing Fe  4) FT Fellow Th  3) FT Fullow Th  For skilming Ag  6) TR Revierpes	Eporting (STORLIS) (PX Reporting (330)): NC (33 NISELIMES (3100): NC (33 NOTE: NOTINE (3100): NC (33 NOTE: NOTINE (3100): NOTI	375
Meno 720 7 "  Fire Tune 1 Actions 1 "  Foreigniss 1 "  Five 1/Owner: 1 "  Privat No: 1 "  Priv	in value Fined  i) ARI Accident  2) DA I Demage A  3) TFI Tevlow Th  4) FTI Follow Th  Folial mine as	Pration Chrokilst No. 19. Separths (330): NC (	O STO
Meno 7207  Intrinit's Forceulars  iver/Owner:  maged Portion: There.	Involve Fred 1) ARI Accident 2) DAI Demage A 3) TFI Towlog For 4) FTI Follow-Th 3) FTI Fullow-Th Equal implicate 6) TRI Ne-bispect 7) NI 1 May DA + 4) NTUC Addition	Bration (Shrokiist No.)  Reporting (300): V  Reporting (3100): INC (31  Reporting (3100): INC (32  Rep	0)   SANDES   SEAMULES   SAMULES   S
Meno 720 7 "  Fire Tune 1 Actions 1 "  Foreigniss 1 "  Five 1/Owner: 1 "  Privat No: 1 "  Priv	in value Fried  i) ARI Accident  i) DAI Demage A  j) TF Towing Fe  i) FT Follow Th  j) FT Fullow Th  Forelamine Ar  i) TR No-lespent  T) NI Hav DA +  i) NTUC Addition  Q111  'NJ: Cauriery  'NG: Report Co	Pration (Shrokiis) (Shrokiis)  Reporting (300): 1HC (3)  Reporting (3100): 1HC (3)  Reporting (5100): 1HC (3)  Reporting (8210 New 10)  Reporting	310 310 310 310 310 310 310 310
Memory Actions  Memory 207  Intring the English of the Charge of the Cha	1) ARI Accident  1) ARI Accident  2) DA Design A  3) TFI Towing For  4) FTI Follow Th  5) FTI Follow Th  6) TRI Re-Pis posit  7) NI Hav DA +  1) NTUC Addition  9012  1 No Repeti Co	Eration Chrokist Chro	37.5 (1) (1) (1) (2) (3) (3) (3) (3) (3) (3) (3) (3) (3) (3
Meno 7207  Intrinit's Particulars  iver/Owner:  maged Portion: Call.	1) ARI Accident  2) DAI Accident  3) DAI Comage A  3) TFI Towns A  4) FTI Fellow Th  5) FTI Fellow Th  Establishes As  6) TRI Re-Parent  7) NI I May DA +  1) NTUC Addition  QU'  NI Courtery  1 No Repeti Co  1 NI Pail Ruja  1 NI DV / Goll  1 NI DV / Goll	EporUng (SATERVISE NIL)  ReporUng (330):  1	31 31 31 31 31 31 31 31 31 31 31 31 31 3

#### 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 Authorised Driver,
- 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 ability.
- 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 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.
- By the ladgement 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.

· 中国中国   中国   中国   中国   中国   中国   中国   中	ACCIDENT STATEMENT	
Date Of Report	22/11/2017 15:55	
Date Of Accident	17/11/2017 19:00	
Exact Location Of Accident	COMMONWEALTH AVE WEST A/F S'PORE POLYTECHNIC	
Country/State of Loss	SINGAPORE	
The state of the s	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJE6454P	
Insured/Policyholder		
Name Of Registered Owner	ANG KHAY LIAN(HONG QINIAN)	
NRIC No	S7302551F	
Email Address	KHAY_LIAN@WHSYSTEM.COM.SG	
Mobile Phone No	(LOCAL) +65-82800693	
Alternative Phone No	OTHERS-82800693	
Vehicle Particulars		
Manufacturer	HONDA	
Model	STREAM	
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY HOME	
Are you claiming under your own insurance policy for repair to your vehicle?	NO NO	
If No. Please state action to be taken	REPORTING ONLY	
Vehicle Category	PRIVATE CAR	
Insurance Company		
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	16-MV008786-R00	
Cover Note Number		
Driver		
Name of Driver	ANG KHAY LIAN(HONG QINIAN)	
NRIC No	S7302551F	
Date Of Birth	14/01/1973	
Occupation	INDOOR	
Date Of Driving Pass	14/04/1995	
Driving Experience	22 YEARS AND 7 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-82800693	
Fax Number		
Contact Number	OTHERS-82800693	
EMail Address	KHAY_LIAN@WHSYSTEM.COM.SG	

Address

BLK 180B BOON LAY DRIVE

#12-666

Postcode

642180

Was driver an employee of the Insured's Company NO.

If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Was any body injured in the Accident?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLK8464J

Vehicle Make/Model/Colour

MAZDA 3

**Details Of Properties** 

Name of Driver

MOHD ASH'ARI BIN AHMAD

NRIC/Passport Number

S1751851H

Contact Number

98778947

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

**Details of Witness** 

Name

Phone Number

Email Address

SKETCH PLAN CHIM MOH A: SLK 8646] B: SJE 64 54P BPAS COMMONWHISTING BUK WAST SINGAPORE DOVER POLYTECHNE 20AD DESCRIBE CIRCUMSTANCES OF THE ACCIDENT TRAVELLING ALONG COMMONWEALTH AVENUE WEST ON 2ND LANE AND HAVE JUST CROSS CROSS JUNCTION BETWEEN DOVER, GHIM MOH LINK & COMMONWEALTH AVE WEST WHEN SUDDENLY SAW CAR IN FRONT BRAKE & STOP. TRIED TO BRAKE BUT STILL UNABLE TO STOP IN TIME. HIT CAR IN FRONT & BUMPER OF CAR IN FRONT SUBSTAIN 2 SMALL CRACK . ALL ELSE IS INTACT.

DECLARATION

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

Policyholder's Signature

Driver's Signature Date & Time: 22 11 17 1440 (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.: (COS)

#### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- By the lodgment 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:
  - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 22/11/17 1

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

ACCID LOCAT	ENT DATE: 17 11 2017 (DD/MM/YYYY), TIME: 19.00 (HH:MM) ON: COMMONWEALTH AVE WEST AFTER SYNCAPORE POLY
	DETAILS OF VEHICLE  O) VEHICLE NUMBER: SJE 64547  D) INSURANCE COMPANY: TOKIO MARINE  C) POLICY NUMBER: 16 - MUOOF 786 - ROO  C) POLICY TYPE: (COMPREHENSIVE) THIRD PARTY FIRE &THEFT)  POMAKE & MODEL: HOMOA STREEM
2,,	INTYPE: (SALOON / COUPE (MPY) VAN / LORRY / MOTORCYCLE / OTHERS)  g) VEHICLE CATEGORY (PRIVATE) COMMERCIAL / MOTORCYCLE)  h) PURPOSE OF USING AT ACCIDENT TIME: ON THE LIAY HOME  I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES (NO))  IF NO, PLEASE STATE (THIRD PARTY CLAIM (REPORTING ONLY)  INSURED / POLICY HOLDER  A) NAME: ANG EHAY LIAY (MALE / FEMALE)  LINED (FINURASSPORT: \$730551F (CONTACT: 82800693)
* E (*)	CIADDRESS: BLK 1803 BOOK LAY DRIVE \$12-666 ST642100)
File of passongs. (Including driver)	* CONTINUE TO 3.4 IF DRIVER ALSO POLICY HOLDER  DRIVER  DINAME:
c73	*d) DATE OF BIRTH: (14 01) 1973 (DD/MM/YYYY)
4,	UNITE OF DRIVING LICKLE 19/4/1995  WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES NO WAS DRIVER AN EMPLOYEE OF THE DRIVER WITH INSURED:
5,	DIROAD SURFACE: (DRY / WET / OTHERS DRY

BIN AHMAD VEHICLE NUMBER: SLK 84643 b) DRIVER'S NAME MOHD ASH' API c) NRIC/FIN/PASSPORT: SIAS 851H (Inducting driver) THIRD PARTY VEHICLE d) # 110 of passinger (Including driver) 1) NRIC FIN PASSPORT

WAS ANYBODY INJURED (YES NO)

O) REPORTED TO POLICE (YES NO)

IF YES, PLEASE STATE WHICH POLICE STATION

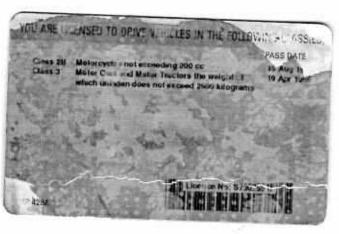
THIRD PARTY VEHICLE

email: khay Lian @ whsystem. com fax = . V1080









# I skie-Marine Insurance Singapore Ltd.

Company Reg. No. 192300014M) (GST Reg No. M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046 (65) 6221 6111 F. (65) 6221 4355 / (65) 6224 0895 E. tmis@tokiomarine.com.sg. W. www.tokiomarine.com

BIK 45 Camprage Road #U1 10 Singapore 210043 Tel: 6299 3302

INSURANCE GROUP

FORM MX1

INVESTIGATION OF THE h - Multip Grown

# Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: 16-MV008786-R00 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle

SJE6454P

Chassis No.: RN61062145

2. Name of Policyholder

MR ANG KHAY LIAN (HONG QINIAN)

3. Effective date of the Commencement of Insurance for the purposes of the Act

30/10/2017

4. Date of Expiry of Insurance

29/04/2018

- 5. Persons or Class of Persons entitled to drive\*
  - (a) The Policyholder.
  - (b) Any other person who is driving on the Policyholder's order or with his permission.
- \* Provided that the Person driving is permitted in accordance with the licensing or other 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.
- Limitations as to use\*

Use only for social domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward, racing, pace- making, reliability trial, speed-testing or the carriage of

goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor

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

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance,

#### IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to 1.45% Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to mak effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Comprehensive Approved Workshop Plan

Insurance Plan: Limit for total loss or theft:

Prevailing Market Value

SGD 800

Policy Excess:

Own Damage Claims Windscreen Excess

Financial Interest:

SGD 100 UNION MOTOR TRADING CO PTE LTD

Tokio Marine Insurance Singapore Ltd.

Account: 0990DDA

Authorised Signature

Ms Chia K M

User Name: Tan Bee Bee - Motor Unde

Printed 14/09/2017