NATIONAL Assessment Centre	Services Mentante	MNA 117157157		
Date In 28 Juli7 14:37	Jeb description	Date &Time Completed	Done	DV
Ref No NA   DAT 17022628 /64	SAS e-filing			
Weh No SFD 4002 B	E-mail (within Shrs., A1C 2hrs			(4)
DOA 2911117 09:30	i-Motor Claim Form			/11
	i-Motor W/O (Within OD	2hra, TP 4hra)		
OD (1) Reporting Only	i-Photo Uploaded			
TDI	Assessment/Survey Repor	t		
TP Insurer:  Ass't Report by Fax / Hand to Owner/Wksp				
Preferred Wksp / INC Assign Wksp / QW: (		Tel: Fax	4:	)
TP Particulars: Veh No: 60	2718 R INC	( )/Non-INC( )		
Owner / Driver: (		Tel	)	
Policy No: ( ) Perio	od: (	) Cover Type (	)	
Confirmed by : (	Date:	Time:	)	
Insured/Driver Liability: ( %) [N	ote-Est. Status (WO): N: 0	0-20%; P. 21-79%. F. S0-100	1%]	
	arranty: YES ( ) / NO (	)		
Excess: (\$ ) Loading: \$1,000	0 ( )/\$2,000 ( )			
General Remarks:-				
( ) Walk-In Customer: Customer's inform		Strictly NO rafer of repairer.		
( ) Total Loss Case : to e-mail Insurer				
Drive-In ( ) / Towed-In ( ); Invoice:	YES ( ) / NO ( )	; Towing Co. (		
Remarks:- (INC horline: 6788 6616)		Date&Time Completed	Done	by
Apply for Transport Allowance ( ) / Co	urtesy Car ( )			
2) QC Check / Post Repair Inspection	( )			
3) Upload Resurvey Photo [Repair Cost > \$30	00] ( )			Ÿ
Injury:				
Date/Time Actions		THE SOUR IN		-
330000				
	3			
4	Inveice l	Preparation Checklist	Anit (\$)	Amt (\$) Add Bill
Claimant's Particulars :-		ident Reporting (\$30);		3.410.5711
	2) DA : Dan 3) TF : Tow	nege Assessment (\$100); INC (\$80) ing Fee \$40.5		
Driver/Owner:	4) FT : Felle	w-Through Survey \$1	20 30	
Contact No:		ing against INC Only (wef 10 Jan 2005)		
Damaged Portion:	6) TR: Re-i	The state of the s	60	
	8) NTUC A	dditional Services.		
QC Checked by (Engr-In-Charge):	*N5: Con	rtesy Car / Tpi Allowance	\$5	
	*N6: Rap	air Co-ordination 3	10 25	
Auditors' Comments :-	*NS: DV	/ Collect Excess Coordination	\$5	
Car. Id	TP (N11) 9) N12: 18ac	The second secon	30	
at. 2 / 3	invoice date	of Pee Charges	HE 75	ELISE
	Invoide data	d Fire Charges	2007 420	L

#### 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.
- 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 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.
- 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 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 Report	28/11/2017 14:37
Date Of Accident	28/11/2017 09:30
Exact Location Of Accident	CARPARK LOT32 @BLK27 CHAI CHEE RD NEAR EXIT GANTRY
Country/State of Loss	SINGAPORE
D D	ETAILS OF OWN VEHICLE
/ehicle Registration Number	SFD4002B
nsured/Policyholder	1
Name Of Registered Owner	TAN LIP LIN
NRIC No	S2010956D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93574386
Alternative Phone No	OFFICE-93574386
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E200 ML
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00424661
Cover Note Number	-
Driver	
Name of Driver	TAN LIP LIN
NRIC No	S2010956D
Date Of Birth	08/11/1951
Occupation	INDOOR
Date Of Driving Pass	02/02/1971
Driving Experience	46 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93574386
Fax Number	
Contact Number	OFFICE-93574386
EMail Address	NOEMAIL

Address 69 TERANG BULAN AVE

Postcode 455592

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 COLLIDED INTO PARKED VEHICLE

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

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BEDOK SOUTH NEIGHBOURHOOD POLICE CENTRE

NO

NO

0

ROAD: 20 CHAI CHEE DRIVE , POSTCODE: 469045 , COUNTRY:

TEL NO: 1800-2448999 - FAX NO: 62446558

Police Station Address SINGAPORE

Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH DRIVER

Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

GX2718R

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**Details of Witness** 

Name

Phone Number Email Address

ESTATE CARBARK OF BUK 27 / 27A SKETCH PLAN VELLICUE A - SED 40023 NEMICLE B - GX 2918R REVERSING and HIT. DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER POLICE REPORT	REFORT NUMBER
13 TER POSTOR SOFT	7/20171128/2049
JEHILCUR A - SFD4002B	
VEHICLE 13 - GXZ718R	

DECLARATION

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

Policyholder's Signature

Date & Timey

Driver's Signature

(If driver is not the policyholder)

Date & Time: 28/11/

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

## SKETCH PLAN

# IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful</u> and <u>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.
- 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

ehicle No.	SFD 4002 8 Model / Make MERC E200
ate of Accident	29/11/2017
ime of Accident	0930 HRS
ocation of Accident	CARPARIE LOT 32 @ BUK 27 CHAI CHEE RID, NEAR TO EXIT CA
xact purpose use during accid	dent Stationary Park
lame of Owner	TAN LIP LIN
elephone No.	H/P: 9357436 Home: Office:
IRIC	520109560
Address	69 TERANG BULAN ONE 3 455592
	OD THIRD PARTY REPORTING ONLY
Claim type	DIRECT ASIA
nsurance Company	Comprehensive Third Party Third Party / Fire /Theft
ype of Coverage	MT/00424661
Policy No.	M1700424661
Name of Driver	As Aboye If No,
VRIC	Any Passengers : N⊖
Date of birth	08/11/1951
Occupation	Outdoor / Indoor
Driving License Pass Date	O1 F&B 1971
Gender	Male / Female
Contact No.	H/P: Home: Office:
Address	
Driver have any own vehicle	No. If yes, Reg No.
Relationship	Employee, If no, state
Weather condition	Clear Raining Other
Road Surface	Dry Wet Other
Any Injuries	No. If Yes, Who?
Name And Contact No.	
Name And Contact No.	
	No, If Yes, Where? BEDOK SOUTH NEC
Police Report  Vehicle B No.	Any Presentary
Name of Driver	G × 271 gr Any Passengers .  Contact No. :
Vehicle C No.	Any Passengers :
Vehicle D No.	Any Passengers :
Vehicle E no.	Any Passengers :
Vehicle F No.	Any Passengers :
	Any Passengers :
Vehicle G No.	Witness Contact :
Witness Name	
Accident Portion	Yes/No
Camera Recorder	resy No
Email Address	
PARTICULAR WORKSHOP	TWINCAR AUTOMOTIVE DIE LTD
CONTACT NO.	6842 0051 / 6744 0510
CONTACT PERSON	IAN
FAX NO	6741 0510
WORKSHOP EMAIL APDRESS	





1 of 3

Report No. T/20171128/2049

Police Station Of Origin: Bedok South N.P.C 20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999

Retiree

REPORT O	F A TRAFFIC	ACCIDENT		Station Diary No.	
Date/Time Report Made: 28/11/2017 12:41		lade:	Vide Report No.:	25	
Informa	nt's Particu	ılars			
A COLUMN TO THE OWNER OF THE OWNER O	Informant:		Address: 69 TERANG BULAN AVENUE	SINGAPORE 455592	
ID Type / ID No.: NRIC NO / S2010956D		56D	Contact No.: Home/Office:	Mobile: 93574386	
National		0.000	Email:		
Sex: Male	Age:	Date of Birth: 08/11/1951	Vehicle Owner		
Race: Chinese Occupation:			Language: English	Institution / School Name:	
			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/11/2017 09:30	Type of Location Car Park	
Location: Along Road 1 CHAI CHEE  CARPARK Le Weather: Clear	ROAD	CHAI CHEE ROAD, N Road Surface: Dry		Road Opeca Limit	
Traffic Flow: One Way		Traffic Control:		Traffic Volume:	
Type of Collis	sion: cle Against - Parked Ve	ehicle		Anyone conveyed by ambulance: No	

ition No of Passenger
0
U
tly 0
1

Details of Person Involved	
Any Pedestrian Involved: No	The state of the s
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





2 of 3

Report No. T/20171128/2049

Police Station Of Origin: Bedok South N.P.C 20 Chai Chee Drive SINGAPORE 469045

Tel No: 1800-2448999 CONTINUATION OF REPORT

Vehicle Owner				ID No		S2010956D
Name	TAN LIP LIN		ID No		250 10920D	
Related Vehicle	SFD4002B (Car)			Conta	ct No.	93574386
Hospital/Clinic	NIL			Class Drivin Licend Expire	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	SINCE SERVICES	Date Disc	charge	NIL	
	ted Medical Leave NIL		Degree o	of Injury	NIL	

### Brief Details.

On the 28/11/17 at about 0920hrs, I parked and secured my vehicle bearing registration umber SFD4002B at Lot No. 32, which was a parallel parking lot, at the above mentioned location and left to do some marketing. Everything was intact and in order.

At about 1000hrs, I came back to my car and discovered my front bumper cracked and the left two headlights scratched. There was no note left behind on my vehicle.

I then viewed the footage from my in-car camera and it was established that at about 0932hrs, one van bearing registration number GX2718R, had stopped in front of my parked vehicle, where he was observed to be reversing and collided onto the front part of my vehicle. The driver was later seen realigning himself to the kerb, before coming out to make a check on my vehicle.

I wish to state my vehicle was parked nearest to the exit gantry of the carpark and there was no lot in front of me. The van had parked along the double yellow lines, before later leaving prior my discovery.

I wish to further state that I am able to provide the footage from my in-car camera.





3 of 3

Report No. T/20171128/2049

Police Station Of Origin: Bedok South N.P.C 20 Chai Chee Drive SINGAPORE 469045

Tel No: 1800-2448999 CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Sgt 3 MUHAMMAD AZHAR BIN MISSUAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/11/2017 12:41
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case:
Authentication Stamp Signature: Singapore Police Force	

# REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$2010956D





TAN LIP LIN

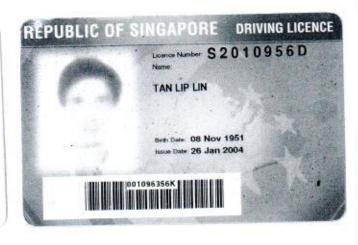
陈立人

CHINESE

08-11-1951

SELANGOR

100560



1011206



NRIC No. S2010956D

Blood Group Date of issue

n

07-06-1993

Address

69 TERANG BULAN AVENUE SINGAPORE 1545

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

PASS DATE

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

02 Feb 1971

Licence No: \$2010956D

NP 428A



Contact us at

Hotline: (65) 6532 2888

E-mail: CustomerService@DirectAsia.com

## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.

MT/00424661

Type of Coverage / Driver Plan

Car Comprehensive (Value Plan)

1) Vehicle Registration No.

SFD4002B

Chassis No.

WDB2110422A400267

2) Name of Policy Holder

: Tan, Lip Lin

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act

: 18/11/2017 00:00

4) Date/Time of Expiry of Insurance

: 17/11/2018 23:59

#### 5) Persons or Classes of Persons Entitled to Drive

- The Insured
- Any person who is named on the policy who is driving on the Insured's order or with his permission.

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

#### 6) Limitations as to use'

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.

\*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured

Market Value

Own Damage Excess

S\$ 600.00 (before any applicable GST)

Windscreen Excess

S\$ 100.00 (before any applicable GST)

Choice of workshop

DirectAsia approved workshops

Finance company / Hire Purchase

Tan, Lip Lin

Main driver

Named driver

None

Important Note: This policy is on a named driver basis. Any unnamed drivers will not be covered.

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

Issued on:

20/10/2017

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer