

NR 1447158642

[illegible]

NA1707518

NA1707518		Invoice: Fredonauon Chrdhis	Unit/Day	Unit/Day
Human's Particulars:		1) AR: Accident Reporting (\$30)		
Driver/Owner:		2) DA: Damage Assessment (\$100): INC (\$50)		
Contact No:		3) TP: Towing Fee \$40/\$43		
Damage Portion:		4) FT: Follow-Through Survey \$120		
		5) FT: Follow-Through Survey (Resurvey) \$70		
		Pre-incident report (INC Only) (w/ \$10 Jan 2000)		
		6) TR: Re-inspection \$75		
		7) NI: Inc DA + SMRT Survey \$160		
		8) NTUC Additional Services:		
		Q1:		
		*N1: Courtesy Car / Tpl Allowance \$5		
		*N6: Repair Coordination \$10		
		*N7: Post Repair Inspection \$15		
		*N8: DV / Collision Unsubs Coordination \$5		
		TP (N1): TP (N1) INC against INC \$20		
		P) N12: Ids Mobile \$10		
		Invoice dated	Fee Charged	
		Invoice dated	Fee Charged	

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 withholding 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.
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 Report	01/12/2017 15:25
Date Of Accident	30/11/2017 19:40
Exact Location Of Accident	BLK 80 LORONG 4 TOA PAYOH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGV3248J
Insured/Policyholder	
Name Of Registered Owner	OU-YANG GUANG RONG,BENJAMIN
NRIC No	S9037888J
Email Address	BENJAMINAWYANG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96604563
Alternative Phone No	OTHERS-96604563

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P 27883070 DMV
Cover Note Number	

Driver

Name of Driver	OU-YANG GUANG RONG,BENJAMIN
NRIC No	S9037888J
Date Of Birth	10/10/1990
Occupation	INDOOR
Date Of Driving Pass	21/09/2011
Driving Experience	6 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96604563
Fax Number	
Contact Number	OTHERS-96604563
Email Address	BENJAMINAWYANG@GMAIL.COM

Address	BLK 51 STRATHMORE AVENUE #02-195
Postcode	140051
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	NO COLLISION
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)	2

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	SJZ3273D
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	MICHAEL NG
NRIC/Passport Number	
Contact Number	91693759
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Details of Witness

Name	
Phone Number	
Email Address	


SKETCH PLAN

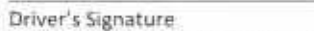
IMPORTANT NOTICE

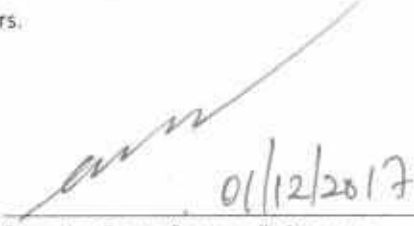
1. Please report **correctly** the details of the accident to speed up the claims process.
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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:
 - (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.
- (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:
 - (i) 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: Re Li Wang
NRIC/FIN No.:

BLK 80

(56132481) STAIRS my car

REVERSE

MULTI STORY carpark

5JZ373D MICHTEL NG

I sent a friend home to her house at 86K 80 Lorong 4
Tua Payoh. As I overshot and missed the staircase
to her house, I reversed ~~a~~ a few metres to her staircase
which would be more convenient for her. From the carpark
exit on my right, a car suddenly swung out onto
my lane. I jammed my brakes and the car stopped
in time. There were no damage to both my car and
the other, upon inspecting. A picture is available showing
the extent of how the other driver dived into my
lane. Regardless of whether I was reversing or not, the
other car has no business in the other ^{opposite} lane. I am
unable to understand why he cannot turn out of the carpark
using his lane and stick within it. I even had hazard
lights turned on when I reversed. Other driver claimed that
his mirror is shaky but upon inspection there was no visible
contact and no dent or mark on my car or his. I can
confirm that the above info is true and accurate.
As I found the incident highly suspicious, I am hence
lodging this report to put on record the above ^{statement} and in
the event ~~that this~~ ^{is} an orchestrated scam or insurance fraud.

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: ROSE WATKINS
NRIC/FIN No.: 01112/2017

ACCIDENT STATEMENT

ACCIDENT DATE: 30/11/2017 (DD/MM/YYYY), TIME: 19:42 (HH:MM)

LOCATION: BLK 80, Lorong 4 Toa Payoh (S) 31080

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SGV 3248J
 b) INSURANCE COMPANY: MSIG
 c) POLICY NUMBER: P 27883070 DMV
 d) POLICY TYPE: COMPREHENSIVE THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: TOYOTA WISH
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: PRIVATE / COMMERCIAL / MOTORCYCLE
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: OH-YANG GUANG RONG BENJAMIN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S9037888J CONTACT: 96604563
 c) ADDRESS: 51 STRATHMORE AVENUE, (S) 140051
#02-195

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: OH-YANG GUANG RONG BENJAMIN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S9037888J CONTACT: 96604563
 c) ADDRESS: 51 STRATHMORE AVE, #02-195
(S) 140051

* d) DATE OF BIRTH: 10/10/1990 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) DATE OF DRIVING LICENSE: 21/09/2011

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: DRY / WET / OTHERS

6. WAS ANYBODY INJURED (YES/NO)

7. a) REPORTED TO POLICE (YES/NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: S1232730 MODEL:

b) DRIVER'S NAME: MICHAEL NG

c) NRIC/FIN/PASSPORT: CONTACT: 91693759

9. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: MODEL:

b) DRIVER'S NAME:

c) NRIC/FIN/PASSPORT: CONTACT:

* No. of passengers
(including driver)
()

* No. of passengers
(including driver)
(2)

* No. of passengers
(including driver)
()

email = benjaminayang@gmail.com

fax =

V1080 Y1080

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9037888J



Name

OU-YANG GUANG RONG,
BENJAMIN

歐陽光榕

Race

CHINESE

Date of birth

10-10-1990

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S9037888J

Name

OU-YANG GUANG RONG,
BENJAMIN

Birth Date 10 Oct 1990

Valid Date 21 Sep 2011



0020019358

4062047



NRIC No. S9037888J



Date of issue

23-06-2007

APT BLK 51 STRATHMORE AVENUE #02-105
SINGAPORE 140051

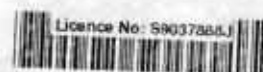
NRIC No. S9037888J

Date 02/12/2015

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) <= 3000kg
with <= 7 passengers, exclusive of the driver; and
other motor vehicles without clutch pedals <= 2500kg 21 Sep 2011



Licence No: S9037888J

NP 426A

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
 Tel +65 6827 7888, Fax +65 6827 7800
 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
 (REPUBLIC OF SINGAPORE)
 THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1
 Individual Ownership

DRIVESHIELD - VALUE PLAN
Comprehensive

Certificate No. P 27883070 DMV

Excess : SGD2,000
 Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle
SGV3248J
2. Name of Policyholder
Ou-Yang Guang Rong Benjamin
3. Effective Date of the Commencement of Insurance for the purposes of the Act
12/06/2017
4. Date of Expiry of Insurance
11/06/2018
5. Persons or Classes of Persons entitled to drive*
Ou-Yang Guang Rong Benjamin
Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

6. 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 the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* 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.

**PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT ANY MSIG
 AUTHORISED WORKSHOP LISTED IN THE ATTACHED.**

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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 Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.
 Approved Insurers

for Chief Executive Officer