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Ref No: NA / DAI 18000402164		N. I.		10.00
Veh No: 53P 9774 M	E-mail (within Shrs, AIC			-
D.O.A : 7/1/18 12:15	i-Motor Claim Form	F	 	
OD (TP) Reporting Only	i-Motor W/O (Within	OD 2hrs, TP 4hrs)		
	i-Photo Uploaded			
TD [Assessment/Survey R	eport		
TP Insurer:	Ass't Report by Fax /	Hand to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:	
TP Particulars: Veh No:	SKP 5094 G	INC()/Non-INC()		
Owner / Driver: (Tel:)	
Policy No: () Per	iod: () Cover Type: ()	
Confirmed by : (Date	177)	
Insured/Driver Liability: (%) [N	Note-Est. Status (WO):	N: 0-20%; P: 21-79%. F: 8	0-100%]	
Year of Registration: () W	Varranty: YES ()/N	0()		
Excess: (\$) Loading: \$1,00	00 ()/\$2,000 ()			
General Remarks:-			a see a see	8 °v
() Walk-In Customer: Customer's inform	mation strictly Confidenti	al & Strictly NO refer of repair	er.	
() Total Loss Case : to e-mail Insure	r URGENTLY.			
Drive-In ()/ Towed-In (); Invoice:	YES () / NO (); Towing Co: (11)
		Date&Time Completes	Done	by
Remarks:- (INC horline: 6788 6616)	ourtesy Car ()	Date and the complete of	100000000000000000000000000000000000000	
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2) QC Check / Post Repair Inspection	()			
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2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$36 Injury: Date/Time Actions Claimant's Particulars: Oriver/Owner: Contact No: Damaged Portion: C Checked by (Engr-In-Charge):	() 0000] () Invo 1) AR: 2) DA 3) TF: 4) FT: 5) FT: Fore 6) TR: 7) N1: 2 8) NTI QD: *N5 *N6 *N7 *N8 TP(9) N17	Accident Reporting (\$30); Damage Assessment (\$100); INC Towing Fee Follow-Through Survey Follow-Through Survey (Resurvey) Desiming assainst INC Only (wef 10 Jan Re-inspection Idae DA + SMRT Survey JC Additional Services Courtesy Car / Tpl Allowance Repair Co-ordination Fost Repair Inspection DV / Collect Excess Coordination	\$100 \$30 \$25 \$30 \$20 \$30 \$30 \$25 \$30 \$30 \$30 \$30 \$30 \$30 \$30 \$30 \$30 \$30	Add Bi

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- Please report <u>correctly</u> 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.
 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

foresaid.	
ally definition in the last section of the	ACCIDENT STATEMENT
Date Of Report	08/01/2018 14:24
Date Of Accident	07/01/2018 12:15
Exact Location Of Accident	SERANGOON LINK ENTER TO NEX SHOPPING MALL CARPARK
Country/State of Loss	SINGAPORE
DE	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJP9774M
Insured/Policyholder	
Name Of Registered Owner	FOO LI MING
NRIC No	S7518202C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91166614
Alternative Phone No	OFFICE-91166614
Vehicle Particulars	
Manufacturer	AUDI
Model	Q5 2.0L TFSI QUATTRO AT D/AB HID 4WD 5DR
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/00335367/01
Cover Note Number	
Driver	
Name of Driver	TAN PANG LIP (CHEN BANGLI)
NRIC No	S7117336D
Date Of Birth	23/05/1971
Occupation	INDOOR
Date Of Driving Pass	10/05/1994
Driving Experience	23 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96694419
Fax Number	

NOEMAIL

Address 965 BT TIMAH RD #07-01

Postcode 589662

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

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

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

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)

Mulliper of Fasserigers (mercang -----)

Passenger 1 NAME: : FOO LI MING

GENDER: : FEMALE

Passenger 2 NAME: TAN XUAN YUN CHLOE

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

YES

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHED STATEMENT.

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?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKP5094G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver LI LI HONG
NDIC/Passport Number S2598358J

NRIC/Passport Number

Contact Number

Address

Postcode

Page 2 of 13

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.
- 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.
- 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.
- 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)
 - (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.

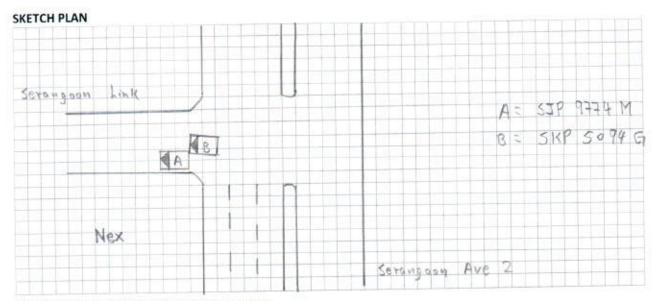
Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:



ESCRIBE CIRCUMS	TANCES OF THE ACCIDENT	
Incident occ	urred on 7th January 2018 at 12:15 pm at ing to the carport of NEX. at serangow line of news	- the
road lead	ne to the carport of NEX. at serangon (int road.
	in gueue	
THE MY CAR	in greve in greve in greve is stationen and waiting, to enter	the
empare a	1 car-pade:	
estimate a	at at	
Www Volice	le B hit my CARC Vehicle A) for the	back.
1/obile B	enter the same lane.	10
1 in b	enter the same land	
trying 10 s	The since mace	
Pard in d	and ma a sum day	
Noun 15 a	ny and on a suny day.	

DECLARATION

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:

NRIC/FIN No.:

DY WAR

Name:

TAN PANG LIP (CHEN BANGLI) Birth Date: 23 May 1971

Issue Date: 02 Jun 2003

000535716C

MSS DATE

Class 28

which unladen does not exceed 2500 kilograms Motor Cars and Motor Tractors the weight of Motorcycles not exceeding 200 cc

Licence No: S7117336D

NP 428A

IDENTITY CARD NO. S7117336D REPUBLIC OF SINGAPONE



Name

(CHEN BANGLI) TAN PANG LIP



Date of birth

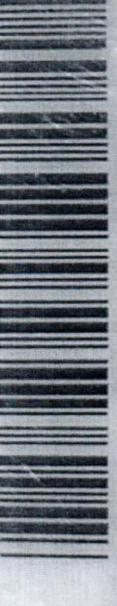
CHINESE

23-05-1971

Country of birth

SINGAPORE





NRIC NO. S7117336D



Date of Issue

12-11-2011

Address

165 BUKIT TINKAH ROAD #07-01

C No: S71173360

12/07/2012 (R) No: 7.0 798 63 Date:

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7518202C



FOO LI MING (FU LIMIN)

符像新

CHINESE

20-06-1975 F SINGAPORE

575192020





FOO LI MINO (FU LIMIN)

Birth Date 20 Jun 1975 Issue Date: 14 Aug 2004





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

PASS DATE

Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver, and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg

11 Aug 1999

NP 428A

Licence No: \$7518202C



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/00335367/01

Type of Coverage / Driver Plan

Car Comprehensive (Value Plan)

1) Vehicle Registration No.

SJP9774M

Chassis No.

WAUZZZ8R39A015441

2) Name of Policy Holder

FOO, LI MING

3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act

: 20/10/2017 00:00

4) Date/Time of Expiry of Insurance

: 19/10/2018 23:59

5) Persons or Classes of Persons Entitled to Drive

(a) The Insured

(b) 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\$ 0.00 (before any applicable GST)

Windscreen Excess

S\$ 100.00 (before any applicable GST)

Choice of workshop

DirectAsia approved workshops

Finance company / Hire Purchase

may bank

Main driver

FOO, LI MING

Ref

Named Driver

Date of Birth

Named driver (1)

TAN, PANG LIP

23/05/1971

Named driver (2)

FOO, LIN SENG

04/09/1948

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:

20/09/2017

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer