NATIONAL Assessment Cen	tre Services	et i Jan'osi Mi	JAII8007176	e al	Done b	
Date In: 15/18 -15.56	Jeb description		Date &Time Comp	leted	Done	,
Ref No: NA   TM7 1800 2897/24	SAS e-filing		i			
Veh No: 56x 60686	E-mail (within 8h	rs, AIC 2hrs)				
D.O.A : 13 1/18 - 1750	i-Motor Claim	Form				
	i-Motor W/O (	Within: OD 2hr	s, 7P 4brs)			
OD / TP / Reporting Only	i-Photo Uploac	led				
	Assessment/Sur	vey Report	1			
TP Insurer:	Ass't Report by	Fax / Hand	o Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (		BRANCE COMMUNICATION	Tel:	Fax:		)
TP Particulars: Veh No: JP	× 86%	. INC(	)/Non-INC(	1.		
Owner / Driver: (			Tel:		<u>)</u>	
Policy No: ( )	Period: (	)	Cover Type: (			
Confirmed by : (		Date:	Time:	2 00 1000/		
Insured/Driver Liability: ( %)	[Note-Est. Status (W		0%; P: 21-79%.	2: 80-100%		
Year of Registration: ( )	Warranty: YES (	)/NO(	)			
Excess: (\$ ) Loading: \$	1,000 ( )/\$2,000 (	)	North Company of the	210 X 2 125 X	-	
General Remarks:			The State of the S	200	A1 1 + 1	
( ) Walk-In Customer: Customer's in	nformation strictly Conf	fidential & S	trictly NO refer of re	pairer.		
( ) Total Loss Case : to e-mail Ins		1		16331		
Drive-In ( )/ Towed-In ( ); Invo	oice: YES ( ) / No	0();7	Towing Co: (			)
Remarks: (INC horline: 6788 6616	)		Date&Time Comp	e od	Done	y
	/ Courtesy Car ( )					
2) QC Check / Post Repair Inspection	( )					
3) Upload Resurvey Photo [Repair Cost >	·\$3000] ( )			300		
Injury:			-			
Date/Time Actions		Same and	al established	140 STL	Oine	1. 201. pp.
				20-37	1 2 5	1
727	1000000					
				y - 12 h A		
•			י ער אין	t Constant	Anit (S)	Amt (3)
NA1800319		Invoice Pr	eparation Checklis	<b>t</b>	få Bill	Add Bill
A. C.		1) AR : Accide	nt Reporting (\$30);	TNC (590)		
Claimant's Particulars :-		2) DA : Dameg 3) TF : Towing	Fee	INC (\$80) \$40/\$45		
Driver/Owner:		4) FT · Follow-	Through Survey Through Survey (Resurve	\$120 y) \$30		
Contact No:	(6 	For claiming	against INC Only (wef)	Jan 2005) \$75		
Damaged Portion:		6) TR : Re-ius	A + SMRT Survey	· \$160		
		8) NTUC Add	itional Services:-		-	
C Checked by (Engr-In-Charge):	1	OD*  *N5: Courte	sy Car / Tpt Allowance	\$5		
		*N6: Repair	Co-ordination	\$10 \$25		
Auditors! Comments :-		*N8: DV /	epair Inspection Collect Excess Coordination	n \$5		
Cat. 1:	The same of the sa	TP (N11):	TP (Non INC) against INC	\$20 30		10
		Invoice dated	Fee	Charged	MARINE FEREN	是特有了影
Cat. 2/3:		Invoice dated	Fee	Charged	经产担保	

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report correctly 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 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
- 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

ACC	j	STAT	EM	ENT
ACC	JU	SIAI	-17	

15/01/2018 13:56 Date Of Report 12/01/2018 17:50 Date Of Accident

ALONG KPE EXITING PIE (TUAS) Exact Location Of Accident

SINGAPORE Country/State of Loss

#### **DETAILS OF OWN VEHICLE**

SGX6068G Vehicle Registration Number

Insured/Policyholder

BRIGHTSTAR CAR RENTAL PTE LTD Name Of Registered Owner

201319803H Co Reg No NOEMAIL **Email Address** 

(LOCAL) +65-81450033 Mobile Phone No OFFICE-81450033 Alternative Phone No.

Vehicle Particulars

HONDA Manufacturer

STREAM 1.8 A Model

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?

If No. Please state action to be taken Vehicle Category

REPORTING ONLY COMMERCIAL VEHICLE

Insurance Company

TOKIO MARINE INSURANCE SINGAPORE LTD Name of Insurance Company

NO

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

17-MI001503-R00 Policy Number

Cover Note Number

Driver

TAN KAI SIANG (CHEN KAIXIANG) Name of Driver

S8303412B NRIC No 28/01/1983 Date Of Birth INDOOR Occupation 23/01/2002 Date Of Driving Pass

15 YEARS AND 11 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-97976963 Mobile Number

Fax Number

OFFICE-97976963 Contact Number

NOEMAIL **EMail Address** 

BLK 476B UPPER SERANGOON VIEW Address

#13-528

532476 Postcode

Was driver an employee of the Insured's Company NO

OTHER - HIRER If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Insurance Company of Driver's Own Vehicle

## General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions DRY Road Surface

#### Other Information

Was any foreign vehicle involved in this accident?

Foreign Vehicle Registration Number

JPX8620 (PRIVATE CAR)

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

YES

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

NO

Number of Passengers (Including Driver)

3

Passenger 1

NAME:

GENDER: : MALE

Passenger 2

NAME:

: -

: MALE GENDER:

## **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

REFER TO STATEMENT.

### 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

JPX8620

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

1

## SKETCH PLAN

#### IMPORTANT NOTICE

- Please report correctly 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 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.
- 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:

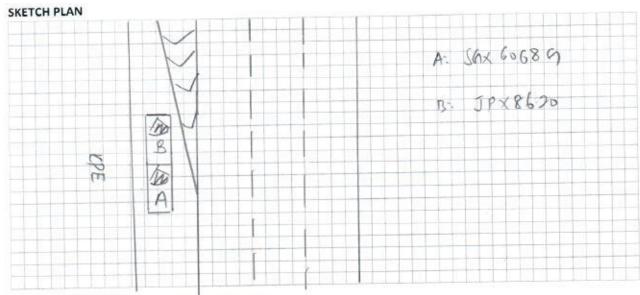
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

righ

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

NRIC/FIN No.:



	MSTANCES OF THE ACCIDENT
on 12/1/18	17:50 I was travelling oling left entering slip Rd
PIECTUAS).	inddenly vehicle is step on his break of his vehicle.
I tried to	ster the break of my vehicle, however couldn't mal
if in time	e and off hif onto rehicle is near portion.

## DECLARATION

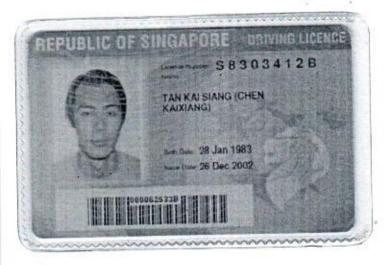
I/We declare the loregoing particulars are true in every respect.

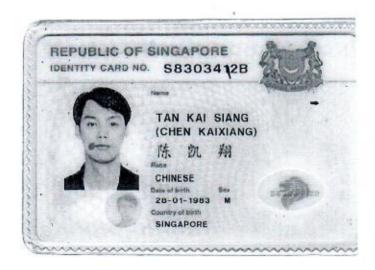
Policyholder Signature Date & Time

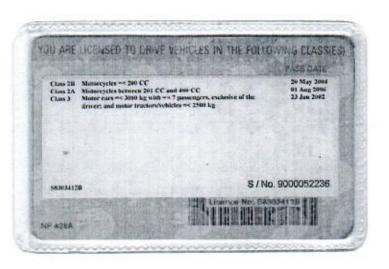
Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:









# Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@toklomarine.com.sg W: www.toklomarine.com

A member of the Tokio Marine Group



## 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.: 17-MI001503-R00 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle

SGX6068G

Chassis No.: RN61031926

2. Name of Policyholder

BRIGHTSTAR CAR RENTAL PTE LTD

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

21/11/2017

4. Date of Expiry of Insurance

01/10/2018

5. Persons or Class of Persons entitled to drive\*

Any person who is driving on the Policyholder's order or with their permission.

The hirer.

Any other person who is driving on the hirer's order or with his/ their 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.
- 6. Limitations as to use\*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled
- \* 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 Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 2397DDA

Insurance Plan:

Comprehensive Approved Workshop Plan

Limit for total loss or theft:

Prevailing Market Value

SGD 1,500

Policy Excess:

Own Damage Claims SGD 1,500 Excess-Third Party (Sect II)

Windscreen Excess

SGD 100

Tokio Marine Insurance Singapore Ltd.

**Authorised Signature** 

User Name: Tay Pui Leng Katherine -

Printed 21/11/2017