

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 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	22/01/2018 17:43
Date Of Accident	19/01/2018 19:55
Exact Location Of Accident	BKE (BEFORE WOODLANDS AVENUE 3 EXIT)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBF7035Z
Insured/Policyholder	
Name Of Registered Owner	PRINTWORKS CREATION
Co Reg No	53075298X
Email Address	KELVINLAO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91912899
Alternative Phone No	OFFICE-91912899
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200
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
If No. Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088066545
Cover Note Number	
Driver	
Name of Driver	LO CHENG CHI,KELVIN(LAO ZHENGZHI)
NRIC No	S7734358Z
Date Of Birth	04/12/1977
Occupation	OUTDOOR
Date Of Driving Pass	21/01/1998
Driving Experience	19 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91912899
Fax Number	
Contact Number	OFFICE-91912899
Email Address	KELVINLAO@GMAIL.COM

Address	BLK 727 WOODLANDS CIRCLE #11-110
Postcode	730727
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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
Passenger 1	NAME: : ZUO LIWEN GENDER: : FEMALE

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	SJN8397K
Vehicle Make/Model/Colour	B.M.W
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHENG WAI CHUEN
NRIC/Passport Number	S0114336J
Contact Number	80012086
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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.

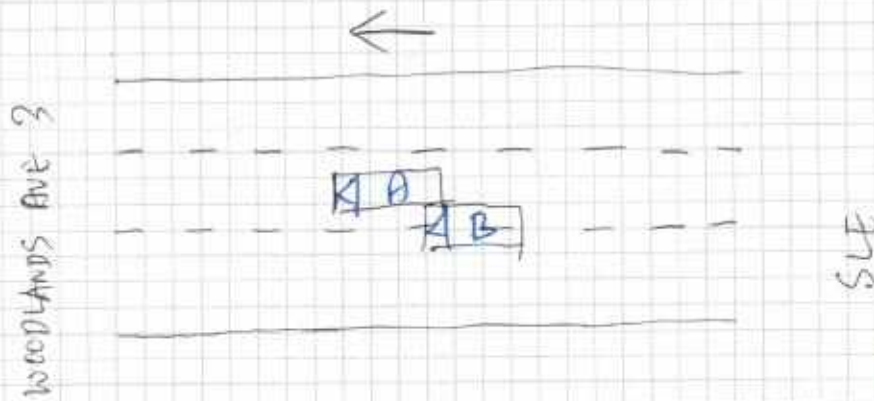


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 22/01/2018
1650h

22/01/2018
Reporting Centre Personnel's Signature
Name: Rosli Wafar
NRIC/FIN No.:

BRK B/F WOODCOMBS AVE 3 EX17.




A) GBF 7035 Z
B) SJN 8397 K

I was travelling within my own lane and a vehicle bumped into the left rear of the vehicle that I was driving. The driver said that he is willing to pay for the repair cost but unable to get hold of him from 20/01/2018 to 22/01/2018.

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



Driver's Signature: 
(If driver is not the policyholder)
Date & Time: 22/01/2018
16:50h

22/01/2018

Reporting Centre Personnel's Signature: *[Signature]*

Name: *[Signature]*

NRIC/FIN No.: *[Signature]*

Claim Handling

Accident MT/0978919

Policy No.	5088066545	Vehicle No.	GBF7035Z	GST Registration No.	
Policyholder Name	PRINTWORKS CREATION			Policyholder NRIC	
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Comprehensive	Loading	
Contact No.(Mobile)	91912899	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	22/01/2018 17:58	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	19/01/2018	Time of Accident hh:mm	18:55	Country of Accident	Singapore
Reporting Centre		Grange Force		ICM No.	
Accident Location	BXE (BEFORE WOODLANDS AVENUE 3 EXIT)				

Benefits

Excess

Own damage Excess	600.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

Policyholder Mailing Address

Address 1	1002 JALAN BUKIT MERAH	Address 2	#03-05	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	03-05	Related Policy Number	5088066545		

01 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver COB	
Unnamed driver Name	LO CHENG CHI,KELVIN(LAO ZHI	Driver NRIC	91912899	Driving Experience	
Register Date of Driver License	21/01/1998	Driver Age	40	Contact No.(Home)	
Contact No.(Mobile)	91912899	Contact No.(Office)		Address 3	
Address 1	BLK 227 #11-110	Address 2	WOODLANDS CIRCLE	Post Code	
Address 4		Address Type	Foreign address		
Unit No.	11-110				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.	GBF7035Z	Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	PRINTWORKS CREATION	Insured NRIC	
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	GBF7035Z	TP Vehicle Number	
Claim Description	GBF7035Z / SIN8397K ON 19 Jan 2018				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	
Require finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	
Date Registered	22/01/2018 18:03	Claim Close Date			
Report Taken By	ROSLI WAHAB				

☐ Print AK letter

Save Submit

Attachment

Accident No.	MT/0978919	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	22/01/2018 18:05
Path *		Category *	Confidential Urgency
			Normal

Please Select

<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	Normal

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	De
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:03	SAS		Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:04	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:04	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:04	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:04	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:04	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:04	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:03	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:03	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:03	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:03	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:03	SAS		Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Jan 2018 18:03	NRIC/ Driving License		Normal	NRIC/ Driving

Video List

Uploaded By/Date	Folder Date	File Name		Source
		<input type="button" value="Display in New Window"/>	<input type="button" value="Scan and uploading"/>	

ACCIDENT STATEMENT

ACCIDENT DATE: (19 / 01 / 2018) (DD/MM/YYYY), TIME: (19:55) (HH:MM)

LOCATION: BKE (before Woodlands Ave 3 Exit)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: 6BF 70352
 b) INSURANCE COMPANY: INCOME
 c) POLICY NUMBER: 5088066545
 d) POLICY TYPE: (☒ COMPREHENSIVE) / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: NISSAN NV200
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / ☒ COMMERCIAL) / MOTORCYCLE
 h) PURPOSE OF USING AT ACCIDENT TIME: going home
 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: PRIN WORKS CREATION (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 5307578X CONTACT: 91912899
 c) ADDRESS: 1007 JALAN BUKIT MERAH #02-05 S(159456)

* CONTINUE TO 3. d IF DRIVER ALSO POLICY HOLDER

- DRIVER
 a) NAME: LO CHENG CHI KEVIN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 577343582 CONTACT: 91912899
 c) ADDRESS: 727 WOODLANDS CIRCLE #11-110
S(736977)

* d) DATE OF BIRTH: (19 / 12 / 1987) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)
 f) DATE OF DRIVING PASS 21/01/1998

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (☒ YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____
 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: SJN8397K MODEL: Bmw
 b) DRIVER'S NAME: CHENG WAI CHUN
 c) NRIC/FIN/PASSPORT: 50114336J CONTACT: 81132086

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____ CONTACT: _____
 f) NRIC/FIN/PASSPORT: _____

No of passengers
 (including driver)
 (2)

ZUO LIWEN
 FEMALE

No of passenger
 (including driver)
 (1)

No of passenger
 (including driver)
 ()

email = kelvinlao@gmail.com

fax =

V1080

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7734358Z



Name

LO CHENG CHI, KELVIN
(LAO ZHENGZHI)

勞正智

Race

CHINESE

Date of birth

04-12-1977

Country of birth

SINGAPORE

Sex

M



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S7734358Z

Name

LO CHENG CHI, KELVIN
(LAO ZHENGZHI, KELVIN)

Birth Date 04 Dec 1977

Issue Date 16 Dec 2004



NRIC No. S7734358Z



Date of issue

20-05-2008

Address

APT BLK 727 WOODLANDS CIRCLE
#11-110
SINGAPORE 730727

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

PASS DATE

Class 3 Motor cars \leq 3000 kg with \leq 7 passengers,
exclusive of the driver; and motor tractors
/ vehicles \leq 2500 kg

21 Jan 1998

NP 428A



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)

Certificate Number : 5088066545

Cover : Comprehensive

- | | |
|---|-----------------------|
| 1. Index mark and Registration Number of Vehicle | : GBF7035Z |
| Chassis Number | : VSKYBAM20Z0135801 |
| 2. Name of Policyholder | : PRINTWORKS CREATION |
| 3. Effective Date of Insurance | : 17 Feb 2017 |
| 4. Expiry Date of Insurance | : 16 Feb 2018 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her 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. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: ETHOZ CAPITAL LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : NET LINK COMMERCIAL PTE. LTD. (00000615136)
Date of Issue : 17 Feb 2017 11:55 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive