NATIONAL Assessment Cen		wef 1 Jan'05] M	NAJI8014277	Done	hv
Date In: 30 1/18 - 11:08	Jeb description		Date &Time Completed	Done	oi
Res No: NA /MSG 1800/782/24	SAS e-filing		i		
Veh No: GBC 2168 Y	E-mail (within St	irs, AIC 2hrs)			•
D.O.A : 26/1/8- (6:30	i-Motor Claim	Form	the .		
	I-Motor W/O	(Within: OD 2hr	1, TP 4brs)		
OD TP Reporting Only	i-Photo Uploa	ded			
TP Insurer:	Assessment/Sur	vey Report			
17 Insurer:	Ass't Report by	Fax/Hand	o Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (			Tel:	Fax:	)
TP Particulars: Veh No: X	E 2565 S	. INC(	)/Non-INC( ).		
Owner / Driver: (			Tel:	)	
Policy No: ( )	Period: (	)	Cover Type: (	).	
Confirmed by : (		Date:	Time:	)	
Insured/Driver Liability: ( %)	) [Note-Est. Status (W	O): N: 0-2	0%; P: 21-79%. P: 80	-100%]	
Year of Registration: ( )	Warranty: YES (	)/NO(	)		
Excess: (\$ ) Loading: \$	1,000 ( )/\$2,000 (	)			
General Remarks:		NY NY	V. 7555633		
( ) Walk-In Customer : Customer's in	The state of the s	idential & St	112 11 11 12 12 12 12 12 12 12 12 12 12		
		idential & St	icuy NO Taler of Tepaner	·	
( ) Total Loss Case : to e-mail Ins			audia Coul	· · · · · ·	<u> </u>
	oice: YES ( ) / NO	);1	owing Co: (		/
Remarks: (INC hotline: 6788 6616	National Control		Date& Time Completed	Done	by
1) Apply for Transport Allowance ( )	/ Courtesy Car ( )				1
2) QC Check / Post Repair Inspection	( )			1.	
3) Upload Resurvey Photo [Repair Cost >	\$3000] ( )				
NA PARTICIPATION IN					
Injury:				97799 KO 6.7. A. e.	A
Date/Time Actions	rowership of the	and order bases		PROPLEMENT	<u></u>
				10	
		HEO. DEST. HOUSE, AND			
•		42.W073.Z0440.T4.0C.Z04740.			
tial and the		Invoice Pre	paration Checklist	Anit (S)	Amt (3)
N41800649			METERS PROUP & MARIE ALL TO	MBII	Add Bill
laimant's Particulars :-	BOSTOCK BOCKEN, DOSKISLITHERS, PROADSKY TROOKS SEC. 4665 FORCE	1) AR : Accident 2) DA : Damage		(\$80)	
river/Owner:		3) TF : Towing F	ee S	\$120	
		4) FT : Follow-T	hrough Survey (Resurvey)	\$30	
ontact No:		For claiming a	gainst INC Only (wef 10 Jan 20)	05)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
arnaged Portion:		6) TR : Re-inspec 7) N1 : Idao DA		\$75	
		8) NTUC Addition			
C Checked by (Engr-In-Charge):	i i	OD*	Car / Tpl Allowance	25	
-, \-, \-		*N6: Repair C	o-ordination	\$10	
Mines Comments		*N7: Fost Rep	nir Inspection	\$25 \$5	
uditors' Comments :-	2000年1月1日 1000年1日	TP (N11): TP	lect Excess Coordination (Non INC) against INC	\$20	
<u>():</u>		9) N12: Idac Mo	bile	30	arter Jehr
1. 2/3;		Invoice dated	Fee Charge Fee Charge	MARKET 47.24	-
	1	Invoice dated	Land of the contract	4 2000000000000000000000000000000000000	

1 - per at 1 - 12"

#### Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 30/01/2018 11:24

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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.
- 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.
- 5. Any false reporting may be referred to the Police for investigation.
- 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.	
Material Company of the Company	ACCIDENT STATEMENT
Date Of Report	30/01/2018 11:08
Date Of Accident	26/01/2018 16:30
Exact Location Of Accident	SLE TWDS BKE BEFORE WOODLANDS AVE 12 EXIT
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	GBC2168Y
Insured/Policyholder	
Name Of Registered Owner	AUTO 51 PTE LTD
Co Reg No	201018099E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90015393
Alternative Phone No	OFFICE-90015393
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA 150 D
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number:	A29045293MKC
Cover Note Number	
Driver	

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•	п		я	.,	•	
	u	•	в	v	ы	и

 Name of Driver
 TAN KIM SONG

 NRIC No
 \$0986610H

 Date Of Birth
 09/05/1945

 Occupation
 INDOOR

 Date Of Driving Pass
 02/12/1963

Driving Experience 54 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-83057156

Fax Number

Contact Number OFFICE-83057156

EMail Address NOEMAIL

Address

BLK 4 MARSILING ROAD

#04-5053

Postcode

730004

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

FRIEND

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CHANGE/CROSS LANE

Weather Conditions

CLEAR

Road Surface

DRY

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?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

1

Number of Passengers (Including Driver) **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?

NÓ

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

XE2555S

Vehicle Make/Model/Colour

TRB4360K

**Details Of Properties** 

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## 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 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.
- 5. 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 aforesald.
- 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.:

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

Policyholder's Signature

Date & Time:

**Priver's Signature** 

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

/ehicle No.	G3C 216 By Model/Make Typic Pyra
Date of Accident	26/11/18
ime of Accident	HRS HRS
ocation of Accident	SLE towards BKE Before Waderals AVE 12 Bast
xact purpose use during accid	
Name of Owner	Auto 51 Bz Ltol
elephone No.	H/P: 90015393 Home: Office:
VRIC	201018099 €
Address	15, 73 pm I dustal St 1, 401-05, Win 5, 5 (768091)
Claim type	OD THIRD PARTY REPORTING ONLY
nsurance Company	mera
Type of Coverage	Comprehensive Third Party (Third Party / Fire /Theft)
Policy No.	A 29045293 MKC
oney No.	7 210-7217
Name of Driver	As Above If No, Tan Lan Song
VRIC	SOTEGO Any Passengers: -
Date of birth	09/5/1945
Occupation	Outdoor / (Indoor)
Driving License Pass Date	02/12/1963
Gender /	Male / Female
Contact No.	H/P: \$355+156 Home: Office: 91807485 (
Address	SIC 4, Marsiling Rd + OH- 5053, X752000
Driver have any own vehicle	No, If yes, Reg No.
Relationship	Employee, If no state found
Weather condition	Clear Raining Other
Road Surface	Dry Wet Other
Any Injuries	No. If Yes, Who?
Name And Contact No.	
Name And Contact No.	
Police Report	No, If Yes, Where?
Vehicle B No.	X E 2555 S (TRS 43box) Any Passengers:
Name of Driver	Contact No. :
Vehicle C No.	Any Passengers :
Vehicle D No.	Any Passengers :
Vehicle E no.	Any Passengers :
Vehicle F No.	Any Passengers :
Vehicle G No.	Any Passengers :
Witness Name	Witness Contact :
Accident Portion	
Camera Recorder	Yes (No
Email Address	While left estre
PARTICULAR WORKSHOP	NSI AMONSTER PL
CONTACT NO.	6842 0051 / 6744 0510
	6842 0051 / 6744 0510 6741 0510

48.

Remarks

## Transaction ref 20151209173220123588

The owner and vehicle particulars for Vehicle No. GBC2168Y as at 09 Dec 2015 are as follows:

1.	Name	: AUTO 51 PTE. LTD.
2.	Identification No. Type	: Company
3.	Identification No.	: 201018099E
4.	Place Of Passport Issue	:-
5.	Vehicle No.	: GBC2168Y
6.	Previous Vehicle No.	:-
7.	Effective Date of Ownership	: 09 Dec 2015
8.	Original Registration Date	: 09 Nov 2004
9.	First Registration Date	: 09 Nov 2004
10.	Vehicle Type	: B31 - Goods (Open) Lorry (Metal Body)/Pickup
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: No Attachment
13.	Attachment 2	:-
14.	Attachment 3	:-
15.	Vehicle Make	: TOYOTA
16.	Vehicle Model	: DYNA 150 D
17.	Year of Manufacture	: 2004
18.	Primary Colour	: Blue
19.		:-
20.		: 1
21.	Chassis/Trailer Chassis No.	: JTFUF34Y503002852 / -
22.	Propellant	: Diesel
23.	Engine No./Motor No.	: 5L5481208/-
24.	Engine Capacity(cc)/Power Rating(kW)	: 2986 / -
26.	Unladen Weight(kg)	: 1700
27.	Maximum Laden Weight(kg)	: 3500
28.	Open Market Value	: \$23,715.00
29.		: No
30.		1-
31.		: \$0.00
32.		: 4
33.	IU Label No.	: 1042018077
34.	COE No.	: 2004090105000766R
35.	COE Expiry Date	: 31 Aug 2019
36.	COE Category	: C - Goods Vehicle & Bus
37.		
38.		: \$21,466.00
39.	Actual ARF Paid	: \$1,186.00
44.	Vehicle Lifespan Expiry Date	: 08 Nov 2024
45.	Road Tax Amount	:-
46.	Road Tax Start Date	:-
47.	Road Tax End Date	:-

: Upon the expiry of the vehicle's 5-year COE on 31 Aug 2019, you may further renew the COE of your vehicle for another 5 years, subject to the statutory lifespan (if

applicable) of the vehicle.

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. S0986610H



TAN LIM SONG

CHINESE

there of birth 09-05-1945 M

Country of birth SINGAPORE







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

EFFECTIVE DATE

Class 2B Class 2A Class 2 Class 3

Motorcycles =< 200 cc
Motorcycles between 201 cc and 400 cc
Motorcycles > 400 cc
Motor cars with unladen weight =< 3000kg with =< 7
passengers, exclusive of driver; and other motor
vehicles with unladen weight =< 2500kg

17 Jul 1965 17 Jul 1965 17 Jul 1965 02 Dec 1963

NP 428A



MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way, # 21-01, SGX Centre 2. Singapore 068807 Tel +65 6927 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.Z.300

Goods Carrying Vehicle - Sch I

COMMERCIAL VEHICLE Third Party Fire & Theft

Certificate No. A 29045293 MKC

- 1. Index Mark and Registration Number of Vehicle
- 2. Name of Policyholder Auto 51 Pre Ltd
- 3. Effective Date of the Commoncement of Insurance for the purposes of the Act
- 4. Date of Expiry of Insurance DB/11/2018
- 5. Persons or Classes of Persons entitled to drive

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 in connection with the Policyholder's business.
Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. Use for social domestic and pleasure purposes.

The Policy does not cover
(1) Use for hire or reward or for racing pace-making reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

\* 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.

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