THE THE PROPERTY OF THE OWNER.	Services MNA 118018612
Date In 6 12/18 16:35	Ich description Date & Temp Completed Done by
ROTNO MAI MSG 1800 2383144	SAS e-filing
Veh No SLM 4646 A	E-mail (within thes, AIC this)
DOA 6/2/18 /4:30	i-Motor Claim Form
OD TP / Renative Only	i-Motor W/O (widis OD thra TP 4 hrs)
	i-Photo Uploaded
	Assessment/Survey Report
TP Insurer:	Ass't Report by Fax / Hand to Owner/Whan
Preferred Wksp / INC Assign Wksp / QW: (	Tel: Fax:
TP Particulars: Veh No:	BBB 983 D NC( )/Non-INC( )
Owner / Driver: (	Tel:
Policy No: ( ) Peri	od: ( ) Covet Type: ( )
Confirmed by : (	Date: Time:
Insured/Driver Liability: ( %) [N	ote-Est. Status (WO): N: 0-20%; P. 21-79%. F: 80-100%]
Year of Registration: ( ) W	Parranty: YES ( ) / NO ( )
Excess: (S ) Loading: \$1,00	0( )/\$2,000( )
General Remarks:-	
( ) Walk-In Customar : Customer's inform	mation strictly Confidential & Strictly NO refer of repairer.
( ) Total Loss Case : to e-mail Insurer	URGENTLY.
Drive In ( )/ Towed-In ( ); Invoice:	YES ( ) / NO ( ); Towing Co: (
Apply for Transport Allowance ( ) / Co     QC Check / Post Repair Inspection	( )
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$30 Injury:	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$30  Injury:  Date Time   Actions	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
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2) QC Check / Fost Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$30  Injury:  Date Time Actions  Laumant's Particulars:	MAISOOS28  Invoice Preparation Checklist    Ant (5)   And (5)
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2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$30  Injury:  Date Time Actions  Tiver/Owner: ontact No: amaged Portion:	MAISONS Investee Preparation Chacklist  Investee Preparation Chacklist  1) AR: Assistant Reporting (350);  2) DA: Damese Assistant (5100); INC (380);  2) DA: Teming Fee S40,544;  4) FT: Fellow-Through Survey (520);  5) FT: Fellow-Through Survey (Featurety) 370;  For sistiming assist INC Only (wef 10 Jan 1805);  6) TR: Re-inspection 371;  7) N1: Has DA - SMRT Survey S150;  3) NTUC Additional Services.
2) QC Check / Fost Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$30  Injury:  Date Time Actions  Tiver/Owner: ontact No: arnaged Portion:	MAISONS Inveice Preparation Chacklist  Inveice Preparation Cha
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$30  Injury:  Date Time Actions  Priver/Owner:  Contact No:  Paraged Portion:  C Checked by (Engr-In-Charge):	MAISONS Inveice Preparation Checklist  Inveice Preparation Che
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2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$30  Injury:  Date Time   Actions	MAIS 00 \$28   Inveite Preparation Chacklist   Ant (5)   Ant (5)

## SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

EMail Address

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
   This Form must be <u>completed</u> 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.

- repudiate policy dollity.

  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
The second secon	
Date Of Report	06/02/2018 16:35
Date Of Accident	06/02/2018 14:30
Exact Location Of Accident	KAKI BUKIT AVE 4
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLM4646A
Insured/Policyholder	
Name Of Registered Owner	TAN QIU RUI
NRIC No	S8241394D
Email Address	NÔEMAIL
Mobile Phone No	(LOCAL) +65-96636272
Alternative Phone No	OFFICE-96636272
Vehicle Particulars	
Manufacturer	SUBARU
Model	BRZ
Exact Purpose for which vehicle was being used at time of accident	FRIVATE OOE
Are you claiming under your own insurance policy for repair to your vehicle?	NO 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	A 28929767 QMY
Cover Note Number	i de la companya de l
Driver	
Name of Driver	TAN QIU RUI
NRIC No	S8241394D
Date Of Birth	08/12/1982
Occupation	INDOOR
Date Of Driving Pass	10/12/2007
Driving Experience	10 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96636272
Fax Number	Newscars Auf (1990) Control (1990)
Contact Number	OFFICE-96636272
TO ALLOW TO ALLOW THE TAXABLE PROPERTY.	

NOEMAIL

Address

BLK 61 CHAI CHEE RD #05-848

Postcode

460061

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

COLLISION - MAJOR/MINOR RD

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?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

1

#### **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

WHILE TURNING OUT FROM PREMIUM KAKI BUKIT TO THE KAKI BUKIT AVE 4, I HEARD A KNOCK FROM VEH B AND REALIZED THAT WAS A COLLISION.

### 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

GBB983D

Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

VENUGOUPALL GANESAN

NRIC/Passport Number

S7713724F

Contact Number

86806773

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

### 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.
- 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 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:
  - (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.:

SKETCH PLAN	
Prewier	
Kaki Bukit	
	A = SLM 4646,
	B= GBB 983 1
www.comman	5- 966 163 (
B B	
Kaki Bukit Ave 4	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
Please Refer to state	ment
*	
* /	
/	
. /	
*	
DECLARATION	1
I/We declare the foregoing particulars are true in every respect.	
1~	the state of the s
	I Wind

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.:

GIARME SketchPlanForm, V

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$8241394D



TAN QIU RUI (CHEN QIURUI)

陈秋瑞

CHINESE

08-12-1982 Country/Place of birth SINGAPORE

\$52413940

REPUBLIC OF SINGAPORE DRIVING LICENCE Licence Number: S 8 2 4 1 3 9 4 D TAN QIU RUI (CHEN QIURUI) Birth Date: 08 Dec 1982 Issue Date: 10 Dec 2007



03-12-2013

APT BLK 61 CHAI CHEE ROAD #05-848 SINGAPORE 460061

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES.

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 10 Dec 2007 of the driver; and other motor vehicles =< 2500kg

NP 428A



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

MOTOR MAX PLUS Comprehensive

Certificate No. A 28929767 QMY

Excess: SGD1,500

Windscreen Excess: SGD100

1. Index Mark and Registration Number of Vehicle

2. Name of Policyholder

Tan Qiu Rui

 Effective Date of the Commencement of Insurance for the purposes of the Act 31/03/2017

4. Date of Expiry of Insurance

30/03/2018

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

Tan Qiu Rui

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 CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR 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