

NATIONAL Assessment Centre Services

(v11.1.2000)

NA/18025492

Date In: 22/02/08 10:08	Job description	Date & Time Completed	Done by
Ref No: NA/18025492	SAS e-tiling		
Veh No: SJS 4693 E	E-mail (within 2hrs, A/C 2hrs)		
D.O.A: 21/02/2018 18:15	E-Motor Claim Form		
OD: TP / Reporting Only	E-Motor W/O (within 24hrs, 24hrs)		
	E-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW:	Tel:	Fax:
TP Particulars: Yeh No: SKF 6660.1	INC () / Non-INC ()	
Owner / Driver ()	Tel: ()	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: ()	Date: ()	Time: ()
Insured/Driver Liability: ()	% (Note: BSL Status (WO): N: 0-20%; P: 21-79%; P: 80-100%)	
Year of Registration: ()	Warranty: YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	

General Remarks:
() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repeller.
() Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks:	INC Hotline: 6788 66167	Date & Time Completed:	Done by:
1) Apply for Transition Allowance () / Courtesy Car ()			
2) QC Check / Post Repair Inspection ()			
3) Upload Recovery Photo (Repair Cost > \$3000) ()			

Injury:

Date/Time	Action

NA/180206	Invoice Preparation Checklist
Customer/Owner:	1) AR: Accident Reporting (\$20)
Contact No:	2) DA: Damage Assessment (\$100) INC (\$50)
Assigned Person:	3) TP: Towing Fee (\$20/14)
C. Checked by (Ungr-In-Charge):	4) FT: Follow-Through Survey (\$120)
	5) RT: Follow-Through Survey (Recovery) (\$20)
	6) TR: Re-inspection (\$12)
	7) NI: New DA + SMRT Survey (\$160)
	8) NTUC Additional Services
	9) NTUC
	10) NTUC Courtesy Car / Tpl Allowance (\$5)
	11) NTUC Repair Coordination (\$10)
	12) NTUC Post Repair Inspection (\$12)
	13) NTUC / Customer Unusual Coordination (\$5)
	14) TP (NI) / TP (Non-INC) against INC (\$20)
	15) NTUC Mobile (\$10)
	Invoice dated
	Not Charged
	Not Charged

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	22/02/2018 10:08
Date Of Accident	21/02/2018 18:15
Exact Location Of Accident	COMMONWEALTH AVENUE WEST TOWARDS CLEMENTI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS4693E
Insured/Policyholder	
Name Of Registered Owner	GOH LEE SUAN, FIONA
NRIC No	S7938427E
Email Address	FIONAGOH7@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97885416
Alternative Phone No	OTHERS-97885416

Vehicle Particulars

Manufacturer	HONDA
Model	FIT
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	S 27941616 SMA
Cover Note Number	

Driver

Name of Driver	GOH LEE SUAN, FIONA
NRIC No	S7938427E
Date Of Birth	07/12/1979
Occupation	INDOOR
Date Of Driving Pass	20/11/2003
Driving Experience	14 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97885416
Fax Number	
Contact Number	OTHERS-97885416
Email Address	FIONAGOH7@GMAIL.COM

Address	BLK 28A DOVER CRESCENT #09-05
Postcode	131028
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	SIDE SWIPE
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?	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)	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

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	SKF6660T
Vehicle Make/Model/Colour	B.M.W 523I
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHUA POH TECK
NRIC/Passport Number	S7100627A
Contact Number	92991283
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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) 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:

22 Feb 2018
9.44am

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

22/02/2018
Kodli WAHAB

SKETCH PLAN COMMONWEALTH AVENUE WEST TOWARDS CLEMENTI ROAD

A) SJS 4693E

B) SKF 6660T



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Accident took place on 21 Feb 2018 at about 6-15 pm. I was ~~at~~ stopped at traffic lights and then when the traffic moved, I looked at my left-side mirror to check that the left lane is clear before changing lane. The left lane was indeed clear and two cars behind me had successfully changed lane to the left. The traffic in lane I was trying to change from was a right-turning lane I for going forward.

Seeing that the road on my left was clear (from checking my left-side mirror and rear mirror), I made the lane change. As I was completing the lane change, a black BMW SKF 6660T rushed from behind me and brushed the front left corner of my car's bumper. I heard the car knock my car.

However, the SKF 6660T BMW did not stopped ^{immediately} ~~at all~~ after knocking my car. In fact, it picked up speed and drove on for a few minutes. This was despite that there was a taxi-stand near Singapore Polytechnic (near the accident site) where we could stop to assess damage to the cars. He only stopped his car much later after I signalled him to stop by flashing my headlights.

Accident took place at the traffic junction outside along Singapore Polytechnic at Commonwealth Avenue West (along the MRT tracks below) and driver of SKF 6660T drove on till Clementi Ave 2 (from Commonwealth turning right to Clement Road then turning left into Clementi Ave 2); driving for a few minutes after the accident. Driver appeared to be in a hurry.

DECLARATION and said he needed to go soon after exchanging contacts and taking photos of my car.
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time: 22 Feb 2018
10:09 am

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

22/02/2018

Resdi WATTHAS

ACCIDENT STATEMENT

ACCIDENT DATE: 21 / 02 / 2018 (DD/MM/YYYY), TIME: 18 : 15 (HH:MM)

LOCATION: Commonwealth Avenue towards Clementi

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SSS 4693E
 b) INSURANCE COMPANY: MSIG Insurance (Singapore) Pte. Ltd.
 c) POLICY NUMBER: SJ7941616 SMA
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: HONDA FIT 1.3G A
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Private use
 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: Goh Lee Juan Fiona (MALE / FEMALE) 97885416
 b) NRIC/FIN/PASSPORT: S7938427E CONTACT: _____
 c) ADDRESS: BLK 28A Dover Crescent # 09-05
Singapore 131028

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

4/ No of passenger
 (including driver)
(1)

- DRIVER
 a) NAME: Goh Lee Juan Fiona (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S7938427E CONTACT: _____
 c) ADDRESS: BLK 28A Dover Crescent #09-05
Singapore 131028

* d) DATE OF BIRTH: 07 / 12 / 1979 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 20 Nov 2003

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Owner

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. c) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

4/ No of passenger
 (including driver)
(1)

- a) VEHICLE NUMBER: SKF 6660T MODEL: Bmw 523i
 b) DRIVER'S NAME: Chua Poh Teck
 c) NRIC/FIN/PASSPORT: S7100627A CONTACT: 9299 1283

9. THIRD PARTY VEHICLE

4/ No of passenger
 (including driver)
()

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

Email: fionagoh7@gmail.com

fax: —

VIDEO: —

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7938427E



Name

GOH LEE SUAN, FIONA
(WU LIXUAN, FIONA)

吴丽铨

Race

CHINESE

Date of birth

07-12-1979

Sex

F

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7938427E

Photo



GOH LEE SUAN, FIONA
(WU LIXUAN, FIONA)

Birth Date: 07 Dec 1979

Issue Date: 20 Nov 2003



4562602

NRIC No S7938427E



Date of issue

21-04-2010

APT BLK 28A DOVER CRES #08-05
SINGAPORE 131028

NRIC No: S7938427E

Date: 28/01/2016

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES:

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 20 Nov 2003

NP 428A



**MSIG**

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

ULTIMATE CAR PROTECTOR-CLASSIC
 Comprehensive

Certificate No. S 27941616 SMA

Excess: SGD500
 Windscreen Excess: SGD100

1. Index Mark and Registration Number of Vehicle

SJS4693E

2. Name of Policyholder

Goh Lee Suan Fiona (Wu Lixuan Fiona)

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

31/08/2017

4. Date of Expiry of Insurance

30/08/2018

5. Persons or Classes of Persons entitled to drive*

Goh Lee Suan Fiona (Wu Lixuan Fiona)

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 MUST BE CARRIED OUT 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