

1914/10/26

TP Insulator:

Ass't Report by Rex / Hand to Owner / YWksp

Page 1

Tel

*Thyrid*

Loading: \$1,000 ( ) / \$2,000 ( )

Rowing Co:

by Donchy

( )

( )

Injury 1

5-2-1970

MA/80/298

Admitted Pardon: 1894.

C. Checked by (Bug-in-Charge):

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Author's Comments:

1	2
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2/3:

Invoice Preparation Checklist

4) NTUC Additional Services

외국

$$TP(N) \vdash TP(N)$$

Not Charged

111029  
 111030



## 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	23/02/2018 15:26
Date Of Accident	22/02/2018 17:20
Exact Location Of Accident	POMO NO:1 SELEGIE ROAD CARPARK ENTRANCE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGC7088C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIEW LING YU
NRIC No	S0013138E
Email Address	WEILIPAN@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-97711711
Alternative Phone No	OTHERS-91017760

### Vehicle Particulars

Manufacturer	BMW
Model	335i
Exact Purpose for which vehicle was being used at time of accident	DRIVING HOME
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	MT20173744

### Driver

Name of Driver	PAN WEI LI
NRIC No	S8100913I
Date Of Birth	10/01/1981
Occupation	INDOOR
Date Of Driving Pass	17/07/2002
Driving Experience	15 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97711711
Fax Number	
Contact Number	OTHERS-91017760
Email Address	WEILIPAN@SINGNET.COM.SG

Address	BLK 55 STRATHMORE AVENUE #13-147
Postcode	140055
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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

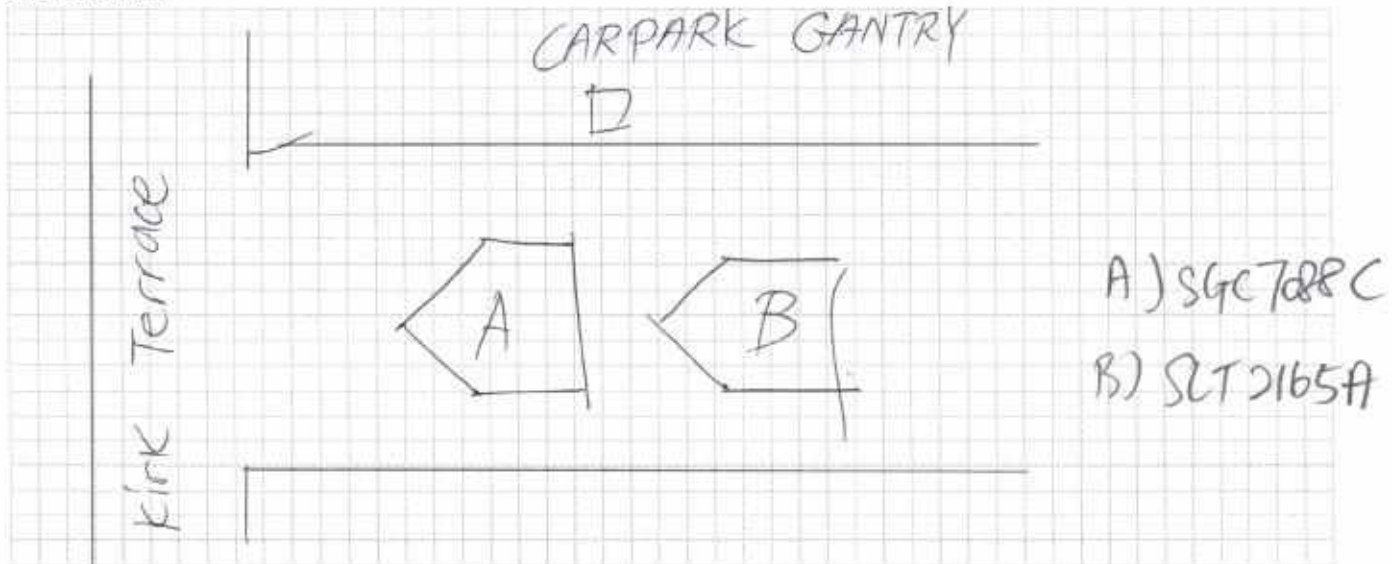
#### Attachment(s)

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	SLJ2165A
Vehicle Make/Model/Colour	HONDA VEZEL
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JUSTLY TOH XING FU
NRIC/Passport Number	
Contact Number	98189076
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As I was leaving the carpark at Pomo 1 Selegie Rd, the driver of the Vehicle B attempted to tailgate me past the carpark gantry. I slowed down before merging on to Kirk Terrace and the driver rear ended my vehicle.

## DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

23/2/18  
11:17am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

27/02/2018  
[Signature]



## 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.
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 liability.
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. 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.
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:

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

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

# ACCIDENT STATEMENT

ACCIDENT DATE: 22/02/18 (DD/MM/YYYY), TIME: 17:20 (HH:MM)

LOCATION: POMO, 1 Selegie Rd, Carpark-entrance

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SGC 7088C  
 b) INSURANCE COMPANY: NTUC INCOME GRAN AMERICONE  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: ☐ COMPREHENSIVE / ☐ THIRD PARTY / ☐ THIRD PARTY FIRE & THEFT  
 e) MAKE & MODEL: BMW 335i  
 f) TYPE: ☐ SALOON ☐ COUPE ☐ MPV ☐ VAN ☐ LORRY ☐ MOTORCYCLE / OTHERS  
 g) VEHICLE CATEGORY: ☐ PRIVATE ☐ COMMERCIAL / MOTORCYCLE  
 h) PURPOSE OF USING AT ACCIDENT TIME: DRIVING HOME  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: LIEIN LING YU (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S0013138E CONTACT: 97711711  
 c) ADDRESS: 36 KIM TIAN RD, #31-01, 5169279

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No. of passenger  
(including driver)  
(1)

- DRIVER  
 a) NAME: PAN WEI LI (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S8100913E CONTACT: 91017760  
 c) ADDRESS: 55 STRATHMORE AVE, #13-147  
5140055

\* d) DATE OF BIRTH: 10/01/1981 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) DATE OF DRIVING PASS: 17 JUL 2002

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) 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) NO

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

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

No. of passenger  
(including driver)  
(1)

- a) VEHICLE NUMBER: SLJ 2165A MODEL: HONDA VEREL  
 b) DRIVER'S NAME: JUSTLY TOH XING FU  
 c) NRIC/FIN/PASSPORT: S940494H CONTACT: 98189076

## 9. THIRD PARTY VEHICLE

No. of passenger  
(including driver)  
( )

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

email = WEILIPAN@SINGNET.COM.SG

fax = \_\_\_\_\_

VIDEO \_\_\_\_\_



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S81009131



Name

PAN WEI LI

潘偉立

Race

CHINESE

Date of birth

10-01-1981

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S81009131

Name

PAN WEI LI

Birth Date: 10 Jan 1981

Issue Date: 17 Oct 2008



4808331

NRIC No. S81009131



Date of issue  
05-01-2012

Address

APT BLK 55 STRATHMORE AVENUE  
#13-147  
SINGAPORE 140055

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

PASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 17 Jul 2002

NP 428A



**MOTOR COVER NOTE: MT20173744**

The Insured mentioned in this Cover Note, having proposed for insurance in respect of the Motor Vehicle described, is hereby **HELD COVERED** under the terms of the Insurer's usual form of Motor Policy applicable thereto for the period mentioned unless the cover be terminated by the Insurer by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium payable for such insurance will be charged for the time the Company has been on risk.

The Insurer	: GREAT AMERICAN INSURANCE COMPANY
The Insured	: LIEW LING YU
Insured Nric/Passport No/ Roc	: S0013138E
Policy Coverage	: COMPREHENSIVE
Make And Description Of Vehicle	: BMW 335I COUPE SUNROOF
Vehicle Registration No.	: SGC7088C
Year Of Manufacture	: 2008
Engine No.	: 12106861N54B30A
Chassis No.	: WBAWB72020P175817
Engine Capacity/ Tonnage/ Seater	: 2979 cc
Hire Purchase	: NIL
Value (S\$)	: AS PER MARKET VALUE
Period Of Insurance	: FROM: 18/07/2017 TO: 17/07/2018
Excess (S\$)	: Section I : \$600 : Section II : Nil : Windscreen Excess : \$100
Great American Authorized Workshop	: YES

WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA)

and on behalf of Great American Insurance Company



Great American Insurance Company  
Authorized Signatory

Date of Issue : 14/07/2017