	itre Services -			The second	
Date In: 3/3/18-16:22	Jeb description		Date & Time Completed	Done	by .
Res No: NA MC NO 9123/24	SAS e-filing				
Veh No: SCH Y6TIK	E-mail (within 8h	rs, AIC 2hrs)	- X - X - X - X - X - X - X - X - X - X		
D.O.A : 3/3/18-16:30	i-Motor Claim	Form	W1/008 A 119	3/3/18	7:12
OD TP ! Reporting Only	i-Motor W/O (		P 4hrs)	<u>.</u>	
TP Insurer:	Assessment/Surr	vey Report			
IF Insurer.	Ass't Report by	Fax / Hand to	Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (			Tel:	Fax:	
TP Particulars: Veh No: Sku	19528P	. INC(	)/Non-INC( )		The same of the sa
Owner / Driver: (		-1/1	Tel:	)	
Policy No: ( )	Period: (	) (	Cover Type: (	)	
Confirmed by: (		Date:	Time:	)	
Insured/Driver Liability: (%)	) [Note-Est. Status (W	O): N: 0-20%	; P: 21-79%. F: 80-	100%]	
Year of Registration: ( )	Warranty: YES (	)/NO( )			
Excess: (\$ ) Loading: \$	1,000 ( )/\$2,000 (	)			
General Remarks:-			ENTERNIS DE L'EST		
	V412/ OCH (C. 1970) (C. 1970)	across and across and	L NO sefer of second	Property Control	
( ) Walk-In Customer : Customer's in		dential & Strict	NO rater of repairer.		
( ) Total Loss Case : to e-mail Ins	The second secon				
Drive-In ( )/ Towed-In ( ); Invo		) ( ) ; Tov	ring Co: (		,
Remarks:- (INC horline: 6788 6616)	)***		Date&Time Completed	Done	by
1) Apply for Transport Allowance ( )					
2) QC Check / Post Repair Inspection	( )				
2) [1] - 2 D	£20003 ( )				A-VI ELLINO
J Upload Resurvey Photo [Repair Cost >	( )	400			
	( )				
3) Upload Resurvey Photo [Repair Cost>  Injury:	. \$3000]				
	( )		· · · · · · · · · · · · · · · · · · ·		
Injury:	( )	1 - 7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		ental de la company	
Injury:	. \$3000]			**************************************	· · · · ·
Injury:	1994 (20) ( )			TANGE (NEW ) 83	
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Injury:  Oute/Time Actions	•		ration Checklist	Anit (S)	and the same
Injury:  Date/Time Actions  ACTIONS  IA 180 (78)	1	) AR : Accident Re	porting (\$30);	fá Bill	and the same
Injury:  Date/Time Actions  Actions  Lime (78)  Aumant's Particulars:	1 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	) AR : Accident Re ) DA : Damage Ass ) TF : Towing Fee	porting (\$30); sessment (\$100); INC (\$	fat Bill (80) (0/\$45	and the same
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#### 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 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.

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

03/03/2018 16:22 Date Of Report 02/03/2018 16:30 Date Of Accident

MARINE PARADE RD ROUNDABOUT Exact Location Of Accident

SINGAPORE Country/State of Loss

# **DETAILS OF OWN VEHICLE**

SLH4651K Vehicle Registration Number

Insured/Policyholder

INVEST WELLNESS & SERVICES PTE LTD Name Of Registered Owner

201434387Z Co Reg No NOEMAIL Email Address

(LOCAL) +65-90915808 Mobile Phone No OFFICE-90915808 Alternative Phone No.

Vehicle Particulars

TOYOTA Manufacturer

COROLLA AXIO 1.5X A Model

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?

THIRD PARTY

If No, Please state action to be taken PRIVATE HIRE Vehicle Category

Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company

NO

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

5095141740 Policy Number

Cover Note Number

Driver

SEET ENG CHUAN (XUE YONGCHUAN) Name of Driver

S8313504B NRIC No 03/05/1983 Date Of Birth OUTDOOR Occupation 13/11/2003 Date Of Driving Pass

14 YEARS AND 3 MONTHS **Driving Experience** 

MALE Gender

(LOCAL) +65-83240018 Mobile Number

Fax Number

OFFICE-83240018 Contact Number

NOEMAIL EMail Address

BLK 207 SERANGOON CENTRAL

Address #07-204

550207

Postcode NO

Was driver an employee of the Insured's Company If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

## General Information of the Accident

Type Of Accident

COLLISION - ROUNDABOUT

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) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

NAME:

Passenger 1

GENDER:

: MALE

# **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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG LANE 2 OF MARINE PARADE ROUNDABOUT. SUDDENLY VEHICLE B WAS TRAVELLING ALONG LANE 1 TRYING CUT ONTO MY LANE RESULTING REAR RIGHT SIDE OF MY VEHICLE WAS DAMAGED.

#### Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

VIDEO FOOTAGE WITH DRIVER

Was there any audio recorded?

NO

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SKV9528P

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

TAY SIEW HUN

NRIC/Passport Number

S1313622Z

Contact Number

98532722

Address

Postcode

## 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 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:
  - 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.

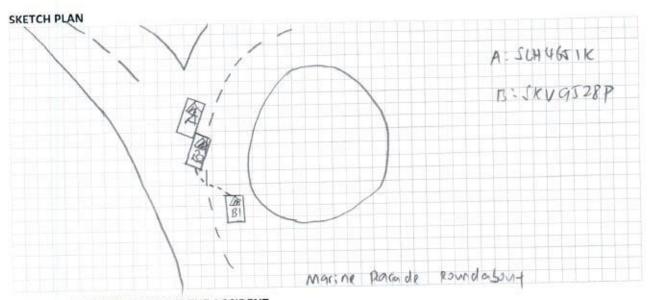
Policyholder & Spature
Date & Time:

Driver's Signature

(If driver is not the policyholder)

Reporting Centre Personnel's Sig

Name: NRIC/FIN No.:



# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

efor to state mont.		
	/	
/		

# DECLARATION

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

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

Date & Time:

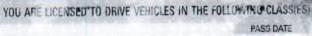
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:







NP 428A

Class 3 Motor Cars and Motor Tractors the weight of which unlades does not exceed 2500 kilograms

13 Nov 2003

NC No. S8313504B

4649098

23-10-2010

APT BLK 207 SERANGOON CENTRAL #07-204 SINGAPORE 550207

ello, NAC_PAYA_UBI_8006	501					, (	Change Lan	guage ,	Change Passwor	d + Log O
My Desktop		y Query								
Notice of Loss	Policy N	0.	C.			Date of Acc	ident	02/03/	2018 16:30	M.
	Vehicle	No.(For Motor)	SLH4651K							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5095141740	INVEST WELLNESS & SERVICES PTE. LTD.	201434387Z	GPC	drivo CLASSIC	SLH4651K	SLH4651K	24/10/2017	25/10/2018

Policy	y Information	20V N 10		Policyholder	0.0000	
5 35	5095141740	Policyholder Name	INVEST WELLNESS & SERVICE	MAIC	201434387Z	
Address	19 SENGKANG EAST AVENUE #0	1-16 AUSTVI	LLE RESIDENCES SINGAPORE 5	44808		
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N	
Policy ssue Date	17/10/2017	Effective Date	24/10/2017 00:00	Expiry Date	25/10/2018 23:59	
Third Party Excess	1500	Own damage Excess	2000	Windscreen Excess	100	
Additional Excess	0	OS Premium	0			
Outside Singapore OD Excess	2000	Outside Singapore TP Excess	1500			
Agent	TAI THONG LEE TRADING PTE L	Agent Tel.	NIL	GST Flag	Y	
Co- insurance Flag Open Policy Info	No					
Certificate Info						
Policyh	nolder Mailing Address					
Address 1	19 SENGKANG EAST AVENUE	Address 2	#01-16 AUSTVILLE RESIDEN	CE: Address 3	SINGAPORE 544808	
Address 4		Address Type	Singapore address	Post Code	544808	
Unit No.	01-16	Related Policy Number	5085925234-01			
Insure	d Object: SLH4651K					
	sements					
6:81:50:00 PG-	ce Date of Endorsement	e. 0000	ement Type Endorser	nent Status	Endorsement Co	ntent

cident MY/0084556				-		-		
ticy No.	5095141740	Vehicle No.	SLH4651K		Registration No. cyholder NRIC	- 5	01434387Z	
licyholder Name	INVEST WELLNESS & SERVICES PTE. LTD.							
south Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loa				
ntact No.(Mobile)	90915808	Contact No.(Office)	0		tact No.(Home)	-		74
ail Address		Special Remark		eCo			(ii. 9.)	
K.	® No ○Yes	TCA	® No ○Yes	eco	de Reason			
D Protection	No	NCD Entitlement(%)	0	Priv	ate Hire		es	
Accident Details								
port Date	03/03/2018 17:09	Acadent Report Within 24 firs	yes	Acc	ident Type	-	Cottision - Change	/ Cross lane
		Time of Accident hh:mm	16:30	Cou	intry of Accident	59	Singapore	
te of Accident	02/03/2018		10.30					
porting Centre		Orange Force		:108	1 No.			
ordent Location	MAKINE PARADE RD ROUNDABOUT							
Benefits								
Excess								
vn damage Excess	2,000.00	Additional Excess	0.00	901	dscreen Excess			100.00
named Driver Excess		Outside Singapore OD Excess	2,000.00					
ing Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00					
GST Registered Informa			GSY Registration Date					
T Requestered	No		GST Status Verified		No			
ST Registration No.			031 34800 74410					
diffication History								
Policyholder Mailing Ad	dress							
	19 SENGKANG BAST AVENUE	Address 2	#01-16 AUSTVILLE RESIDENCE	Ad	dress 3		SINGAPORE 544	808
Sdress 1	as demanded and exercise	Address Type	Singapore address	Por	st Code		544808	
dress 4			5085925234-01					
NE NO.	01-16	Related Policy Number	3003923234-01					
OI Driver Info			TATAL TANK AND THE					
river Name	Unnamed Driver	Driver Type	Unnamed Oriver	2020			03.005.1003	
nnamed driver Name	SEET ENG CHUAN (XUE YONGC)	Driver MRIC	583135048		ver DOB		03/05/1983	
agister Date of Driver License	13/11/2003	Driver Age	34	Dri	ving Experience		14	
ontact No.(Mobile)	83240018	Contact No.(Office)	0	Co	ntact No.(Home)		0	
	B) (4 707	THE WATER COMMENT					SINGAPORE 550	207
ddress I	BLK 207	Address 2	SERANGOON CENTRAL	AD	dress 3			
	BLK 207				dress ∌ st Code		550207	
ddress I ddress A		Address Type	SERANGOON CENTRAL Singapore address					
ddress A Init No.	07-204	Address Type		Pa	st Code			
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ddreos 4 Init No. Ioes he own a Singapore egistared car?	07-204	Address Type		Pa	st Code			
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torrect A not No.  ose he own a Singapore segstared car? sclaration reachayser or Blood Test eaching?  odification History  Claim 001 00-MX  Nex  Nex  Main Type *  ontact No. (Mobile) mail Address	07-204  Yes ® No  0 mg  (O0-MK  90915808  investweliness sg@gmail.com	Andress Type  Driver Vehicle No.  Any Injury?  Insured Name	Singapore address  () Yes (2) No  () INVEST WELLNESS & SERVICES	Poi Dri	st Code  tver Insurer Comp  sured NRIC  insured NRIC  insured No. (Office)  Vericle Number	eny	550207	
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Int No.  Des he own a Singapore registered car?  Internation  Readmayser or Blood Test  Readmay  Claim 001 00-HX  Nex  Nex  Main Type *  Ontact No. (Modile)  main Address  laim Description  referred Workshop Contact	07-204  Yes ® No  0 mg  (O0-MK  90915808  investweliness sg@gmail.com	Andress Type Driver Vehicle No.  Any injury?  Insured Name Contact No. (Home)	Singapore address  ○ Yes  No  INVEST WELLNESS & SERVICES	Poi Dri	st Code  tver Insurer Comp  sured NRIC  insured NRIC  insured No. (Office)  Vericle Number	eny	201434387Z SKV9528P	
torrect A not No.  ose he own a Singapore registered Car?  iclaration reachayser or Blood Test eaching?  Claim 001 00-HX  Nes  Nam Type *  omact No. (Mobile) mail Address tam Description referred Workshop Contact	07-204  Yes ® No  0 mg  (O0-MK  90915808  investweliness sg@gmail.com	Any injury?  Insured Name Contact No. (Forme) Of Vehicle Number	Singapore address  ○ Yes  No  INVEST WELLNESS & SERVICES INIL  SUH4651X	Poi Dri	st Code  tver Insurer Comp  sured NRIC  insured NRIC  insured No. (Office)  Vericle Number	eny	201434387Z SKV9528P	
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Attachment	Upisaded By/Date	Category	Y	u/gency	Description	Sent? Action (CO)
201	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma r 2018 17:13	NRIC/ Driving Ucense		Normal	NRIC/ Driving License 2018:3-3	Edit
60	NAC_PAYA_UBI_BOOGOI( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma r 2018 17:13	SAS		Normal	SAS 2018-3-3	Edit
	NAC_PAYA_UBI_BD0601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma r 2018 17:13	Photos		Normal	Photos 2018-3-3	Edit
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma , 2018 17:13	Photos		Normal	Photos 2018-3-3	Edit
123	NAC_PAYA_UBI_B00601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma ; 2018 17:13	Photos		Normal	Photos 2018-3-3	Edit
	NAC_PAYA_LIB1_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma r 2018 17:13	Photos		Normal	Photos 2018-3-3	Kats
8/4	NAC_PAYA_UBI_800601{ NATIONAL ASSESSMENT CENTRE SERVICES} on 03 Ma r 2018 17:13	Photos		Normal	Photos 2018-3-3	Edit
	NAC_PAYA_UBI_B00601( NAT)CNIAL ASSESSMENT CENTRE SERVICES) on 03 Ma + 2018 17:12	Photos		Normal	Photos 2018-3-3	Edit
V	NAC_PAYA_UB1_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma + 2018 17:12	Photos		Normal	Photos 2018-3-3	Edit
2	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma + 2018 17:32	Photos		Normal	Photos 2018-3-3	Edit
W.	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma + 2018 17:12	Photos		Normali	Photos 2018-3-3	Edit
1	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma r 2018 17:12	Photos		Normal	Photos 2016-3-3	Edit
	NAC_DAYA_UB[_R00601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma r 2018 17:12	Photos.		Normal	Photos 2018-3-3	Edit
	NAC_PAYA_UBI_B00601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma r 2018 17:12	Photos		Normal	Photos 2018-3-3	Edit
	NAC_PAYA_URL_BD0601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma r 2018 17:12	Photos		Normal	Photos 2018-3-3	Edit
10	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mg / 2018.17:12	Photos		Normal	Photos 2018-3-3	Edit
	NAC_PAYA_UBI_B00601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma + 2018 17:12	Photos		Normal	Protos 2018-3-3	Edit
U	NAC_PAYA_UB1_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma + 2018 17:12	Photos		Normal	Photos 2018-3-3	Edit
1254 133	NAC_PAYA_USI_B00601( NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Ma y 2018 17:12	Photos		Normat	Photos 2018-2-2	Edit
▽ Video List				Ŷ	Source	Action