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SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly 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 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)

Lunderstand, 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)
 - (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

or complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

(If driver is not the policyholder)

Date & Time:

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

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ON 08/03/2018 AT ABOUT 18:10 HRS I WAS TRAVALLING
Alvalor PIK & FUNKR 76K SLIP ROAD Croinely Towards
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SLOW SPECED ALL COR TRAVEL BUMPER & BUMPER.
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DECLARATION

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

Date & Tire: 5330

Driver's Signature (If driver is not the policyholder)

Date & Time: 9/3/1/

NRIC/FIN No.:

Reporting Centre Personnel's Signature
Name: Lof ZI WAHAD

e9/03/2018

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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 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 ledgement 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

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2000年,在日本中的中央工作的	ACCIDENT STATEMENT
Date Of Report	09/03/2018 18:48
Date Of Accident	08/03/2018 08:10
Exact Location Of Accident	PIE SLIP ROAD TURNING INTO LORNIE ROAD
Country/State of Loss	SINGAPORE
Control of the Contro	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLE8034G
Insured/Policyholder	
Name Of Registered Owner	TKM AGENCY
Co Reg No	53308404X
Email Address	NEOSAYTHIAM@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-90662733
Alternative Phone No.	OFFICE-90662733
Vehicle Particulars	
Manufacturer	TOYOTA
Model	CAMRY
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	17-M1001786-R00
Cover Note Number	
Driver	
Name of Driver	NEO SAY THIAM@CHENG KENG HENG
NRIC No	S1381986F
Date Of Birth	24/07/1959
Occupation	OUTDOOR
Date Of Driving Pass	18/12/1979
Driving Experience	38 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90662733
Fax Number	

OTHERS-90662733

NEOSAYTHIAM@HOTMAIL.COM

Address

BLK 210 CHOA CHU KANG CENTRAL

#02-156

Postcode

680210

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

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

NO

ambulance?

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)

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?

YES

Remarks/ Reasons:

WAS NOT SAFE IN THE CD CARD

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLC3836

Vehicle Make/Model/Colour

HONDA VEZEL

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

ACCIDENT STATEMENT

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ACCIDENT DATE OF 1 03 201 100 MMMY	YY), TIME: (. / O) (HH:MM)
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C)ADDRESS: (IV 210 # 62-156 CA	on the king contract
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: email = .neusaythiam@ :fax = .67665655 VIORO

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1381986F





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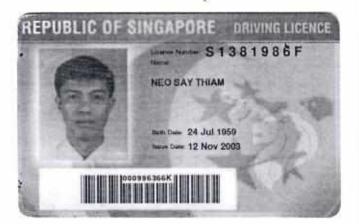
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CHINESE

24-07-1959 M

SINGAPORE







15-10-1994

APT BLK 210 CHOA CHU KANG CENTRAL #02-156 SINGAPORE 2368

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

PASS DATE

Chann D

Motor Cars and Motor Tractors the weight of which unleden does not exceed 2500 kilograms Heavy Motor Cers and Motor Tractors the

weight of which unladen exceeds 2500 kilograms

18 Dec 1979

13 May 1981

NP 428A



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India Moree Group

TOKIOMARIN INSURANCE GROUP FORM MXI II

Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: 17-M1001786-R00 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle

SLE8034G

Chassis No.: MR053BK4007026733

2. Name of Policyholder

TKM AGENCY

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

07/12/2017

4. Date of Expiry of Insurance

06/12/2018

5. Persons or Class of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their permission.

Any other person who is driving on the hirer's order or with his/ their permission.

* Provided that the Person driving is permitted in accordance with the licensing or other 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage

6. Limitations as to use*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled
- a Limitations rendered (noperative 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

Insurance Plan:

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marme Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189)

ADDITIONAL INFORMATION

Comprehensive Approved Workshop Plan

Limit for total loss or theft: Policy Excess:

Prevailing Market Value

Own Damage Claims Excess-Third Party (Sect II)

SGD 2,000 SGD 2,000

Financial Interest:

Windscreen Excess
LAKE VIEW CREDIT PIE LTD SGD 100

Tokio Marine Insurance Singapore Ltd.

Account: 1023DDA

Authorised Signature

User Name: Tay Put Long Katherine -

Printed 05/12/2017