VATTONAL Assessmen	-	S'erricas. 1		mun y w o for	11	
Dute In: 26 63 2018	18,00	100 desertation		Date & Timo Complete	d ·	Done by
REINO: NBA10471800	5629/4	SAS c-Ming	(p) 4		-	
Veli No: SGF, 9417 F	7	B. moll (white sh	ut Victim)		1	
0.0.A. 24/08/2018	17:30	f-Motor Claim	2011 A. C.		+-	
OD (TP) Reporting Only		I-Miotor NVO	(14/1411 00 3 Hz),	1° (102):	-	
	+ 7" +	I-Plioto Uploo	dod	,		many in
TP Insurer:		Assessment/Sur	deh geholf		7.00	
		Ass4 Report by	Pax/Hand to	Owner/Whip		**************************************
reletted Mitch IING Steld U. M.Kab	10011	1		T+11	FEX	
P Pantlevikrin Yen	NOI SGV	1.4205 R	, INC ()/Hon-MO()	7	
O wner / Driver: (Teli	-/) -
Polley No: () Porto	od: (, ,)	Cover Typel (1
Confirmed by 1 '(V	Dalei	Timer)
Insured/Driver Clubillity: (%) [N	ole-Bil Stani (W	O): N: 0-20	% P: 21.79% P: 3	0-100%	
Year of Registration: (The second of the Publisher Street, St)/HO()		
The state of the s	ding (\$1,00)	0 () / \$2,000 (ELATINES.	
en end Remirkus & Williams				hedrakan sabada ((101,101,40	M
) Walk-In Chytomat i Gusto	omers inform	nation strioty Con	ndenilal & SV	idly NO rater of repair	er,	
) Total Loss Case to e-m						
	Latin Print Circle	ONGORILI	1			
Orive-in ()/ Towed-in () Inyoice		Q() T	Wing Co. (,	-, , ,
Orlive-In ()/ Towed-In () Invoice:		O()jT	Wing Coll	700000	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7
Orlive-in () / Towed-in (emaris No. 1, 11, 10, 10, 11, 11, 11, 11, 11, 11,) Invoice: 8 00161	YES()/ N	0 () T	owing Co.(48 P3 E) (Done by
orive-in ()/Towed-in (emoris/15/14/14/14/15/16/16/16/16/16/16/16/16/16/16/16/16/16/) Invoice 8 0016) 		O() TO) (ADone by)
Orlive-In () / Tovved-In (emorishis I, HNG Boil (hemoris) Apply for Transport Allowance) QC Check / Poxi Repair Inappo) Involce 	YES()/N	O() T		9, 516	(Done by
Prive-in ()/ Towed-in (morising fill RG boiline: 676 Apply for Transport Allowance QC Check/Post Repair Inspect Uplood Reservey Photo (Ropai) Involce 	YES()/N	O()1T(Done by
Prive-in ()/ Towed-in (morising fill RG boiline: 676 Apply for Transport Allowance QC Check/Post Repair Inspect Uplood Reservey Photo (Ropai) Involce 	YES()/N	O() T			(Doneby
Prive-in ()/ Towed-in (morising in Reporting SER Apply for Transport Allowance QC Check/Post Report Inspect Uplood Reservey Photo (Repair) Involce 	YES()/N	O() T(MAJASAN C
Prive-In ()/ Towed-In (Priority) Involce 	YES()/N	O() TO			
Prive-In ()/ Towed-In (Priority) Involce 8	YES()/N	O() T			
Prive-In ()/ Towed-In (Priority) Involce 8	YES()/N	O() T			
Prive-In ()/ Towed-In (Priority ()/ Towed-I) Involce 8	YES()/N	O() TO			
Prive-In ()/ Towed-In (Priority) Involce 8	YES()/N				Townson Con
Prive-In ()/ Towed-In (Priority III ()/ Towed-In (Priority III ()/ Towed-In (Priority III ()/ Towed-In (Priority I ()/ T) Involce 8	YES()/N		DITEUSH GREEVIL		Townson Con
Prive-In ()/ Towed-In (Priority) Involce 8	YES()/N	In value Fig.	DITEURICATION CARRENT	(C (44))	
Prive-In ()/ Towed-In (Priority) Involce 8	YES()/N	Involot PGC I) AR Assidan J) DA Damage J) TF Towler L) FT Fellow 7	DITSUCH GAT (VIS) Apperling (JSO)) Apperling (JSO))	(C (H))	SSAINS (JAN)
Prive-In () / Towed-In (Prive-In () / Tow) Involce 8	YES()/N	In value Fing I) ARI Assidan I) DAI Damaji I) TF Towing I) PT Fillowing	Dirayon Gracultan	(C (H)) 1001 1011 133	TANGET LANGE
Prive-In () / Towed-In (Emorissis I M NG Boiline : 676 Apply for Transford Allowance OC Check / Poxi Repair Inspect Uplood Reservey Photo (Repair Injury I Test Time Action Ver/Ovviters Intect No:) Involce 8	YES()/N	Involce Fice I) ARIAssidan I) DAI Damin A) PTIFILISH I) PTIFILISH Estatamin () TRI Residan	CAPATURE CARPER DITSUCH GREEN STATE Reporting (JOO); Alliumical (S100); If if higher Survey (Rustures) risus & Survey (Rustures)	(C (H)) 1001(1011(113) 1100)	SAMPLE TO THE SAMPLE OF THE SA
Orlve-In ()/ Toved-In (emorism 1.16 NG Boilline 1676 Apply for Transford Allowance) QC Check/ Poxi Repair Inspect (Uplood Reservey Photo (Repair (I)/Ury I Ic Time Action Ver/Ovviers nicel No:) Involce 8	YES()/N	Involve Fig. I) ARI Assiding I) DAI Damage I) PT (Fellow) Estimate I) TR (Nellow) I) N (Nellow)	Data Ush Graculta Caraca (350) Antonica (3100) Antonica (3100) Antonica (3100) Antonica (3100)	(C (H)) 1001 1011 133	SAME AND A LANGE
Prive-In ()/ Towed-In (Priority of Apply for Transport Allowance Apply for Transport Allowance QC Check/Post Repair Inspect Upload Resurvey Photo (Ropair In/ury I Institute Actions Ver/Ovviers Insect No: I) Invoice	YES()/N	Invites Pas I) AR Assistant I) DA Daving I) Tr Trillent I) PT Vallent Estation I) TR Revision I) NT Callett I) NTUC Adell QUI	DITAUGH GAT CAMPING ADMINISTRATION OF THE STATE OF THE S	(C (H)) 1(0/1) 1(0/1) 1(0/1) 1(1) 1(1) 1(1) 1(1)	MANAGE VARIA
Orlive-In ()/ Towed-In (emacissis III NG Book Inc. 676 Apply for Transport Allowance) QC Check/ Post Repair Inspect) Upload Reservey Photo (Ropal In/ury I In Inc. The Sections In Inc. Union Sections In Inc. The Portion In) Invoice	YES()/N	Involot PGC 1) AR Assidan 2) DA Damaja 3) TF I Tallewit 1) PT I Vellawit Establishin 6) TR Residan 7) NI Victor DA 1) NTUC Adell 9117 *NJ: Courses	DITSUCH GAT EXIST I ASSOCIATE (STORY) ASSOCIATE ((C (H)) 1001 1011 1111 1111	TANGE VAN
Prive-In ()/ Towed-In (Priority of Apply for Transport Allowance Apply for Transport Allowance QC Check/Post Repair Inspect Upload Resurvey Photo (Ropair In/ury I Institute Actions Ver/Oviters Institute Actions Checked by (Engi-In-Charge) Checked by (Engi-In-Charge)) Invoice	YES()/N	INTERNATION OF THE PROPERTY OF	DITAUGH GAT CONTAINS INSPECTOR (JSO)) ALLIUM CL (STOO)) Intern Survey Report Survey RESULT DO Date (Wallo) 1000 + 5MRT Survey 201/17pl Allowanie Jacobina Contains Jacobina Co	(C (H)) 1(0/1) 1(0/1) 1(1) 1(1) 1(1) 1(1)	TOSANINA STATE OF THE PROPERTY
Drive-in ()/ Toved-in (emaris : I. M. N. G. Bolline : 676) Apply for Transport Allowance) QC Check/ Post Repair Inspect) Uplood Reservey Photo (Repair /////////////// // TURS Action ///////////// Uman as Reserved in France Ver/Owners) Invoice	YES()/N	Involve Fig. Involve Fig. I) ARIAssidin I) DAI Dampt I) PTI Fallow T Estalamine I) TRI Null pa I) NTUC Adell OIL 'NI Couries 'NI Couries 'NI Foll IV INCOVO	DITATOR GREEN DITATOR GREEN DITATOR GREEN NEPONA (330); AIRLINE (3100); In the Survey (Resurvey) PLICE INTO Only (Wall 10); The Survey PART	(C (H9) 1011 (1111) (1111 (1111 (1111) (1	MANAS NEW TOP TO THE PARTY OF T

...

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.
- 3. Information provided must be as <u>truthful and accurate</u> 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.

- 5. 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.

SHAPE THE STATE OF THE STATE OF	ACCIDENT STATEMENT		
Date Of Report	26/03/2018 18:00		
Date Of Accident	24/03/2018 17:30		
Exact Location Of Accident	AYE TOWARDS CHANGI		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SGF9417H		
Insured/Policyholder			
Name Of Registered Owner	AZMAN BIN MOHD ARIFFIN		
NRIC No	S1123925J		
Email Address	LOKMANABDULLAZI@YAHOO.COM.SG		
Mobile Phone No	(LOCAL) +65-96521023		
Alternative Phone No	OTHERS-90061912		
Vehicle Particulars			
Manufacturer	KIA		
Model	CERATO		
Exact Purpose for which vehicle was being use time of accident	ed at PRIVATE USE		
Are you claiming under your own insurance pol for repair to your vehicle?	licy NO		
If No, Please state action to be taken	THIRD PARTY		
Vehicle Category	PRIVATE CAR		
Insurance Company			
Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	MT/00298233		
Cover Note Number			
Driver			
Name of Driver	LOKMAN BIN ABDUL LAZI		
NRIC No	S8238119H		
Date Of Birth	04/11/1982		
Occupation	INDOOR		
Date Of Driving Pass	17/08/2006		
Driving Experience	11 YEARS AND 7 MONTHS		
Gender	MALE		
Mobile Number	(LOCAL) +65-96521023		
Fax Number			

OTHERS-90061912

LOKMANABDULLAZI@YAHOO.COM.SG

Address

BLK 20 TEBAN GARDENS ROAD

Postcode

600020

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

CHAIN COLLISION

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?

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)

Passenger 1

NAME:

: WIFE

GENDER:

: FEMALE

Passenger 2

NAME:

: DAUGHTER

GENDER:

: FEMALE

Passenger 3

NAME:

: SON

GENDER:

: MALE

Passenger 4

NAME:

: SON

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

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

SGV4205B

Vehicle Make/Model/Colour

TOYOTA AXIO

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

TAN CHEE KIONG

NRIC/Passport Number

S1479413A

Contact Number

98244086

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

EY1292B

Vehicle Make/Model/Colour

HONDA CIVIC

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

TAN JUN KAI

NRIC/Passport Number

S9012193F

Contact Number

97368494

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.
- 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.
- 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
- 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: 26.3-18

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

| Political Control of Contr

KETCH PLAN	
	Ayre Lowaress CHANGI
₩ W	
→ N	A - SG F9417H
→ -	B - SGV 4205B C - EY 1292B C B A
ESCRIBE CIRCU	JMSTANCES OF THE ACCIDENT
SPECIAL PROPERTY OF THE PROPER	NOTIFICATION ASSESSMENT THAN HOLD AND AND AND AND AND AND AND AND AND AN
	to down and stop, the Car behind be slow down and
Stop	but the 3rd car came and bong on to testhe second
Car a	and the second car was pushed forward on to me.

DECLARATION

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

Driver's Signature

(If driver is not the policyholder)

Date & Time:

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

Policyholder's Signature Date & Time:

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder endor the Authorised Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material fects may allow insurance companies to
- 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.
- a. This report will be forwarded by the insurers of 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 by made available upon application by interested parties.
- 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.

ACCIDENT STATEMENT

Date Of Report

Date Of Accident / Time 243 18 S30 pm Exact Location Of Accident Dyf toward Changi

Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number

56F9417H

Insured/Policyholder

Name Of Registered Owner / communy Azman bin Mohd Ariffan

NRIG NO ICO. REG NO. SIIZ3925J

Email Address

Mobile Phone No 96521023

Alternative Phone No.

Vehicle Particulars

Manufacturer Lica

Model Cerato.

Exact Purpose for which vehicle was being used Private use. at time of accident

Are you claiming under your own insurance policy NO

If No, Please state action to be taken

Vehicle Category Saloon

Insurance Company

Name of Insurance Company ATEC direct a Sice

Type Of Coverage Car Comprehensive

Fleet Policy

Policy Number MT/00298233

Cover Note Number

Driver

Name of Driver Lokman Bin Abdul Lazi

NRICNO SEZZETTEH

Date Of Birth 04 11 1482

Occupation Assistant Engineer

Date Of Driving Pass 17 Aug 2006.

Driving Experience 12 Years

Gender Male

Mobile Number 90061912

Fax Number

Contact Number

EMail Address lokmanasdullari @ yahoo com 59

REPUBLIC OF SINGAPORE





Name

LOKMAN BIN ABDUL LAZI



MALAY
Cate of birth
0.4-11-1982
Country of birth
SINGAPORE



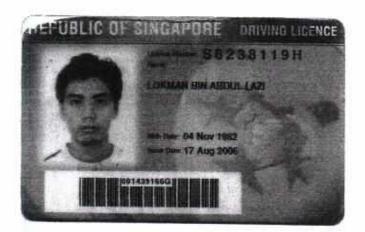
4845807

MRIC No. SB238119H

Date of seue 08-03-2013

Attense

APT BLK 20 TEBAN GARDENS ROAD #11-109 SINGAPORE 600020



Class 3 Motor Class < SONIKy with <7 passengers, exclusive 17 Aug 2001 of the driver; and other motor vehicles < 2500kg

3



Contact us at

Hotline: (65) 6532 2888

E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.

Type of Coverage / Driver Plan

Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No.

SGF9417H

Chassis No.

2) Name of Policy Holder

KNAFE222365282258

AZMAN B MOHD ARIFFIN

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act

27/04/2016 00:00

4) Date/Time of Expiry of Insurance

: 26/04/2017 23:59

- 5) Persons or Classes of Persons Entitled to Drive
 - (a) The Insured
 - (b) Any named person under the policy who is driving on the Insured's order or with his permission.
 - (c) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Insured's order or with his permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.

*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured

Market Value

Own Damage Excess

S\$ 600.00 (before any applicable GST)

Windscreen Excess

S\$ 100.00 (before any applicable GST)

Choice of workshop

DirectAsia approved workshops

Finance company / Hire Purchase

Main driver

AZMAN B MOHD ARIFFIN

Named driver

Important Note: This policy does not cover drivers below the age of 30 and drivers who hold a valid driving licence of less than 2 years with the exception of the named drivers above.

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 the Road Transport Act, 1987 (Malaysia).

Issued on:

22/04/2016

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer