

# NATIONAL Assessment Centre Services

Print 1/1/2009

NAH4604597

Date In: 06/09/2008 14:38  
Ref No: NHA/00118006397/4  
Veh No: GY 9905  
D.O.A: 04/09/2008 16:00  
OD / TP / Preparing Only

Job description	Date & Time Completed	Done by
3.5 e-Mailing		
E-mail (vehicle data, NCR etc)		
1-Motor Claim Form		
1-Motor W/O (Vehicle ID, etc, etc)		
1-Photo Uploaded		
Assessment/Survey Report		
Ass'l Report by Fax/Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OWI

TP Particulars: Yell No: INC ( ) / Non-INC ( )  
Owner / Drivers: Tel: ( )  
Policy No: ( ) Period: ( ) Cover Type: ( )  
Confirmed by: ( ) Date: ( )  
Insured/Driver Liability: ( ) % (Note: BIL Status (WO): NI 0.20%, PI 21.79%, PI 30.100%)  
Year of Registration: ( ) Warranty: YES ( ) / NO ( )  
Excess: (\$) Loading: \$1,000 ( ) / \$2,000 ( )

General Remarks: ( )  
( ) Work-in-Customer: Customer's information strictly Confidential & strictly NO later of repair.  
( ) Total Loss Case: 1 to e-mail Insurer URGENTLY.  
Drive-In ( ) / Towed-In ( ) Invoice: YES ( ) / NO ( ) Towing Co: ( )

Remarks: ( )  
1) Apply for Transition Allowance ( ) / Courtesy Car ( )  
2) QC Check / Post Repair Inspection ( )  
3) Upload Recovery Photo (Repair Cost > \$3000) ( )

Injury: ( )  
Date/Time: ( ) Action: ( )

Vehicle/Owner	Invoice Preparation Checklist	Amount	Notes
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Policy No:	2) DA: Damage Assessment (\$100)	INC (20)	
Assigned Person:	3) TP: Towing Fee	\$40	
	4) PT: Follow Through Survey	\$10	
	5) PT: Follow Through Survey (Recovery)	\$10	
	Total amount applied INC Date: (Wed 10 Jan 2009)		
	6) TR: Repair Allowance	\$10	
	7) NI: (24 DA + SMRT Survey	\$100	
	8) NTUC Accident Survey (\$10)		
	9) NI: (24 DA + SMRT Survey	\$100	
	10) NI: (24 DA + SMRT Survey	\$100	
	11) NI: (24 DA + SMRT Survey	\$100	
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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 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	06/04/2018 14:38
Date Of Accident	04/04/2018 16:00
Exact Location Of Accident	ALONG JALAN UNGGAS
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY994S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHUN MEE LEE
Co Reg No	07442900X
Email Address	CHUNMEELEE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92733023
Alternative Phone No	OFFICE-62782388

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 MANUAL
Exact Purpose for which vehicle was being used at time of accident	LORRY WAS PARKED
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	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DHOM110063480612
Cover Note Number	

### Driver

Name of Driver	CHEN FOON KEE
NRIC No	S2006840Z
Date Of Birth	17/01/1949
Occupation	INDOOR
Date Of Driving Pass	27/06/1966
Driving Experience	51 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92733023
Fax Number	
Contact Number	OFFICE-62782388
EMail Address	CHUNMEELEE@GMAIL.COM



Address BLK 50 TELOK BLANGAH DRIVE  
#08-90  
Postcode 100050  
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 -  
Vehicle -  
Insurance Company of Driver's Own Vehicle -

#### General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED  
Weather Conditions CLEAR  
Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO  
Number of vehicles involved in the accident 0  
Was any body injured in the Accident? NO  
Was any injured conveyed to hospital by ambulance? NO  
Was any other material or property damaged? NO  
I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
Number of Passengers (Including Driver) 0

#### Details of Police Action

Was the accident reported to the police? YES  
If Yes, Please state which Police Station  
Police Station Name QUEENSTOWN N.P.C  
Police Station Address ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE  
Police Station Contact TEL NO: 1800-4719999 - FAX NO:  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180404/2172

#### Attachment(s)

Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? NO  
Was there any audio recorded? NO

## 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.

CHUN MEE LEE

#11, 122, Bukit Merah Lane, 1

# 01-68 Singapore 031\*

tel: 2292788

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

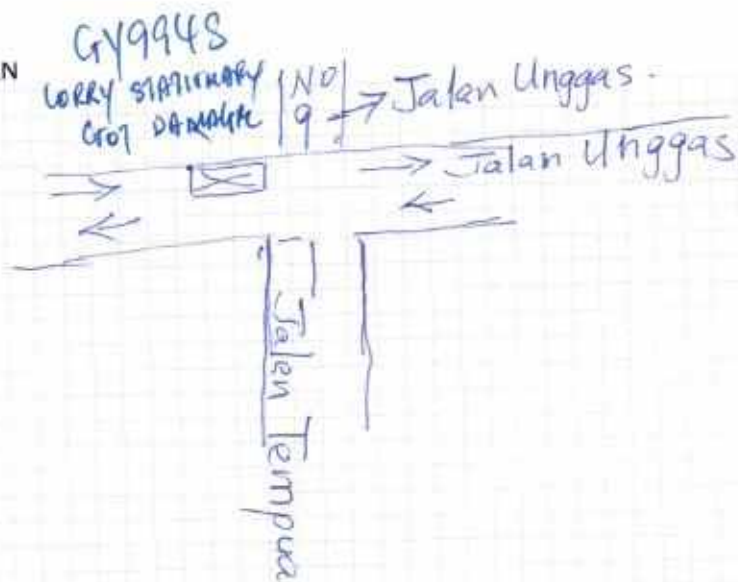
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS Refer to Police report

12080408/4172

DECLARATION

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

CHUN MEE LEE

\*112, Bukit Merah Lane 1

# 01-68 Singapore 0315

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.:

06/04/2018

Resli W...





**SINGAPORE  
POLICE FORCE**



T/20180404/2172

1 of 3

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

Report No: T/20180404/2172

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 04/04/2018 20:10	Vide Report No.: E/20180404/0101	Station Diary No.: 89
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**Informant's Particulars**

Name of Informant: CHEN FOON KEE			Address: APT BLK 50 TELOK BLANGAH DRIVE #08-90 SINGAPORE 100050	
ID Type / ID No.: NRIC NO / S2006840Z			Contact No.: Home/Office:	Mobile: 92733023
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 69	Date of Birth: 17/01/1949	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: SOLE PROPRIETOR			Driving Licence Information: Class: 3 Date of Expiry:	

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/04/2018 16:00	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 JALAN UNGGAS JALAN TEMPUA Junction of Jalan Unggas and Jalan Tempua, Outside No.9 Jalan Unggas.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GY994S	Lorry	TOYOTA	Dyna	Silver	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GY994S	UNITED OVERSEAS INSURANCE LIMITED			



**SINGAPORE  
POLICE FORCE**



T/20180404/2172

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

2 of 3

Report No. T/20180404/2172

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	CHEN FOON KEE	ID No.	S2006840Z
Related Vehicle	GY994S (Lorry)	Contact No.	92733023
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 04/04/2018 at about 3.20 p.m, I parked my silver Dyna lorry registration number GY994S at the junction of Jalan Unggas and Jalan Tempua, outside No.9 Jalan Unggas to do measurement of Bamboo blind for my customer. Upon returning at 4.00 p.m, I discovered that the driver's window was smashed, dent on the door and damaged the right side mirror. There was a black paint left on the door and red paint on the side mirror. I checked with the neighbours if any large vehicles moving around. I managed to get the vehicle that moved around earlier. It was a big lorry with registration number XD7912. I contacted the police and the Traffic Police came. The investigator is TPIO Mariah Tel: 65476433 advised to file a copy of a road traffic accident report. There is no in-car camera and no CCTVs in the estate. Reference to E/20180404/0101.



**SINGAPORE  
POLICE FORCE**



T/20180404/2172

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

3 of 3

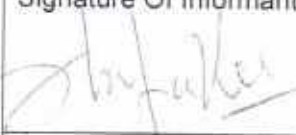
Report No. T/20180404/2172

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: D / SI MOHAMED HAIROLIZAT BIN HASSAN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 04/04/2018 20:10
Officer In Charge Of Case: TP / HRT / SI ABDUL KAREEM BIN ABDUL HAGUE Contact No.: 65476079	Classification Of Case:

Authentication Stamp  
NP168





# ACCIDENT STATEMENT

ACCIDENT DATE: 04/04/2018 (DD/MM/YYYY), TIME: 16.00 (HH:MM)

LOCATION: JALAN UNGGAS

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: G7994S  
 b) INSURANCE COMPANY: UOI  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: ☒ COMPREHENSIVE / ☒ THIRD PARTY / THIRD PARTY FIRE & THEFT  
 e) MAKE & MODEL: \_\_\_\_\_  
 f) TYPE: (SAVOON / COUPE / MPV / VAN / ☒ LORRY) MOTORCYCLE / OTHERS  
 g) VEHICLE CATEGORY: (PRIVATE / ☒ COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: LORRY WAS PARKED.  
 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: CHUN MEE LEE ~~REDACTED~~ FURNITURE (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 07442900X CONTACT: 92733023  
 c) ADDRESS: \_\_\_\_\_

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

#/10 of passengers  
(including driver)  
(0)

- DRIVER  
 a) NAME: CHEN FOON KEE (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S20062403 CONTACT: 62782388  
 c) ADDRESS: BLK 50, TELOK BLANGAH DRIVE  
408-90 3(100050) (DD/MM/YYYY) 17/01/1949

d) DATE OF BIRTH: 17/01/1949

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: \_\_\_\_\_ (YES / NO)

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / 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)

7. a) REPORTED TO POLICE (YES / NO)  
 IF YES, PLEASE STATE WHICH POLICE STATION: QUEENSTOWN NPC

## 8. THIRD PARTY VEHICLE

#/10 of passengers  
(including driver)  
( )

a) VEHICLE NUMBER: UNKNOWN MODEL: \_\_\_\_\_

b) DRIVER'S NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_

c) NRIC/FIN/PASSPORT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

#/10 of passengers  
(including driver)  
( )

a) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_

b) DRIVER'S NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_

c) NRIC/FIN/PASSPORT: \_\_\_\_\_

email: chunmeelee@gmail.com

fax: \_\_\_\_\_

video: \_\_\_\_\_

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2006840Z



CHEN FOON KEE

曾煥樞

CHINESE

Date of Birth  
17-01-1949

Country of Birth  
CHINA

Sex  
M

S2006840Z

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S2006840Z

CHEN FOON KEE

Birth Date 17 Jan 1949

Issue Date 07 Jan 2014



002263943A

0884051



NRIC No. S2006840Z



Blood Group: Date of issue

A+ 26-03-1993

Address

APT BLK 50 TELOK BLANGAH DRIVE  
#08-90  
SINGAPORE 0410

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg 27 Jun 1966

NP 428A



Licence No: S2006840Z



MEMBER OF THE UOB GROUP

United Overseas Insurance Limited

3 Anson Road  
#28-01 Springleaf Tower  
Singapore 079909

Tel: (65) 6222 7733

Fax: (65) 6327 3869 / 6327 3870

Email: ContactUs@uoi.com.sg

uoi.com.sg

Co. Reg. No. 197100152R

## 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)

**ORIGINAL**

**CERTIFICATE NO.** DHOM110063480612 **Excess:** \$0/- NOT APPLICABLE  
**Type of Cover** THIRD PARTY  
**Vehicle Number** GY994S  
**Name of Insured** CHUN MEE LEE  
**Restricted Driver(s)** NOT APPLICABLE

**Period of Insurance** 3 January 2018 to 2 January 2019

**Engine#** 5L5551289  
**Chassis#** JTFUF34Y103010009

Goods carrying - Private Type [MZ 300]

### AUTHORISED DRIVER

Any of the following

1 The Insured

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

### LIMITATIONS AS TO USE

(1) Use in connection with the Insured's business

(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business

(3) Use for social domestic and pleasure purposes

### THE POLICY DOES NOT COVER

(1) Use for hire or reward or for racing pace-making reliability trial or speed-testing

(2) Use whilst drawing a trailer except the towing of any disabled mechanically propelled vehicle

Provided that the person 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.

\*Limitation 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.

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).

UNITED OVERSEAS INSURANCE LTD

  
For the Company

FCTTS Date : 18/12/2017