

NATIONAL Assessment Center Services

MINA 418057104

Date In: 02/05/2018 19:54
 Ref No: NBA/2PC/80080557
 Veh No: SLS 91877
 D.O.A: 02/05/2018 08:20
 OD TP Reporting Only

| Job Description | Date & Time Completed | Done by |
|---------------------------------------|-----------------------|---------|
| SAS e-illing | | |
| E-mail (with photo, AIC 2111) | | |
| 1-Motor Claim Form | | |
| 1-Motor VVO (with photo, AIC 2111) | | |
| 1-Photo Uploaded | | |
| Assessment/Survey Report | | |
| Assl Report by Fax/Hand to Owner/Whop | | |

TP Insured:

Preferred Whop / INC Assign Whop / OWI ()
 TP Particulars () Yeh No: SKL 5798E INC () / Non-INC ()
 Owner / Driver () Tel: ()
 Policy No: () Period: () Cover Type: ()
 Confirmed by () Date: ()
 Insured/Driver Liability: () % (Note: BIL SUND (WO): NI: 0-20% P: 21.79% P: 30-100%)
 Year of Registration: () Warranty: YES () / NO ()
 Excess: \$ () Loading: \$1,000 () / \$2,000 ()

General Remarks ()
 () Walk-In Customer: Customer's information strictly confidential & strictly NO refer of repeller.
 () Total Loss Case: To e-mail Insurer URGENTLY.
 Drive-In () / Towed-In () Invoice: YES () / NO () Towing Co: ()

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

Injury: ()
 Date/Time: ()
 Location: ()
 Driver: ()
 Owner: ()
 Witness: ()
 Police: ()
 Hospital: ()
 Other: ()

| Human Particulars | Invoice Breakdown | Amount | Notes |
|-----------------------|---|-----------|-------|
| Driver/Owner | 1) AR: Accident Reporting (100) | | |
| Policy No: | 2) DA: Damage Assessment (100) | INC (100) | |
| Assigned Person: Whop | 3) TP: Towing Fee | \$100.00 | |
| | 4) PT: Follow Through Survey | 110 | |
| | 5) PT: Follow Through Survey (Recovery) | 110 | |
| | 6) TR: Mileage | 110 | |
| | 7) NTUC: DA + SMRT Survey | 110 | |
| | 8) NTUC: Additional Survey | | |
| | 9) NTUC: Additional Survey | | |
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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 GI 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 | 02/05/2018 19:54 |
| Date Of Accident | 02/05/2018 08:20 |
| Exact Location Of Accident | EXIT 14 ECP TOWARDS MCE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---|
| Vehicle Registration Number | SLS9187T |
| Insured/Policyholder | |
| Name Of Registered Owner | PAUL TAN SIANG LOK (PAUL CHEN SHUANGLE) |
| NRIC No | S7724906J |
| Email Address | PAULSTAN@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-88222354 |
| Alternative Phone No | OTHERS-88222354 |

Vehicle Particulars

| | |
|--|----------------------|
| Manufacturer | TOYOTA |
| Model | PRIUS-1.5 HYBRID (A) |
| Exact Purpose for which vehicle was being used at time of accident | COMMUTE TO WORK |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | THIRD PARTY |
| Vehicle Category | PRIVATE CAR |

Insurance Company

| | |
|---------------------------|----------------------|
| Name of Insurance Company | LONPAC INSURANCE BHD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | Z17VP05016249 |
| Cover Note Number | |

Driver

| | |
|----------------------|---|
| Name of Driver | PAUL TAN SIANG LOK (PAUL CHEN SHUANGLE) |
| NRIC No | S7724906J |
| Date Of Birth | 10/09/1977 |
| Occupation | INDOOR |
| Date Of Driving Pass | 22/09/1997 |
| Driving Experience | 20 YEARS AND 7 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-88222354 |
| Fax Number | |
| Contact Number | OTHERS-88222354 |
| Email Address | PAULSTAN@GMAIL.COM |

| | |
|---|----------------------------------|
| Address | BLK 135 SIMEI STREET 1 #11-64 |
| Postcode | 520135 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| 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? | YES |
| 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 | SKL5798E |
| Vehicle Make/Model/Colour | BMW |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | YAN XUE XIAN |
| NRIC/Passport Number | S2771587G |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

DETAILS OF INJURED PERSON 1

| | |
|------|---|
| Name | PAUL TAN SIANG LOK (PAUL CHEN SHUANGLE) |
|------|---|

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

SLS9187T

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

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: 21/5/2018
16:55 PM

Driver's Signature

(If driver is not the policyholder)
Date & Time:

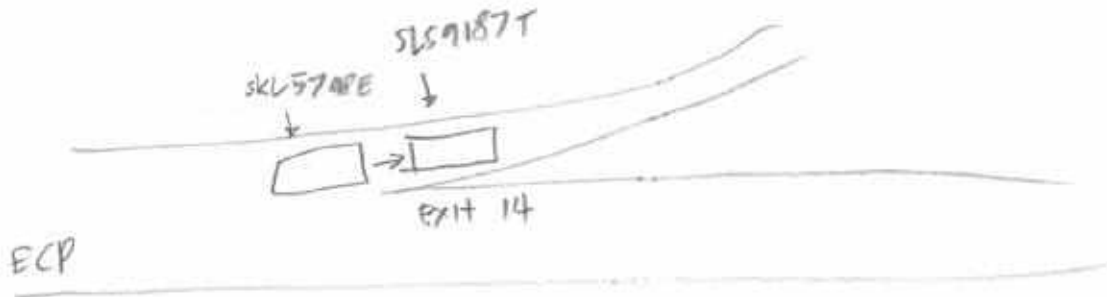


Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The accident occurred at 8:19am at ~~the~~ exit 14 of the ECP going towards the NICE. The vehicles in front of me came to a stop at exit ~~14~~ forcing me to stop my vehicle as well. The vehicle driving behind me was not able to stop in time and rear-ended my vehicle. I did not realise that the Bmw driving behind me was going to collide with me and did brace myself from impact causing my neck to be whiplashed upon impact. There was damage to the front end of his car and to the rear section of mine.

DECLARATION

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

[Signature]

Policyholder's Signature

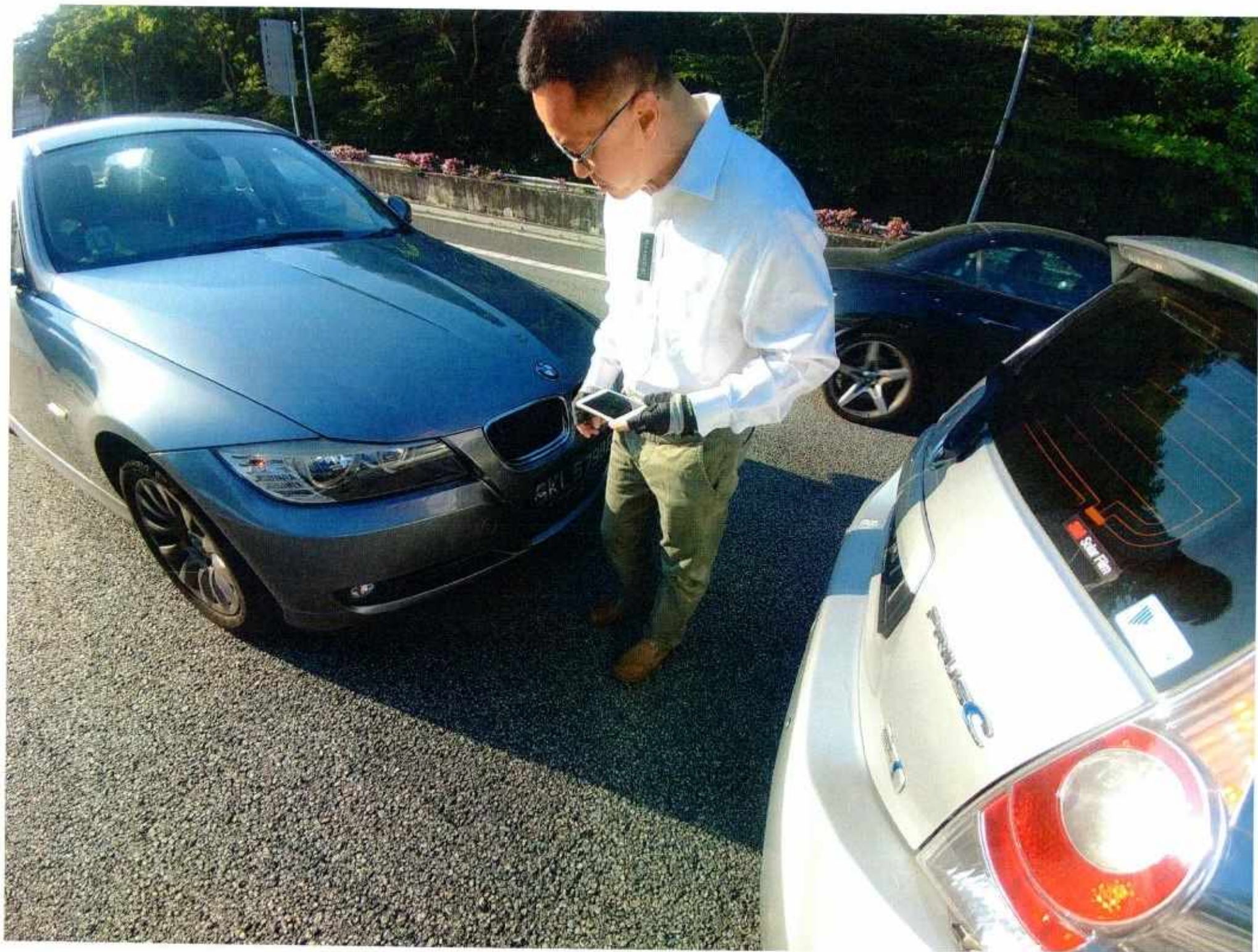
Date & Time: 2/5/2018
16:55pm

Driver's Signature

(If driver is not the policyholder)
Date & Time:

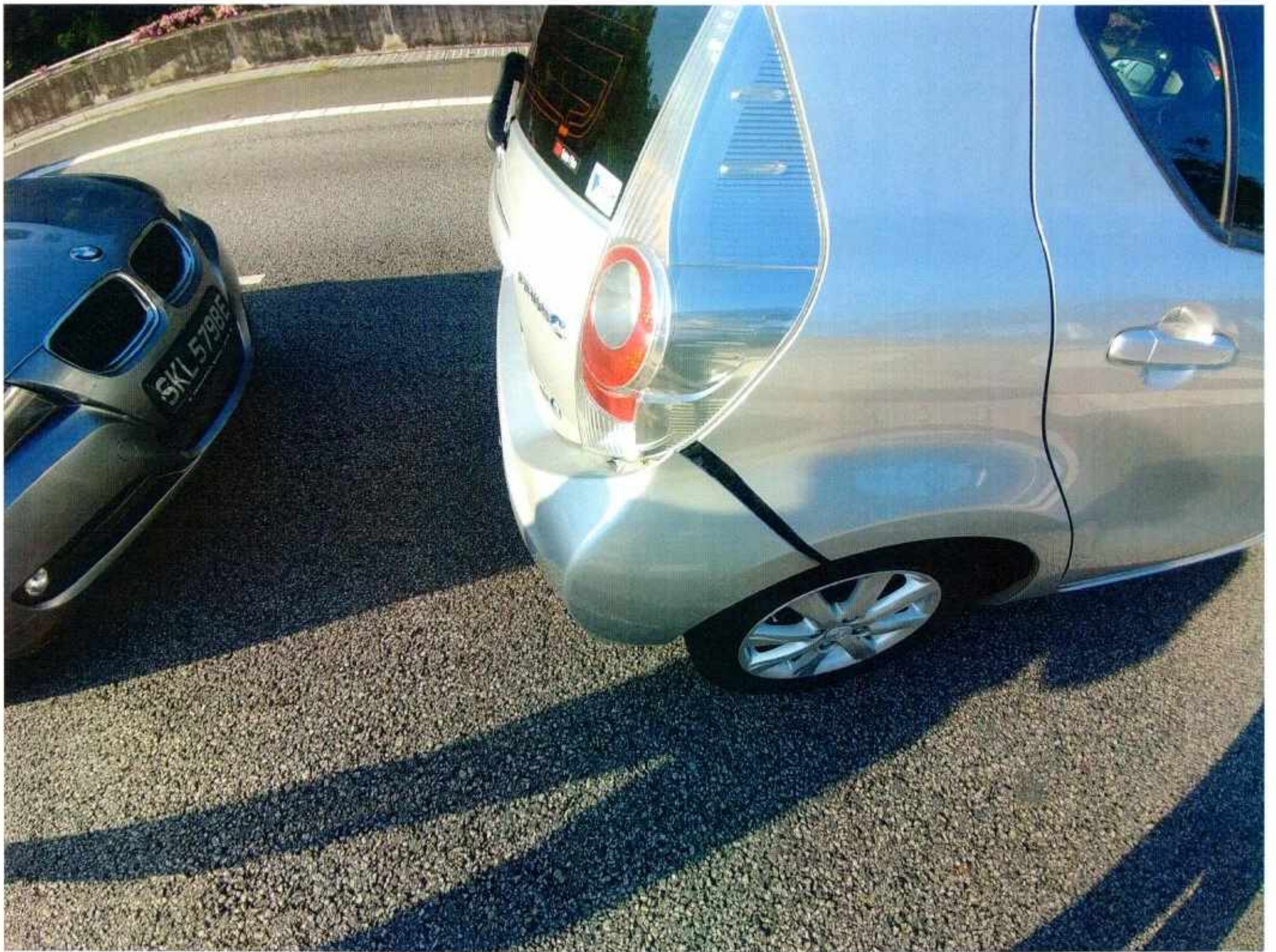
Reporting Centre Personnel's Signature

Name: *[Signature]*
NRIC/FIN No: *[Signature]*















Liberty
Insurance



Liberty Insurance Pte Ltd.
Registration no. T04002791D
51 Cecil Street,
#03-00 Liberty House
Singapore 069428
Tel: (65) 6221 9611 Fax: (65) 6205 0000
Website: <http://www.libertyinsurance.com.sg>

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1990
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

| Certificate No | SD17V12013 /NPC2 /R00 |
|--|-----------------------|
| Form | MX1 |
| Date of Issue | 24-OCT-2017 |
| 1. Index Mark and Registration No. of Vehicle: | SKL5798E |
| 2. Chassis number of Vehicle: | WBAPF72000A143377 |
| 3. Name of Policyholder: | YAN XUE XIAN |
| 4. Effective date of Commencement of Insurance for the purposes of the Act: | 29-OCT-2017 00:00 AM |
| 5. Date of Expiry of Insurance: | 28-OCT-2019 23:59 PM |
| 6. Persons or Classes of Persons entitled to drive*: | |
| A) The Policyholder, | |
| B) Any other person who is driving on the Policyholder's order | |
| C) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
| D) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
| E) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
| F) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
| G) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
| H) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
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| V) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
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| X) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
| Y) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |
| Z) Any other person who is permitted in accordance with the provisions of the Act and is not disqualified by order of a Court of law | |

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number: **S 2771587 G**

Name:

YAN XUEXIAN

Birth Date: **12 Jun 1964**

Issue Date: **12 Dec 2015**



**SG
50**

ACCIDENT STATEMENT

ACCIDENT DATE: 02/05/2019 (DD/MM/YYYY), TIME: 08:19 (HH:MM)

LOCATION: Exit 14 ECP towards MCE

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLS9187T
b) INSURANCE COMPANY: LONGAC INSURANCE BHD
c) POLICY NUMBER: 217VP05016249
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: TOYOTA PRIUS HYBRID 1.5
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS) HATCHBACK-5DR
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: commute to work
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: Paul Tan Siang Lok (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S77249065 CONTACT: 98222354
c) ADDRESS: BK 135 Simei St 1 #11-64 Singapore 520135

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

*d) DATE OF BIRTH: 10/09/1977 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 22/9/1997

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/ NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: self

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO) - NOT SURE - SELF WHIPLASH POSSIBLE NECK INJURY

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

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKL5790E MODEL: BMW
b) DRIVER'S NAME: XAN XUE XIAN
c) NRIC/FIN/PASSPORT: S27715874 CONTACT: _____

9. THIRD PARTY VEHICLE

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

Email = paulsltan@gmail.com

fax = _____

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7724906J



Name

PAUL TAN SIANG LOK

Race

CHINESE

Date of birth

10-09-1977

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7724906J

Name

PAUL TAN SIANG LOK
(PAUL CHEN SHUANGLE)

Birth Date: 10 Sep 1977

Issue Date: 05 Jan 2004



1001075163E

4277480



NRIC No: S7724906J



Date of issue

09-09-2006

APT BLK 135 SIMEI STREET 1 #11-84
SINGAPORE 520135

NRIC No: S7724906J

Date: 06/08/2016

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

PASS DATE

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

22 Sep 1997

NP 426A



Licence No: S7724906J

**LONPAC INSURANCE BHD (S98FC5635C)**

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 189555.
Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F8-0005635-C

MX1

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE)
ROAD TRANSPORT ACT 1987 (MALAYSIA).
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1969 (MALAYSIA).

Certificate No. : Z17VP05016249

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number TOYOTA PRIUS HYBRID 1.5
- SLS9187T
2. Name of Policy Holder PAUL TAN SIANG LOK
3. Effective Date of the Commencement of Insurance for the purpose of the Act 24/11/2017
4. Date of Expiry of the Insurance 23/11/2018
5. Persons or Classes of Persons entitled to drive
(A) THE POLICYHOLDER (B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS/HER 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.
6. Limitations as to use
USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

Excess : S\$ 0.00 (SECTION 1) INSURED / NAMED DRIVERS
S\$ 1,000.00 (SECTION 1) UNNAMED DRIVERS
S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS
S\$ 100.00 WINDSCREEN EXCESS

Condition : ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS OR DISTRIBUTOR-OWNED MOTOR WORKSHOP

* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

H.P. Owner : TOKYO CENTURY LEASING (SINGAPORE) PTE LTD

CHIEF EXECUTIVE
(Singapore Branch)User ID: WLPHANG
Date Issued: 24/11/2017