

Date In	23/5/18 13:33	Job description	Date & Time Completed	Done by
Ref No	NA/EA2 180093671h4	SAS e-filing		
Veh No	GBF 5893 B	E-mail (within 3hrs, APC 2hrs)		
D.O.A	22/5/18 08:20	i-Motor Claim Form		
QD	① Reporting Only	i-Motor W/O (within OD 2hrs, TP 4hrs)		
		i-Photo Uploaded		
TP Insurer		Assessment/Survey Report		
		Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

F8C 9224Y.

INC (

) / Non-INC (

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured/Driver Liability: ( %) [Note-Est Status (WO): N: 0-20%; P: 21-79% F: 80-100%]

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: (\$) Loading: \$1,000 ( ) / \$2,000 ( )

## General Remarks:-

( ) Walk-In Customer: Customer's information strictly Confidential &amp; Strictly NO refer of repairer.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co. ( )

## Remarks:-

(INC hotline: 6788 6616)

Date &amp; Time Completed

Done by

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo [Repair Cost &gt; \$3000] ( )

## Injury:

Date/Time	Actions

	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
		1st Bill	Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services -		
	QJ*:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Contribution \$5		
	TP (N11) - TP (Non INC) against INC \$20		
	9) N12: Idac Mobile \$10		
	Invoice date / Fee Charged		
	Invoice date / Fee Charged		

## 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	23/05/2018 13:33
Date Of Accident	22/05/2018 08:20
Exact Location Of Accident	ALONG DUNEARN RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF5893B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	FASTREK COURIER PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98706436

### Vehicle Particulars

Manufacturer	NISSAN
Model	NV350
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPHQ17-006943
Cover Note Number	-

### Driver

Name of Driver	TAN POH HENG (CHEN BAOXING)
NRIC No	S7518806D
Date Of Birth	19/06/1975
Occupation	OUTDOOR
Date Of Driving Pass	21/09/2005
Driving Experience	12 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98706436
Fax Number	
Contact Number	
EMail Address	NOEMAIL



Address	BLK 128 MARSILING RISE #07-268
Postcode	730128
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	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by 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)	2
Passenger 1	NAME: ; ZUBAIDAH BTE JUBANC
	GENDER: ; FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JOO CHIAT NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: 267 ONAN ROAD , POSTCODE: 424773 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-3459999 - FAX NO: 64474181
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBC9224Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
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.
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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.



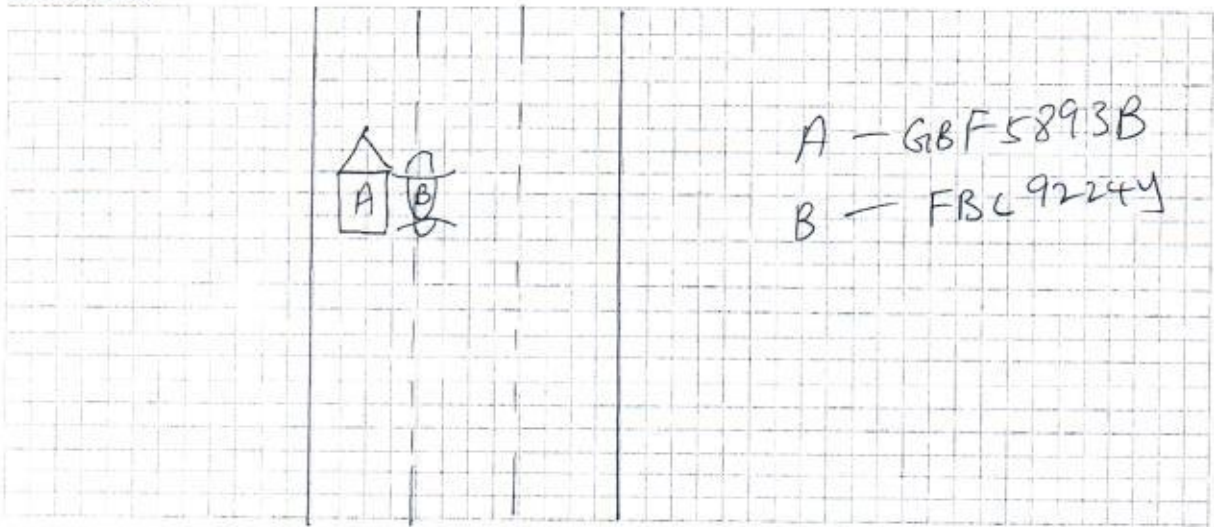
Policyholder's Signature  
Date & Time:

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

Refer to the police report.

DECLARATION

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

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.:

Date of Accident

: 22/5/18

Accident Time: 8.25am (24-HR-Format)

Accident Place

: along Dunearn Road

Vehicle. No. (Car Plate No.)

: GBF5893B

Make/Model: Nissan Caravan

Insurance Company

: EQ

Policy No: DMCPHQ17-006443

Owner or Company Name /IC No.

: Fastrek Courier Pte Ltd / 00801264M

Owner or Company Contact No.

: Owner's Hp Company Tel

DRIVER'S Name / IC No.

: Tan Poh Heng / 57518806D

DRIVER'S Date Of Birth

: 19/6/1975

DRIVER'S License Pass Date 21/9/2005

Relationship of Owner & Driver

: Spouse \ Parents \ Children \ Sibling \ Employee \ Others:

DRIVER'S Address

: B1K 128 Marsiling Rise #07-268

DRIVER'S Contact No./ Alt No.

: 1) 98706436 2) 5730128

DRIVER'S Occupation

: INDOOR \ OUTDOOR (e.g. working inside or outside office)

Email Address

:

Weather & Road Surface

: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET

Reporting Type

: Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (Including Driver):

: 2 passengers

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Any Injury (If YES, Pls state):

: NO

**Other Party Driver's Particular (if any)**

Vehicle. No:

: FB L 9224 J (MTC)

Vehicle. No:

Vehicle Make/Model:

Vehicle Make/Model:

Name Driver:

Name Driver:

IC No. Driver/Contact:

IC No. Driver/Contact:

**\* NEW - Passenger's name & gender:**

: Zubaidah Bte Jubanc





**SINGAPORE  
POLICE FORCE**



T/20180522/2141

Police Station Of Origin:  
Joo Chiat NPP  
267 Onan Road SINGAPORE 424773  
Tel No. 1800-3459999

1 of 3

Report No. T/20180522/2141

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 22/05/2018 19:41	Video Report No.:	Station Diary No.: 29
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**Informant's Particulars**

Name of Informant: TAN POH HENG			Address: APT BLK 128 MARSILING RISE #07-268 SINGAPORE 730128		
ID Type / ID No NRIC NO / S7518806D			Contact No. Home/Office: Mobile: 98706436		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 42	Date of Birth: 19/06/1975	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: DISPATCH			Driving Licence Information: Class: 3		
			Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/05/2018 08:20	Type of Location: Straight Road
Location: Along Road 1 DUNEARN ROAD				
Bus Stop near Barker Rd along Dunearn Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBC9224Y	Motorcycle				Slightly Damaged	0
GBF5893B	Van				Slightly Damaged	1

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Joo Chiat NPP  
267 Onan Road SINGAPORE 424773  
Tel No. 1800-3459999



T/20180522/2141

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Report No. T/20180522/2141

**CONTINUATION OF REPORT**

<b>Rider</b>		<b>ID No.</b>		S8908125D	
<b>Name</b>	MUHAMMAD ALFIZ BIN MOHAMED ESA			<b>Contact No.</b>	90171093
<b>Related Vehicle</b>	FBC9224Y (Motorcycle)			<b>Class of Driving Licence &amp; Expiry Date</b>	Class: NIL Date of Expiry: NIL
<b>Hospital/Clinic</b>	NIL			<b>Date Treatment</b>	NIL
<b>Date Discharge</b>			NIL		
<b>No. of Days granted Medical Leave</b>			NIL		
<b>Degree of Injury</b>			Slight		
<b>Driver</b>		<b>ID No.</b>		S7518806D	
<b>Name</b>	TAN POH HENG			<b>Contact No.</b>	98706436
<b>Related Vehicle</b>	GBF5893B (Van)			<b>Class of Driving Licence &amp; Expiry Date</b>	Class: 3 Date of Expiry: NIL
<b>Hospital/Clinic</b>	NIL			<b>Date Treatment</b>	NIL
<b>Date Discharge</b>			NIL		
<b>No. of Days granted Medical Leave</b>			NIL		
<b>Degree of Injury</b>			NIL		

**Brief Details.**

On 22/05/2018, at around 0820hrs, I was driving along Dunearn Road I stopped my vehicle behind a bus stop yellow box in response to a red traffic light in front of me. I then heard a loud bang on the driver side of my vehicle, and then a loud bang at the front of my vehicle. I then came out of my vehicle and saw a fallen motorcycle and the rider trying to stand up. During the accident, no Police and Ambulance were at scene, and the driver said that he is okay. We then left the area after exchanging particulars.

At around 1200hrs, I was contacted by the rider and he said that he went to seek medical treatment, and we agreed to lodge Police report for insurance claim purposes.





**SINGAPORE  
POLICE FORCE**



T/20180522/2141

Police Station Of Origin  
Joo Chiat NPP  
267 Onan Road SINGAPORE 424773  
Tel No. 1800-3459999

3 of 3

Report No. T/20180522/2141

**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

G /

Sgt 2 JEREMY GOH ZEN KIAT

Signature Of Informant

Signature Of Interpreter

Not applicable

Date/Time

22/05/2018 19:41

Officer In Charge Of Case

TP / AEIT /

Staff Sgt WONG SIEU LUI

Contact No.: 65478151

Classification Of Case:

Authentication Stamp

NP168



SINGAPORE  
POLICE FORCE

SIGNATURE



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7518806D



Name

TAN POH HENG  
(CHEN BAOXING)

陳 宝 兴

Race

CHINESE

Date of birth

19-06-1975

Sex

M

Country/Place of birth  
SINGAPORE

S7518806D

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S7518806D

Name

TAN POH HENG  
(CHEN BAOXING)

Birth Date: 19 Jun 1975

Issue Date: 05 Feb 2014



002271039C

5502962



NRIC No. S7518806D



Date of issue

25-07-2015

Address

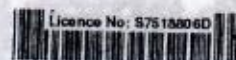
APT BLK 128 MARSILING RISE  
#07-268  
SINGAPORE 730128

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

EFFECTIVE DATE

Class	Description	Effective Date
Class 2B	Motorcycles $\leq$ 200 cc	23 Dec 1998
Class 2A	Motorcycles between 201 cc and 400 cc	16 Oct 2001
Class 3	Motor Cars $\leq$ 3500kg with $\leq$ 7 passengers, exclusive of the driver, and other motor vehicles $\leq$ 2500kg	21 Sep 2005

NP 428A



Licence No: S7518806D

**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg  
reg no. 1978-00490-N

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

**COMMERCIAL VEHICLE PRIVATE (SCH I)  
Comprehensive****Certificate No. : DMCPHQ17-006943****1. Index Mark and Registration Number of Vehicles**

GBF5893B

Form: LCVPI

Excess:

Section 1:

YEID:

WindScreen:

Additional

S\$500.00

S\$3,000.00 All Claims

S\$100.00

**2. Name of Policyholder**

FASTREK COURIER PTE LTD

**3. Effective Date of the Commencement of Insurance for the purpose of the Act**

30/12/2017

**4. Date of Expiry of Insurance**

29/12/2018

**5. Person or Classes of persons entitled to drive\***

Goods Carrying - (MZ300) Authorised Driver. Any of the following:-

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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 has not been cancelled at the time of accident loss or damage.

**6. Limitation 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 greater number of trailers in all than is permitted by Law.

3) Use for the carriage of passengers for hire or reward.

4) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

\*Limitations 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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Thiam Heng Auto (s) Pte Ltd

A000298/Tong Hin Insurance Agency Pte Ltd

Date of Issue : 06/12/2017 10:58

Authorised Signatory

EQ Insurance Company Limited

**Note**

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

A Member of Citystate