NATIONAL Assessment C	entre	Services	post i January	MMA 1180681	75.		
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ODE TP / Repound only		i-Photo Upl	oaded	4			
		Assessment/S	uvey Report				
TP Insurer		Ass't Report	by Fax/Hand	to Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QV	N: (Tel:	Fax		
TP Particulars: Veh No:	50	L 6572.	INC ()/Non-NC()		
Owner / Driver (Tel)	
Policy No: ()	Perio	d ()	Cover Type: ()	
Confirmed by : (Date:	Time:)	
Insured/Driver Liability (%) [No	te-Est Status (WO): N: 0-2	20%, P. 21-79%.	F: 80-1009	(a)	
Year of Registration: () W:	irranty: YES ()/NO()			
Excess (\$) Loading	:\$1,000	()/\$2,000)()				
General Remarks;-		Searce evaluation					
() Walk-In Customer: Custome	r's inform	ation strictly Co	onfidential & S	trictly NO refer of re	spairer.		
() Total Loss Case : to e-mail	Insurer	URGENTLY.					
Drive-In ()/ Towed-In (); I	nvoice: '	YES () / 1	NO();	Fowing Co: ()
Remarks;- (INC hotline: 6788 66	36)			Date& Time Com	aletad	Done	hv
1) Apply for Transport Allowance (-	rtesy Car ()	20/7/10/2015/10/2015/10/2015			
2) QC Check / Post Repair Inspection), (()				
3) Upload Resurvey Photo [Repair Co.	st > \$300	101 ()				
		.,					
Injury:							-
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l:umant's Particulars :-			1) AR : Acciden 2) DA : Damage	t Reporting (\$30); Assessment (\$100);	IMC (\$80)		
iver/Owner			3) TF : Towing 4) FT : Follow-		\$40/\$43		
ontact No:			5) FT : Follow-	Through Survey (Resurve	y) \$30		
			6) TR : Re-inspe	against INC Only (weft	0 Jan 2000) \$70		
maged Portion:			7) 7/1: Idno DA	+ SMRT Survey	\$160		
			8) NTUC Addit OD*	tonal Services			
Checked by (Engr-In-Charge):			* \$45 Courtes	y Car / Tpt Allowance	310	1	
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iditors' Comments :-		petit in appeal		ollect Excess Coordinatio P (Non INC) against INC	9 520 520		
			9) N12: Idao M	obile	3 (ELIVED AND
273			Invalor dated Invalor dated		Charges!		
			A AND DESCRIPTION OF THE PARTY.	19.76.76		THE RESERVE AND ADDRESS OF THE PARTY OF THE	_

SINGAPORE ACCIDENT STATEMENT

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 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.
- 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.

are a ser at the series of	ACCIDENT STATEMENT
Date Of Report	25/05/2018 14:53
Date Of Accident	20/05/2018 21:10
Exact Location Of Accident	AIRPORT RD TWDS KPE (TPE)
Country/State of Loss	SINGAPORE
AND THE PROPERTY OF THE PARTY O	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJL5582Y
Insured/Policyholder	
Name Of Registered Owner	ROSET LIMOUSINE SERVICES PTE LTD
Co Reg No	1
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81301183
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCFHQ17-000185
Cover Note Number	
Driver	
Name of Driver	TEE GIAM ENG MICHAEL
NRIC No	S1594278I
Date Of Birth	16/11/1963
Occupation	OUTDOOR
Date Of Driving Pass	21/10/1981
Driving Experience	36 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98291388
Fax Number	St. 20
Contact Number	
EMail Address	NOEMAIL
	Page 4 of 0

Address

71 ALMOND CRESCENT

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CROSS JUNCTION

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?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

YES NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: KEN LAM

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

YES

Police Station Name

ANG MO KIO POLICE DIVISIONAL HQ (F DIVISION)

Police Station Address

ROAD: 51 ANG MO KIO AVENUE 9, POSTCODE: 569929, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-2180000 - FAX NO: 64814246

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?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

SGL657Z

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

TERRY CHENG

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

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.
- 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)
 - (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
- (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
- 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.

Driver's Signature

(If driver is not the policyholder)

Date & Jime

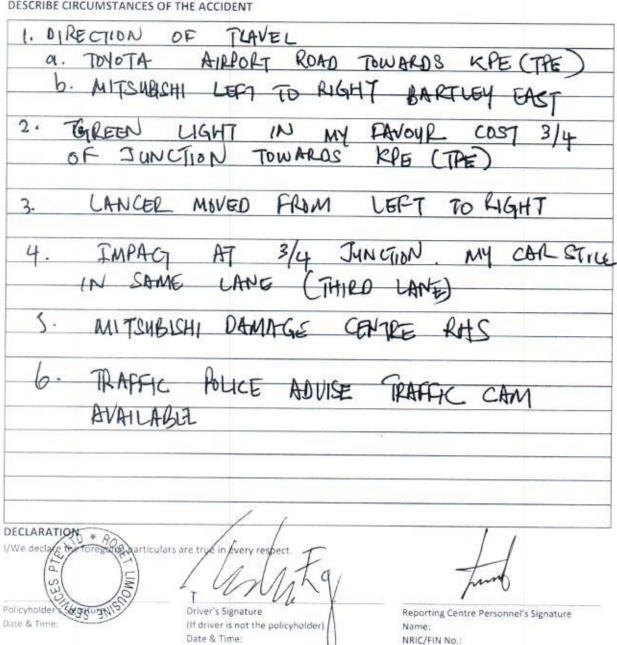
Policyhold

Name:

NRIC/FIN No.:

Reporting Centre Personnel's Signature

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT



NRIC DRIVING LICENSE CERTIFICATE OF INSURANCE POLICE REPORT IF ANY

Date of Accident :	20 MAY 2018 Time: 2110-2115 hrs
Location Of Accident :	AIRPORT ROAD FOUNDED KPE (TRE)
Country/State of Loss:	
INSURED/POLICYHO	OLDER (OWN VEHICLE)
Registered Owner Nam	e :
Email Address :	Reg Owner ID :
Mobile Phone No	
INSURANCE COMPAN	Y (OWN VEHICLE)
Handling Insurer	Fleet Policy : Yes / No
Type Of Coverage Co	mprehensive / Third Party Policy Number :
DRIVER IDENTIFICAT	TION
	E GIAM BNG MICHAEL
Date Of Birth : _ 16	11 [1963 Driving Date Pass: 21007 1981
	942787 Occupation : Indoor / Outdoor
H/P Phone No : 98	129 1388 Alternative Phone No :
Address: //	ALMOND CRES
Email Address	gen 63@ gmail · comptionship:
Was driver an employee	e of the Insured's Company? Yes No
Driver's Own Vehicle Re	eg No : Oriver's Own Insurer :
VEHICLE INFORMATI	ON ST. EEG. V
Vehicle Registration No	
Hanufacturer : 10	9074 ALTIS Model: ALTIS
Reporting Type : Own t	Damage / Third Party / Reporting Only
Exact Purpose for which vi	ehicle was being used at time of accident: Private Use / Company Use /
CENTER II THE CRITICAL	Hired Use
/	ION OF THE ACCIDENT
>	ear / Raining / After Rain Injured : Yes (No
Foad Surface Dr	
Approach by Unknown	
Number of Passengers (the passenger grab
4:	KEN LAM
3484	

DETAILS OF INJURED PERSON		
Name : N	A	
Injuries Sustained :	1	
Were seat belts worm? : Yes / No		
Approximate Age :		
Injured person in which vehicle? :_		
Was injured conveyed to nospital by	/ ambulance? : Yes / No	
Address		
WITNESS Details of Witness: KEN	CAM (CLAIMED DID	NOT SEE
Contact Number : 9831 115	Omail Address:	
DETAILS OF OTHER VEHICLES		
Vehicle Registration No : SGI	V 657 2	
vehicle Make/Model/Colour: Mt	TSABISHI LANCER	
Name of Driver : TERRY C	HENG Driver's NRIC :	
Address :		
No. Of Passenger (Including Driver)	ONE	
Vehicle Registration No :	Contact Number :	
vehicle Make/Model/Colour :	NA -	
Name of Driver:	Driver's NRIC :	
	1 Diversion	
No. Of Passenger (Including Driver)	~ NA Contact Number :	
Vehicle Registration No :		
/ehicle Make/Model/Colour :	1	
Verne of Driver	Driver's NRIC :	
No. Of Passenner (Including Driver)	Contact Number	





1 of 3

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Police Divisional HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No:1800-2180000

Report No. F/20180523/7012

Date/Time Report Made 23/05/2018 12:53	Vide Report No.		Station Diary No	
Name Of Informant TEE GIAM ENG, MICHAEL	Address 71 ALM		SCENT SINGAPO	RE 677825
ID Type / ID No. NRIC NO / S1594278I	Contact No. Home/Office: Mobile: 98291388			
Nationality SINGAPORE CITIZEN	Email Address teegem@yahoo.com			
Occupation GRAB DRIVER	Sex Male	Age 54	Date of Birth 16/11/1963	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 21/05/2018 21:10 - 21/05/2018 21:15	Location Of Incident BARTLEY ROAD EAST			
Brief details.				

- 1. Date of accident and time: 20 May 2018 at or around 2110 to 2115hrs.
- 2. Cars One Toyota Altis Silver SJL 5582 Y (Tribecar) / One black Mitsubishi Lancer SGL 657 Z
- 3. Persons involved:
- 3.1 Toyota Altis Driver TEE GIAM ENG MICHAEL / Grab Passenger KEN LAM (Advised that he didn't observe the lights at the traffic junction)
- 3.2 Lancer Driver TERRY CHENG (Female) / One Passenger (male Unknown)
- 4. Injury- No injury as reported in presence of TP
- 5. Direction of Travel

Authentication Stamp





2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180523/7012

- 5.1 Toyota Towards KPE (TPE) entrance from Airport Road
- 5.2 Lancer across junction Bartley Road East Left to Right
- 6. Car Damages -
- 6.1 Toyota Front Moderate damage
- 6.2 Lancer- Centre right driver side moderate. Car able to move on its own.
- 7. Description of Event;
- 7.1 Green light in my favour. Moderate speed 50-60kph. Going straight across junction. Good visibility
- 7.2 Toyota in third lane towards KPE
- 7.3 Lancer crossing from left to right at last lane. My car already half way across the traffic junction when the car move across my travelling direction.
- 7.4 Impact at third way past junction of Toyota Direction. Light still green after impact.
- 7.5 After Impact Toyota close to end of junction. Lancer at RHS of Toyota.
- 7.6 After impact the traffic light was still green towards KPE (TPE) in my favour. Driver of Mitsubishi mentioned that she thought that she saw that the light was green in her direction.

TP advised that Traffic cam available at junction for retrieval. TP at scene advised that Police Report is not necessary due to no injury, I was informed that the LTA traffic footage can only be retrieved with submission of police report else it will be difficult to ascertain responsibilities of drivers.

EE GIAM ENG, MICHAEL IRIC NO Recording The Report:	ID No	S1594278I
		S1594278I
Recording The Report:	0:	
	Th	gnature Of Informant: ne identity of the person making this port has been authenticated by ngPass. No signature is required.
eter:		ate/Time: :/05/2018 12:53
Case:	Cla	assification Of Case:
	Case:	Da 23 Case:



3 of 3

POLICE REPORT (NP299)

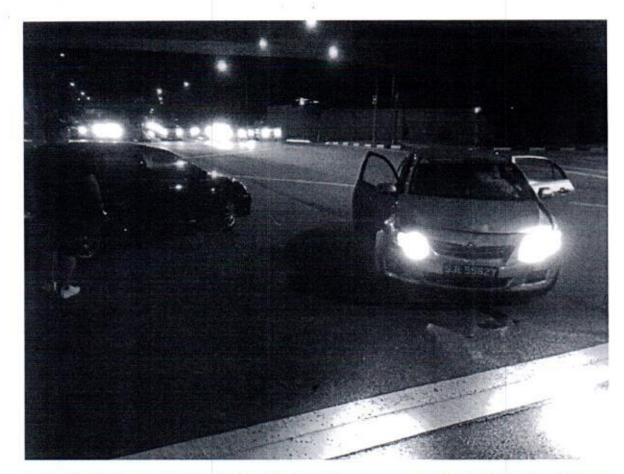
CONTINUATION OF REPORT

Report No. F/20180523/7012

Gender	Male	Age	54
Race	Chinese	Language	English
Occupation	GRAB DRIVER	Address Type	
Address	71 ALMOND CRESCENT SINGAPORE 677825	Mobile No	98291388
Is Informant A Victim?	Yes		
Person Name	Ken Lam		
Gender	Male	Relation To Informant	My passenger
Person Name	Terry Cheng		
Gender	Female	Relation To Informant	Driver of other Vehicle
Person Name	UNknown		
Gender	Male	Relation To Informant	Passenger of Mitsubish

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.		
Date/Time: 23/05/2018 12:53		
Classification Of Case:		

Authentication Stamp











BRgds. MTee

On 21 May 2018, at 06:30, TEE Giam Eng, Michael (M) < teegem63@gmail.com > wrote:

- 1. Date of accident and time: 20 May 2018 at or around 2110 to 2115hrs.
- 2. Cars One Toyota Altis Silver SJL 5582 Y (Tribecar) / One black Mitsubishi Lancer SGL 657 Z
- 3. Persons involved:
 - 3.1 Toyota Altis Driver TEE GIAM ENG MICHAEL / Grab Passenger KEN LAM
 - 3.2 Lancer Driver TERRY CHENG (Female) / One Passenger (male Unknown)
- 4. Injury- No injury as reported in presence of TP
- 5. Direction of Travel
 - 5.1 Toyota Towards KPE (TPE) Airport Road
 - 5.2 Lancer across junction Bartley Road East Left to Right
- 6. Car Damages -
 - 6.1 Toyota Front Moderate damage
 - 6.2 Lancer- Centre right driver side moderate. Car able to move on its own.
- 7. Description of Event;
 - 7.1 Green light in my favour. Moderate speed 50-60kph. Good visibility
 - 7.2 Toyota in third lane towards KPE
 - 7.3 Lancer crossing from left to right at last lane.
 - 7.4 Impact at third way past junction of Toyota Direction. Light still green after impact.
 - 7.5 After Impact Toyota close to end of junction. Lancer at RHS of Toyota.
- 8. TP advised that Traffic cam available at junction for retrieval.

On 20 May 2018, at 9:33 PM, Tribecar Support <support@tribecar.com> wrote:

Hello,

Thank you for writing to Tribecar! We have received your message.

For urgent requests during your booking,
Press on the "Need Help > Breakdown/Emergency" button to reach us.
Otherwise, we will respond within 1 - 2 business days.

For general enquiries, you will receive a response within 3 - 5 working days.

Our office hours (business days) are Monday - Friday (10AM to 6PM). We are closed on weekends and public holiday.

Thanks & Regards, Support Team @ Tribecar

web: www.tribecar.com facebook: www.facebook.com/tribecar

Have a feedback? Leave us a review on Google!





16-11-1963 SINGAPORE

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES.

Motorcycles not exceeding 200 cc Motorcycles between 201 cc and 400 cc Motor Cars and Motor Tractions the weight of which unladen does not exceed 2500 killograms floary Motor Cars and Motor Tractions the weight of which unladen exceeds 2500 killogram

NP 428A



S15942781 29-03-2001

71 ALMOND CRESCENT SINGAPORE 677825 NRIC No: S15942781

Date: 02-10-2001 No: 1711800

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.ag rog 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 FLEET Comprehensive

Certificate No.: DMCFHQ17-000185

1. Index Mark and Registration Number of Vehicles SJL5582Y

2. Name of Policyholder ROSET LIMOUSINE SERVICES PTE. LTD. Form: LCVH Excess:

Section 1 Outside Singapore Section 2

SGD1,500.00 SGD2,000.00 SGD2,000.00

SGD1,500.00

Outside Singapore YEIDR (Section 2)

SGD4,000.00

- 3. Effective Date of the Commencement of Insurance for the purpose of the Act 01/11/2017
- 4. Date of Expiry of Insurance 31/10/2018
- Person or Classes of Persons entitled to drive* Any person who is Authorised to drive on the Insured's order or with their
 - *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 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 has not been cancelled at the time of accident loss or damage.
- 6. Limitations as to use* LIMITATIONS AS TO USE

Use for social domestic and pleasure purposes and business purposes of any person 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 vehicle

"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.

unwjt/HO/B000042/NEWSTATE STENHOUSE (

A Member of Citystate

Authorised Signatory EQ Insurance Company Limited