1 1/2/6/11: 74/4/10 - 11:14	Job descripti	011	Date &Time Completed	Do	ne by
Date In: 26/5/18-12:19			Date to Fano completed		ic o,
Ref No: NA) IN (1800 9587) 24	SAS e-filin		1		
Veh No: SKD21628	E-mail (with	nia Shrs, AIC 2hrs)			
D.O.A: 16/1/12-03:10	i-Motor Cl	aim Form	M/0995996-001	26/5/18	12:4
OD (TP) Reporting Only	i-Motor W	O (Within: OD 2hrs	, TP 4hrs)		
	i-Photo Up	loaded	}		8
TP Insurer:	Assessment/	Survey Report			
11 mater.	Ass't Report	t by Fax / Hand t	Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (			Tel:	Fax:	
TP Particulars: Veh No: SHC	184.87	INC (	)/Non-INC( )	19	
Owner / Driver: (			Tel:	)	-
Policy No: ( ) P	eriod: (	)	Cover Type: (	)	
Confirmed by : (		Date:	Time:	)	
Insured/Driver Liability: (%)	[Note-Est. Status	(WO): N: 0-20	%; P: 21-79%. F: 80-1	100%]	and the
Year of Registration: ( )	Warranty: YES (	)/NO(	)		
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Remarks: (INC hotline: 6788 6616)				9488887	A. P. Ton
200 (200)	**************************************	and the second second	Date&Time Completed	Don	eny
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	Courtesy Car (	)			
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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 <a href="mailto:truthful and accurate">truthful and accurate</a> 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.

arcresard.	
Exploration of the feet state of the state of	ACCIDENT STATEMENT
Date Of Report	26/05/2018 12:19
Date Of Accident	26/05/2018 03:10
Exact Location Of Accident	JLN SULTAN TWDS BEACH RD AFTER NORTH BRIDGE RD JUN
Country/State of Loss	SINGAPORE
The state of the s	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKD2162B
Insured/Policyholder	
Name Of Registered Owner	MILLION MILES SERVICES
Co Reg No	53351122D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH 1.8 CVT
Exact Purpose for which vehicle was being used at time of accident	WORKING
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 HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094220911
Cover Note Number	
Driver	
Name of Driver	VOO KHAI CHURN (HU QIJUN)
NRIC No	S7215809A
Date Of Birth	15/05/1972
Occupation	OUTDOOR
Date Of Driving Pass	02/11/1993
Driving Experience	24 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96604772
Fax Number	
Contact Number	OFFICE-96604772
EMail Address	NOEMAIL

Address

BLK 295 PUNGGOL CENTRAL

#03-519

Postcode

820295

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

COLLISION - CHANGE/CROSS LANE

Type Of Accident Weather Conditions

CLEAR DRY

Other Information

Road Surface

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)

5

Passenger 1

NAME:

GENDER: : MALE

Passenger 2

NAME: GENDER:

: MALE

Passenger 3

NAME:

GENDER:

: MALE

Passenger 4

NAME:

. .

GENDER:

: FEMALE

**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

REFER TO STATEMENT.

Attachment(s)

YES

Are accident photos available for attachment? Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

VIDEO FOOTAGE WITH DRIVER

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number Vehicle Make/Model/Colour

SHC1848D

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

TAXI

LAW KEK GEE

	DETAILS OF INJURED PERSON 1
Name	VOO KHAI CHURN (HU QIJUN)
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SKD2162B
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.
- 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.
- 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.
- 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:
  - 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.

MILLION MILES SERVICES Co Reg No: 53351122D

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 .:

In Sultan	- 2	Textile Cent	ne l
- 11V 32M W. 1		335	>
		7007	> towards
	->->-	> = = = = = = = = = = = = = = = = = = =	Seach Re
	· -		
<u> </u>			
			10) 845 2.16
	-   \   \ \   \   -		(B) SKD 2162 (B) SHC 184
DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT		(4) (5)
On 26	65 18 at @ 0310 V	vs I was travellow	of the my vehicle
(SKD 2162B) 0/0	Lot distance in the second	towards Beach Road	lan the extre
right lane trave	elling straight a	fer the junction of	North A Bridge
Suddenly, a tax	(34C 1848D)	on the extreme	- last lane of
into my lune	and collider	d onto the	left porton of
vehicle!			. 1
DECLARATION /			
DECEMBATION			
I/We declare the foregoing part	iculars are true in every respec	t.	M

26 05 18 . Model/Make Togota W284
03 10 'HRS
Ila Sultan towards Reach Road after North Bridge Kood Junctio
ident Cheaffust
* Million Miles Services
H/P:9660 H772 - Home: Office:
1331 1122 D -
B/295, Punggol Central #03-519 (5) 820295.
OD THIRD PARTY REPORTING ONLY
NTIC.
Comprehensive Third Party Third Party / Fire /Theft
5094220911
A. Al (A)
As Above If No, Voo Khai Churn
5 7215809 A . Any Passengers: 04 (3M IF).
Outdoor / Indoor
02 11 1993
Male / Female
H/P: 9660 4772 Home: Office:
BLX 295, Punggol Central #03-519 (8) 820275.
No, If yes, Reg No.
Employee, If no, state Seff- Employed.
Clear Raining Other
Dry Wet Other
No, If Yes, Who?
Voo Khai Churn + 17: 9660 ATT2.
No, If Yes, Where?
SHC 1848 D. Any Passengers: N. A.
Law Kek Gee - Contact No.:
Any Passengers :
Witness Contact:
Left Swe.
Yes / No
BY UNKNOWN PERSON SOLICITING /
S ASSISTANCE? Yes / No
Twencar ·
6842 0051 / 6744 0510
Huixin -

# > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars		
Owner ID Type:	Business	
Owner ID: Vehicle Details	1122D	
Vehicle No.:	SKD2162B	
Vehicle to be Exported:	Yes	
Intended De-registration Date:	31 May 2018	
Vehicle Make:	TOYOTA	
Vehicle Model:	WISH 1.8 CVT	
Primary Colour:	Grey	
Manufacturing Year:	2011	
Engine No.:	2ZRA810701	
Chassis No.:	JTDGG20W305002404	
Maximum Power Output:	106.0 kW (142 bhp)	
Open Market Value:	\$21,503.00	
Original Registration Date:	08 Nov 2011	
First Registration Date:	08 Nov 2011	
Transfer Count:	1	
Actual ARF Paid: Intended PARF Rebate Details	\$21,503.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	07 Nov 2021	
PARF Rebate Amount: Intended COE Rebate Details	\$13,976.00	
COE Expiry Date:	07 Nov 2021	
COE Category:	E - Open Category	
COE Period(Years):	10	
QP Paid:	\$65,058.00	
COE Rebate Amount:	\$21,853.00	
Total Rebate Amount:	\$35,829.00	

The information contained herein is correct as at 26 May 2018

Owner / Driver



VOO KHAI CHURN (HU QIJUN)

Birth Date 15 May 1972 Issue Date: 22 Oct 2003



## REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7215809A



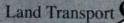


VOO KHAI CHURN (HU QIJUN)

CHINESE Date of birth

15-05-1972 Country of birth SINGAPORE

07215809A



Land Transport Authority



VOCATIONAL LICENCE Licence No : \$7215809A

TO KHAI CHURN (HU QIJUN)

e Bate 17/12/2016

lease visit www.lta.gov.sg to check he status of this vocational licence

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

Motor Cars and Motor Tractors the we which unladen does not exceed 2500 kilogra

NP 428A

22-10-2003

APT BLK 295 PUNGGOL CENTRAL #03-519 SINGAPORE 820295

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Description

02 TAXI VL 24/12/2009



3427110



### 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)

Certificate Number: 5094220911

Cover : drivo CLASSIC

Index mark and Registration Number of Vehicle

: SKD2162B

Chassis Number

: JTDGG20W305002404

2. Name of Policyholder

: MILLION MILES SERVICES

3. Effective Date of Insurance

: 20 Sep 2017

4. Expiry Date of Insurance

: 07 Nov 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#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

#### This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1) : \$\$2,000 EXCESS (SECTION 2) : S\$1.500 WINDSCREEN EXCESS : 5\$100 ADDITIONAL EXCESS : N/A UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COF : YES NCD PROTECTION : YES TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : NO PRIMARY DRIVER : VOO KHAI CHURN NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A HIRE PURCHASE COMPANY : INDEX CREDIT PTE LTD SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: HUA YANG CREDIT PTE LTD (00000613824)

Date of Issue

: 18 Sep 2017 16:18 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

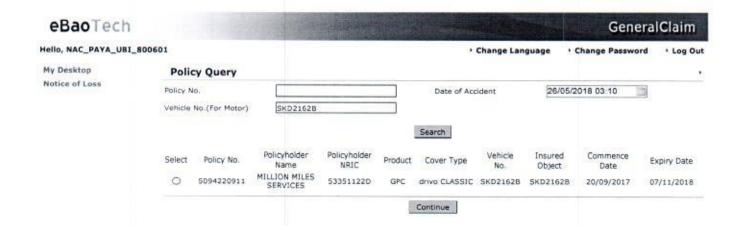
Countersigned By:

Authorised Officer

Chief Executive

HUA YANG CREDIT PTE LTD 159 SIN MING ROAD #04-04 AMTECH BUILDING SINGAPORE 575925

TEL: 64586111 FAX: 64595111 ACRA: 198404112G



Sequen	100	Date of Endorseme		Endorsemen	. 4	Endorsement		Endorsement Content
♥ Endors	ements							
Insure	d Object: S	KD2162B						
Jnit No.	03-	519	Relate Numb	d Policy er	5094220911			
Address 4	SIN	GAPORE 820295	Addre	ss Type	Singapore address		Post Code	820295
Address 1	BLK	295 #03-519	Addre	ss 2	PUNGGOL CENTRAL		Address 3	PUNGGOL GROVE
Policy!	holder Mail	ing Address						
Certificate Info								
Policy Info								
Flag Open								
Co- insurance	No							
Agent	HUA YANG	CREDIT PTE LTD	Agent Tel.	64585111		GST Flag	Y	
OD Excess	2000		Singapore TP Excess	1500			Young/Ine	xperience Driver Excess
Outside Singapore	2000		Outside	4500				
Additional Excess	0		OS Premium	0				
Third Party Excess	1500		Own damage Excess	2000		Windscreen Excess	100	
Excess Type			All Claim Excess					
Policy issue Date	18/09/201	7	Effective Date	20/09/201	7 00:00	Expiry Date	07/11/2018 23:59	
Product Name	PRIVATE C	AR INSURANCE	Plan			Group Policy Flag	N	
Address	BLK 295 #	03-519 PUNGGOL C	ENTRAL PUNGO	OL GROVE	SINGAPORE 820295			
		11	Name	PILLION	ILES SERVICES	NRIC	53351122D	

Claim Handling									
Policy No.	5094220911		Vehicle No.	SKD21628		GST Registration	04.771		12
Policyholder Name	MULLION MULES SER	EVICES						5335112	
Product Code	PRIVATE CAR INSU		Cover Type	11 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -		Policyholder NR3		5335112	20
Contact No. (Mobile)	0	The state of the s		drive CLASSIC		Loading		0	
Email Address	8/		Contact No. (Office)	.0		Contact No.(Horr	ie)	ů	
			Special Remark			#Code		100	
CFK	No      Yes     No      Yes     No      No		TCA	® No ○Yes		sCode Reason			
ICD Protection	ves		NCD Entitlement(%)	50		Private Hire		Yes	
Accident Details									
eport Date	26/05/2018 12:41		Accident Report Within 24 hrs	Yes		Accident Type		Cathelin	47211
atia of Accident	26/05/2018		Time of Accident hh:mm	Carrier 1					Change / Cross lane
eporting Centre				03:10		Country of Acode	ent	Singapore	
codent Location			Orange Force			ICM No.			
	TON SOUTAN TWOS	BEACH RD AFTER	NORTH BRIDGE RD JUN						
→ Benefits									
₽ Excess									
wn damage Excess.		2,000.00	Additional Excess	0		Windscreen Exce		100.00	
mamed Driver Excess			Outside Singapore 00 Excess	2,000.00		windstreen Exce	95	100.00	
rd Party Excess		1,500.00							
GST Registered Inform	00000	1,500.00	Outside Singapore TP Excess	1,500.00					
T Registered	res			<b>GST Registration Date</b>		28/11/2	016		
T Registration No.	533	511220		GST Status Verified		No			
dification History									
Policyholder Mailing A	ddress								
dress 1	BLK 295 #03-519		Address 2	PUNGGOL CENTRAL		Address 3		1	energy .
dress 4	SINGAPORE 820295		Address Type					PUNGGOL	SHOVE
in No.				Singapore address		Post Code		820295	
	03-519		Related Policy Number	5094220911					
OI Driver Info									
ver Name	VOD KHAJ CHURN		Oriver Type	Main Driver					
named driver Name			Driver NR3C	S7215809A		Driver DOB		15/05/19	12
geter Date of Driver License	02/11/1993		Driver Age	46					
mact No.(Mobile)	96604772		Contact No.(Office)	0		Orlving Experience		24	
Press 1	BLK 295					Contact No.(Home	0.	0	
	DIN AND		Address 2						GROVE
				PUNGGOL CENTIVAL		Address 3		PUNGGOL	
	SINGAPORE 820295		Address Type	PUNGGOL CENTRAL Singapore address		Address 3 Post Code			**************************************
ė No.	SINGAPORE 820295 03-519							PUNGGOL #20295	
t No. es he own a Singapore			Address Type			Post Code			
t No. es he own a Singapore	03-519						mpany		
t No. es he own a Singapore jistered car?	03-519		Address Type			Post Code	mpany		
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t No.  Is no own a Singapore listered car?  bration  attalyser or Blood Text ding?	03-519 ○ Yes <b>®</b> No		Address Type Driver Vehicle No.	Singapore address		Post Code	mpany		
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No.  s he own a Singapore stered car?  aration sthalyser or Blood Test ding?  fication History laim 001 New  If Type *  lact No. (Mobile) if Address in Description arred Workshop Contact are Finalisation Registered int Teken By	03-519 () Yes () No 0 mg   00-MK   NIL   SKD2152e / SHC1841   Yes 26/05/2018 12:43	8D ON 26 May 201	Address Type  Driver Vehicle No.  Any injury?  Insured Name Contact No.(Home) Of Vehicle Number  8  Insured Liesity * Preferend Repair Option	Singapore address  *Yes No  MILLION MILES SERVICES  SKD2162B	1	Post Code  Driver Insurer Cor  Insured NRIC  Contact No. (Office TP Vehicle Number vaile of Preferred		\$20295 \$3351122 \$HC18480	
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	NAC_PAYA_UBI_800601( NAT	CNAL ASSESSMENT CENTRE SERVICES) on 26 M y 2018 12:43	a Photos		Normal	Photos 2018-5-26	Edit
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Attachment		Uploaded By/Date	Category	P	Urgency	Description	Sent? Action (CO)