

NATIONAL Assessment Centre Services (wef 1 Jan 2005) <b>MMA18073289</b>			
Date In: <b>06/06/2018 11:14</b>	Job description:	Date & Time Completed	Done by
Ref No: <b>NBA/7m118010254/y</b>	SAS e-filing		
Veh No: <b>GX 4138 B</b>	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: <b>05/06/2018 12:30</b>	i-Motor Claim Form		
OD: TP: <b>Reporting Only</b>	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: <b>FBH4303J</b>	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 & 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 & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury: _____	
Date/Time	Actions

<b>NBA1803574</b>	Invoice Preparation Checklist		Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);			
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) RT: Follow-Through Survey (Resurvey) \$30			
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)			
Cat. 1:	6) TR: Re-inspection \$75			
Cat. 2/3:	7) N1: Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	ON*			
	*N5: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
	TP (N11): TP (Non INC) against INC \$20			
	9) N12: Idac Mobile 30			
	Invoice dated	Fee Charged		
	Invoice dated	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	06/06/2018 11:14
Date Of Accident	05/06/2018 12:30
Exact Location Of Accident	ALONG BUKIT BATOK EAST AVENUE 3 AT LANE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX4138B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ANG SENG EGGS SUPPLIER
Co Reg No	36795800K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81014705
Alternative Phone No	OFFICE-81014705

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 MANUAL
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	18-MB003364-R09
Cover Note Number	

### Driver

Name of Driver	LAU SIN HUEY
NRIC No	S2574816F
Date Of Birth	22/05/1966
Occupation	OUTDOOR
Date Of Driving Pass	21/01/1987
Driving Experience	31 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81014705
Fax Number	
Contact Number	OTHERS-81014705
Email Address	NOEMAIL



Address	BLK 291B BUKIT BATOK STREET 24 #08-43
Postcode	651291
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	SIDE SWIPE
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?	NO
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	FBH4303J
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

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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

Bukit  
Batok East  
Avenue 3



(A) EX 4138 B  
(B) FBH 4303 J



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 05-06-2018 at about 12:30hrs, I was travelling along Bukit Batok East Avenue 3 at lane 2. I signal right and filter to lane 1, when I see the traffic was clear then I moved. All of a sudden, I felt an impact from the rear. I alighted and realised that a motorbike FBH 4303J had collided onto my vehicle. I called ambulance as I see the rider was injured. When the ambulance arrived, the rider refuse to follow.



## 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.:

# SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 05.06.2018	TIME: 12:40hrs	(hh:mm) 24 hrs Format
LOCATION Bukit Batok Avenue 3 at Lane 2 East		
VEHICLE NUMBER 6X 4138B		
INSURED NAME ANG SENG EGG SUPPLIER		
NRIC / FIN 36795800K	CONTACT:	
MAKE Toyota	MODEL DYNA 1500	
Are you claiming under your own insurance policy for repair to your vehicle?		
( ) Yes, If No, Pls Select : ( ) Third Party (✓) Reporting Only		
INSURANCE COMPANY TOKIO MARIAGE		
TYPE OF POLICY ( ) COMPREHENSIVE ( ) THIRD PARTY (✓) TPFT		
POLICY NUMBER: 18-MB003364-R09		
NAME DRIVER: Lau Sin Huan		( ) SAME AS INSURED
NRIC / FIN S2574816F		CONTACT: 8101 4105
DATE OF BIRTH: 22.05.1966		
DRIVING PASS DATE: 21.01.1987		
OCCUPATION: (✓) INDOOR ( ) OUTDOOR		
GENDER: ( ) MALE (✓) FEMALE		
EMAIL ADDRESS:		( ) NO EMAIL
ADDRESS OF DRIVER: 291B Bukit Batok St 24 #08-43 S(651291)		
Number Of Passenger Include Driver: Driver only		
Was driver an employee of the Insured's Company? (✓) YES ( ) NO		
If No, Relationship Of The Driver With The Insured		
( ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling (✓) Others		
Does The Driver Own Any Other Vehicle? : ( ) YES (✓) NO <i>Employee</i>		
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:		
Insurance Company Of Driver's Own Vehicle		
Weather Conditions: (✓) Clear ( ) Raining ( ) Drizzling ( ) Others		
Road Surface : (✓) Dry ( ) Wet ( ) Others		
Was Any Foreign Vehicle Involved In This Accident? ( ) YES (✓) NO		
Was Anybody Injured In The Accident? ( ) YES (✓) NO		
If YES, Injured details :		
Convey By Ambulance: ( ) YES (✓) NO		
Was There Any Video Capture By Car Camera? ( ) YES (✓) NO		
Was There Accident Reported To The Police? ( ) YES (✓) NO If Yes Attach Police Report		
Police Report Number (if any)		
Details Of 3rd Party	Name / NRIC	Contact
Veh B FBH 4303J		
Veh C		
Veh D		
Veh E		
Veh F		
Veh G		

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2574816F



LAU SIN HUEY

刘星慧

Race  
CHINESE  
Date of Birth  
22-05-1966  
Country of Birth  
MALAYSIA

Sex  
F

Identity Card No. S2574816F

REPUBLIC OF SINGAPORE DRIVING LICENSE



License Number S2574816F

Name

LAU SIN HUEY

Birth Date 22 May 1966

Valid Date 16 Dec 2012



Identity Card No. S2574816F



Nationality

MALAYSIAN

Blood Group

O+

Date of issue

06-08-1999

APT BLK 291B BUKIT BATOK STREET 24 #08-43  
SINGAPORE 651291

NRIC No: S2574816F

Date: 30/03/2008

No: 6977201

8022521

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

PASS DATE

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

21 Jan 1967



License No: S2574816F

NP 20A



Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)  
20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046  
T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmls@tokiomarine.com.sg W: www.tokiomarine.com

A member of the  
Tokio Marine Group



TOKIO MARINE  
INSURANCE GROUP  
FORM MZ300

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)

Policy No.: 18-MB003364-R09 (Comm Vehicle Carry Own Goods)

1. Index Mark and Registration Number of Vehicle GX4138B Chassis No.: JTFUF34Y203002355
2. Name of Policyholder ANG SENG EGGS SUPPLIER
3. Effective date of the Commencement of Insurance for the purposes of the Act 30/04/2018
4. Date of Expiry of Insurance 29/04/2019
5. Persons or Class of Persons entitled to drive\*  
Any person who is driving on the policyholder's order or with their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use\*

- 1) Use in connection with the policyholder's business.  
2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' 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 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

**IMPORTANT NOTICE**

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd, within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

**ADDITIONAL INFORMATION**

Account: 1142DDA

Insurance Plan: Third Party, Fire & Theft  
Limit for total loss or theft: Prevailing Market Value  
Financial Interest: DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature



## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Business  
Owner ID: 5800K

### Vehicle Details

Vehicle No.: GX4138B  
Vehicle to be Exported: No  
Intended De-registration Date: 30 Jun 2018  
Vehicle Make: TOYOTA  
Vehicle Model: DYNA 150 D  
Primary Colour: Silver  
Manufacturing Year: 2004  
Engine No.: 5L5427148  
Chassis No.: JTFUF34Y203002355  
Maximum Power Output: -  
Open Market Value: \$23,715.00  
Original Registration Date: 30 Apr 2004  
First Registration Date: 30 Apr 2004  
Transfer Count: 0  
Actual ARF Paid: \$1,186.00

### Intended PARF Rebate Details

PARF Eligibility: No  
PARF Eligibility Expiry Date: -  
PARF Rebate Amount: \$0.00

### Intended COE Rebate Details

COE Expiry Date: 31 Mar 2019  
COE Category: C - Goods Vehicle & Bus  
COE Period(Years): 5  
PQP Paid: \$25,158.00  
COE Rebate Amount: \$3,773.00  
Total Rebate Amount: \$3,773.00

### Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 06 Jun 2018