

**NATIONAL Assessment Centre Services** Part 1 (2005) MMA 118074407.

Date In: 8/6/18 11:52	Job description	Date & Time Completed	Done by
Ref No: MA1 CTI18010482/14	SAS e-filing		
Veh No: GBE 1424 D	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 6/6/18 16:50	i-Motor Claim Form		
OD <input checked="" type="checkbox"/> 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 / GW: ( )	Tel: ( )	Fax: ( )
TP Particulars:	Veh No: Unknown	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

MA1803631	<b>Invoice Preparation Checklist</b>	Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);	30.00	
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) FT : Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
Ref. 1:	6) TR : Re-inspection \$75		
Ref. 2/3:	7) NI : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services -		
	Q1:		
	*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 \$0		
	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	08/06/2018 11:52
Date Of Accident	06/06/2018 16:50
Exact Location Of Accident	10 ADMIRALTY STREET #06-10 (S)757695
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE1424D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	BUGG DESIGN AND SERVICES PTE LTD
Co Reg No	200613429H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81618093

#### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	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	COMMERCIAL VEHICLE

#### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1656031701
Cover Note Number	-

#### Driver

Name of Driver	CHEN FAN SIONG
NRIC No	S7060956H
Date Of Birth	03/11/1970
Occupation	OUTDOOR
Date Of Driving Pass	19/07/2002
Driving Experience	15 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91093787
Fax Number	
Contact Number	
Email Address	NOEMAIL



Address	BLK 212A PUNGGOL WALK #16-729
Postcode	821212
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOBILE EQUIPMENT
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.
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:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



SKETCH PLAN

unable to provide  
sketch.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to  
police report.

I wish to add on that the reason for late report  
was due to I have an check-up appointment  
to atten!

DECLARATION

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

X

Policyholder's Signature  
Date & Time:



Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]*

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

*[Signature]*

# ACCIDENT STATEMENT

ACCIDENT DATE: (06 / 06 / 18) (DD/MM/YYYY), TIME: (16.50) (HH:MM)

LOCATION: 10 Admiralty Street #06-10

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: 61BE14240  
 b) INSURANCE COMPANY: China Taiping  
 c) POLICY NUMBER: 0M CVS N 16560317  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: Toyota Dyna  
 f) TYPE: (SALOON / COUPE / MPV / VAN / Lorry / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: 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: Bugg Design & Servicing Pte Ltd (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 200613429 H CONTACT: 8161 6093  
 c) ADDRESS:

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: Chen Fan siong (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S 7060 4564 CONTACT: 91093787  
 c) ADDRESS: 212A Punggol Walk #16-729 S821212

\*d) DATE OF BIRTH: (03 / 11 / 1970) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 16

## 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: employee

## 5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

## 6. WAS ANYBODY INJURED (YES / NO)

## 7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: T PHQ UBI

## 8. THIRD PARTY VEHICLE

HIT & RUN

- a) VEHICLE NUMBER: MODEL:  
 b) DRIVER'S NAME:  
 c) NRIC/FIN/PASSPORT: CONTACT:

## 9. THIRD PARTY VEHICLE

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

LKK  
 Paga Ubi Industrial Park 2  
 #01-25, 51 UBI AVE 1

S (408 933)

Email =

REPORTING@  
 TOPQUE5.com

fax =

6452 4584





# SINGAPORE POLICE FORCE



T/20180607/7001

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20180607/7001

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 07/06/2018 10:25		Vide Report No.: F/20180606/0169		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: CHEN FAN SIONG			Address: APT BLK 212A PUNGGOL WALK #16-729 SINGAPORE 821212		
ID Type / ID No.: NRIC NO / S7060956H			Contact No.: Home/Office: Mobile: 91093787		
Nationality: MALAYSIAN			Email: cfs3787@gmail.com		
Sex: Male	Age: 47	Date of Birth: 03/11/1970	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PRODUCTION MANAGER			Driving Licence Information: Class: 2B,3,4 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/06/2018 16:49	Type of Location: Commercial Building
Location:  ADMIRALTY STREET  10 Admiralty Street, #06-10, Singapore 757695 (outside our unit)				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE1424D	Lorry	TOYOTA	Dyna 3.0 Diesel Turbo M/T 2WD Lorry	Silver	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GBE1424D	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMCVSN16560317 01	10/09/2017	09/09/2018





**SINGAPORE  
POLICE FORCE**



T/20180607/7001

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20180607/7001

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHEN FAN SIONG	ID No.	S7060956H
Related Vehicle	GBE1424D (Lorry)	Contact No.	91093787
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

GBE1424D reach office - 11.19am Park outside office unit (address: 10 Admiralty Street, #06-10, Singapore 757695)

Lorry stationary from 11.19am onwards till 1.50pm and 2.35pm to 4.50pm

I went out for lunch 12.45 to 1.50pm. Didn't discover anything.

I drove lorry out to purchase material between 1.50pm to 2.35pm.

So the period of hit and run will be between 2.35pm to 4.50pm when I discover the glass shatters in front of my company lorry.

My Admin girl helped to call in 999 at 5.03PM and subsequently a Traffic Police came.

As this is a hit and run case, we hope that the authority can help us to investigate and find out the driver who did this.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20180607/7001

3 of 3

Report No. T/20180607/7001

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
MOHAMED SUFIAN BIN SUDIN  
Contact No.: 65476367

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
07/06/2018 10:25

Classification Of Case:



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7060956H**

Name: **CHEN FAN SIONG**

Birth Date: **03 Nov 1970**  
Issue Date: **22 Jul 2003**

1000675001H




REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S7060956H**

Name: **CHEN FAN SIONG**  
**曾繁雄**

Race: **CHINESE**  
Date of birth: **03-11-1970**  
Country/Place of birth: **MALAYSIA**

Sex: **M**

57060956H





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

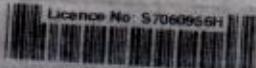
Class	Description	Pass Date
Class 2B	Motorcycles <= 200 CC	19 Jul 2002
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver, and motor tractors/vehicles <= 2500 kg	19 Jul 2002
Class 4	Heavy motor cars and motor tractors > 2500 kg	04 Jun 2010

S7060956H

S / No. 9000127290

NP 428A

Licence No: S7060956H



9347674

1000675001H

Police No: **S7060956H**

Nationality: **MALAYSIAN**  
Date of issue: **29-09-2014**

Address: **APT BLK 212A PUNGGOL WALK  
#16-729  
SINGAPORE 821212**






中国太平  
CHINA TAIPING

中国太平保險(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Co. Reg. No. 200208384E

MZ300/C  
R SN  
AN0576A  
Cov.Type: C

MOTOR COMMERCIAL VEHICLE

**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)

ORIGINAL

CERTIFICATE No. DMCVSN1656031701 Engine No : 1KD2448654  
ChaNo: K0Y2318017387

1. Index Mark and Registration Number of Vehicle GBE1424D AUTOSAFE

2. Name of Policy Holder BUGG DESIGN AND SERVICES PTE. LTD.

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment 10 September 2017 Excess Sect I ..... S\$500.00  
EX ON WINDSCREEN ..... S\$100.00

4. Date of Expiry of Insurance 09 September 2018

5. Persons or Classes 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.

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 Policyholder's business.
  - (3) Use for social, domestic or pleasure purposes.
- The Policy does not cover.
- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
  - (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO. : ABWIN PTE LTD AS HP OWNER

\* 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: ..... I. MARKETING AGENCY .....  
Authorised Officer

Authorised Signatory