Date In: 11 6   18 - 15: 38	The second secon	1 0	D
11018-12-18	Job description	Date &Time Completed	Done by
Ref No: NA DAZ 18010639/24	SAS e-filing		
Veh No: 5119853R	E-mail (within Shrs, AIC 2hrs)		
D.O.A :9 6118-22145	i-Motor Claim Form		
	i-Motor W/O (Within: OD 2h	rs, TP 4hrs)	
OD TPY Reporting Only	i-Photo Uploaded		
TD	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand	to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW:	(	Tel: Fax	
TP Particulars: Veh No: S	FW3383H . INC(	)/Non-INC()	
Owner / Driver: (		Tel:	)
Policy No: ( )	Period: ( )	Cover Type: (	)
Confirmed by : (	Date:	Time:	)
Insured/Driver Liability: ( %	6) [Note-Est. Status (WO): N: 0-2	0%; P: 21-79%. P: 80-100	0%]
Year of Registration: (	) Warranty: YES ( )/NO (	)	
	\$1,000( )/\$2,000( )		
General Remarks:			on Silver
Remarks:- (INC hotline: 6788 661)	6)°	Date&Time Completed	Done by
Remarks:- (INC hotline: 6788 661)	6) Ye - 1 (1997) 11 (1997) 12 (1997)	Date&Time Completed	Done by
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Apply for Transport Allowance (     QC Check / Post Repair Inspection	) / Courtesy Car ( )		
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### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- Please report <u>correctly</u> 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.

and the same of			
Activities Commission in November 1933	ACCIDENT STATEMENT		
Date Of Report	11/06/2018 15:38		
Date Of Accident	09/06/2018 22:45		
Exact Location Of Accident	RWS BASEMENT DRIVEWAY		
Country/State of Loss	SINGAPORE		
Base 2 College Add Male No. of the Base D	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SLL9853R		
Insured/Policyholder			
Name Of Registered Owner	TAN, CHIN LEE		
NRIC No	S8219232H		
Email Address	NOEMAIL		
Mobile Phone No	(LOCAL) +65-97962632		
Alternative Phone No	OFFICE-97962632		
Vehicle Particulars			
Manufacturer	VOLKSWAGEN		
Model	GOLF A7 1.4 TSI AT 5G13GZ W/O HID		
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE		

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

Policy Number MT/00385786

Cover Note Number

Driver

Name of Driver TAN CHIN LEE NRIC No S8219232H Date Of Birth 18/06/1982 Occupation INDOOR Date Of Driving Pass 04/01/2011

7 YEARS AND 5 MONTHS Driving Experience

Gender MALE

Mobile Number (LOCAL) +65-97962632

Fax Number

Contact Number OFFICE-97962632

EMail Address NOEMAIL

BLK 70B TELOK BLANGAH HEIGHTS Address

#23-527

Postcode 102070

NO Was driver an employee of the Insured's Company

OWNER 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? YES Was any injured conveyed to hospital by NO ambulance? YES Was any other material or property damaged? I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) Passenger 1

NAME:

GENDER: : MALE

### **Details of Police Action**

Was the accident reported to the police?

NO

2

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

### Circumstances of Accident

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG LANE 3 RWS BASEMENT CARPARK, THE DRIVEWAY WAS NARROW. SUDDENLY VEHICLE B HIT ONTO MY VEHICLE FRONT RIGHT PORTION WHEN MAKING A NARROW TURN. I TRIED TO BRAKE MY VEHICLE, HOWEVER I COULD'T BRAKE IN TIME AND THE IMPACT OCCUR.

## Attachment(s)

Are accident photos available for attachment? YES NO Was there any video captured by Car Camera? Was there any audio recorded? NO

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SFW3383H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR Name of Driver LEE BOON KWEE NRIC/Passport Number S0308692E

Contact Number

Address Postcode

Insurance Company Name

No. Of Passenger (Including Driver)

1

# **DETAILS OF INJURED PERSON 1**

TAN CHIN LEE Name

Approximate Age

Injuries Sustain NECK & BACK Injured person in which vehicle? SLL9853R

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address Postcode

YES

NO

### 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.

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 .:

/We declare the foregoing parti  Policyhotder's Signature Date & Time:	Oriver's Signature (If driver is not the policyhold		Reporting	g Centre Perso	1	Q gnature
DECLARATION			(4			
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DESCRIBE CIRCUMSTANCES						
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	town /					

NRIC/FIN No.:

GIAUMC SketchPlacForm\_vs



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8219232H





TAN CHIN LEE

CHINESE Date of birth 18-06-198

M

58219232H

18-06-1982 Country/Place of birth SINGAPORE

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIE

EFFECTIVE DATE

Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive 04 Jan 2011 of the driver; and other motor vehicles =< 2500kg

NP 428A



518136



NRIC No S82192321



Date of issue 11-06-2013

APT BLK 70B TELOK BLANGAH HEIGHTS #23-527 SINGAPORE 102070

NRIC No: 88219232H

Date: 29/08/2016



Contact us at

Hotline: (65) 6532 2888 E-mail: CustomerService@DirectAsia.com

# CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. MT/00385786

Type of Coverage / Driver Plan Car Comprehensive (Value Plan)

1) Vehicle Registration No.

Chassis No. WVWZZZAUZFW354079

2) Name of Policy Holder Tan, Chin lea

3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act 22/05/2017 15:41

4) Date/Time of Expiry of Insurance : 31/07/2018 23:59

5) Persons or Classes of Persons Entitled to Drive

(a) The Insured

(b) Any person who is named on the policy who is driving on the Insured's order or with his permission.

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use'

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.

\*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured Market Value

Own Damage Excess S\$ 1,200.00 (before any applicable GST) Windscreen Excess S\$ 100.00 (before any applicable GST)

Choice of workshop My Workshop/ My Authorised Distributor Workshop

Finance company / Hire Purchase Standard Chartered Bank (Singapore) Limited

Main driver Tan, Chin lea

Named driver None

Important Note: This policy is on a named driver basis. Any unnamed drivers will not be covered.

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 the Road Transport Act, 1987 (Malaysia).

Issued on:

23/02/2018

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer