Ong Chin Kiat

From:

Woon Choo Kwok

Sent:

Tuesday, 9 January 2018 5:28 PM

To:

Ong Chin Kiat

Cc:

Christopher Chionh; Foo Ai Ngoh; Jason Sim

Subject:

FW: BLUESG - SLU4858M - Accident on 5/1/2018

Importance:

High

Dear OCK

FYA

Best Regards

ok Woon Choo

senior Administrative Officer, Claims Services

Direct line +65 6643 1330 | Direct fax +65 6225 7402 | woonchoo_kwok@sg.msig-asia.com





Insurer Claims Team of the Year 2016

MSIG Insurance (Singapore) Pte Ltd 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | T: +65 6220

9644 | F: +65 6225 6371 | Co. Reg. No. 200412212G | msig.com.sg





A Member of MS&AD INSURANCE GROUP

From: Agnes Lee

Sent: Tuesday, January 09, 2018 5:24 PM

To: Woon Choo Kwok < WoonChoo Kwok@sg.msig-asia.com> Subject: FW: BLUESG - SLU4858M - Accident on 5/1/2018

portance: High

From: MingHao Peh@iltasia.com [mailto:MingHao Peh@iltasia.com]

Sent: 09 January 2018 16:27

To: Claims < claims@sg.msig-asia.com>

Subject: BLUESG - SLU4858M - Accident on 5/1/2018

Importance: High

MSD/VPCP/18-000001

Dear Chin Kiat,

Please be informed of the above captioned new incident.

As MSIG is the new Insurer and still setting up the Merimen system for Client, Client is unable to log the GIA Report.

Please find the documents in the link below.

https://ftp.jltasia.com/?ShareToken=0DF281B3A64EE3B61E8FB54F5667A6F26A6090A1

Password: 123456

Kindly acknowledge receipt of the documents.

Thank you.

Best Regards,
Peh Ming Hao | Executive | Claims | Jardine Lloyd Thompson Pte Ltd
Co. Registration No. 196900157N

138 Market Street | #07-01 CapitaGreen | Singapore 048946
Tel: 6333 6311 | DID: 6411 9223 | Fax: 6333 6511

MingHao Peh@iltasia.com | www.asia.ilt.com

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(Email Disclaime)

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Accident Report

cident Report		Time of Accident	10152pm
Date of Accident	5 01 2018	Time of Accident	
Date of Reporting	6 01 2018	Time of Reporting	0149Am
Location of Accident	Pan Island	Expressway	
Vehicle Registration No.	SLU 4858 M	Company Registration No.	201617259H
Vehicle Make	Bluecar	Vehicle Model	Bluecar (A)
Registered Owner	Bluecar East Asia Pte. Ltd.	Office No.	3163 7900
Vehicle Category	Private / Commercial /		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Insurance Co.	India / QBE / Liberty / El	tiqa / Tokio / Lonpac / EQ / Zurio	ch / MSIG
Type of Coverage	Comprehensive / Third	Party / Third Party, Fire & The	ılt .
Policy No.	MSD/VPCP/18-000001		
Type of Claim	Own Damage	Third Party	Reporting Only
Name of Driver	Low Wen Ho	ao Dwayne	
NRIC / FIN / Passport I	No. 598133096	Date of Birth	28/04/1998
Residential No.	6784 1010	Mobile No.	96307178
Residential Address		mpines St 11, #02	-438 (\$521127)
Email Address	dwaynelow 21	@gmail.com	
Occupation Nature	(Indoor)/ Outdoor Student	Gender	Male / Female
Licence Pass Date	01/09/201	6 Years of Driving Experience	1 year 4 months
Driver Status	Owner Non-Owner		
Relationship with Own	ner BuesG		
Driver's Own Vehicle	Registration No		
Type of Accident			

Weat	ther Condition Clea	Raining / Other:		
Road	d Surface Condition Dry	Wet / Other:		
Wer	re you approached by anyone	Yes I(No)		
				No.
Wa	s a police report made?			Yes No
10/-	as any foreign vehicle involved	Yes /(No)		
VVa	as any loreign vehicle involved	a in the accident:		
W	as anybody injured during the	Yes / (No)		
1				Ä
W	as there any other vehicle or p		Yes (No)	
				Yes /(No)
N	Vas there any video captured b	by your car camera?		Tes /(No
N	Number of passengers (including		TO A THE PARTY OF THE	
	tumber of passengers (mersen			
	Details of Other Vehicles	Vehicle B	Vehicle C	Vehicle D
THE REAL PROPERTY.	Vehicle Registration No.	SHC8402K		
	Vehicle Make / Model	Hyundai i40	Hyundai 140	
	Name of Driver	Koh Hsieus Chith		
	NRIC / FIN / Passport No.	58018964 H	10000000000000000000000000000000000000	
	Contact No.			
	Name of Insurance Co.		经上面上沿线的	OF CARLETON OF REAL PROPERTY.
			D	
	Details of Witnesses Name	Person 1	Person 2	Person 3
	Contact No.	Koh Hsien Chih		
	Details of Injured Person	Person 1	Person 2	Person 3
	Name			
	Contact No.			

Driver's Declaration: I declare that the information given in this report is true and accurate to the best of my recollection and I bear full responsibility for all consequences arising out of or in connection with incomplete or inaccurate information submitted.

Signature of Driver

6/1/2018 0149 Am



1 of 2

Report No. G/20180106/2007

POLICE REPORT (NP299)

Police Station Of Origin Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

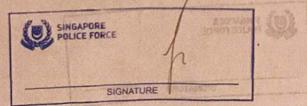
Date/Time Report Made 06/01/2018 01:06	Vide Rep	oort No.		Station Diary No 16		
Name Of Informant LOW WEN HAO DWAYNE		Address APT BLK 127 TAMPINES STREET 11 #02-438 SINGAPORE 521127				
ID Type / ID No. NRIC NO / S9813309G	Contact No. Home/Office Mobile 96307178					
Nationality SINGAPORE CITIZEN	Email Address					
Occupation Student Institution/School Name Singapore Polytechnic Date/Time Of Incident 05/01/2018 22:40	PAN-ISL	Of Incident	RESSWAY SINGA	Race Chinese PORE		

Brief details.

I am lodging this report for record purposes.

On 05/01/2018 at about 2242hrs, I was travelling along PIE towards Changi Airport. I was driving a Blue SG Rental Car Reg No: SLU4858M. Just before Eunos Exit, there were two taxis driving in front of me. The first taxi Reg no: SHA7675G make a sudden brake and stop causing the taxi in front of me Reg no: SHC8402K to brake immediately. I also steps on the brake however could not stop and avoid hitting the

Signature Of Informant: Signature Of Officer Recording The Report: G / Sr Staff Sgt MUHAMAD FAISAL BIN MOHD SALEH Date/Time: 06/01/2018 01:06 Signature Of Interpreter: Not applicable Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Staff Sgt MUHAMMAD KHIDHIR BIN MOHAMED Classification Of Case: HASHIM Contact No.: 62440000 Authentication Stamp







Report No. G/20180106/2007

POLICE REPORT (NP299)

CONTINUATION OF REPORT

taxi. I then came out of the car and discovered that the front bumper of my Blue SG car was badly damaged, the windscreen crack and also the air bag was deployed. The taxi rear bumper do not have any damaged. The taxi driver have two passengers and nobody informed they are injured.

I took details of the taxi driver and the vehicle Reg number and subsequently the taxi driver left the scene. I contacted Blue SG Support Hotline and was told to lodge a police report for their own follow up action and insurance claim.

Signature Of Officer Recording The Report: G / Sr Staff Sgt MUHAMAD FAISAL BIN MOHD SALEH

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Staff Sgt MUHAMMAD KHIDHIR BIN MOHAMED HASHIM

Contact No.: 62440000

Authentication Stamp

Signature Of Informant:

06/01/2018 01:06

Classification Of Case:

SINGAPORE

SIGNATURE

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 <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>.
- 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:
 - (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.

Driver's Signature

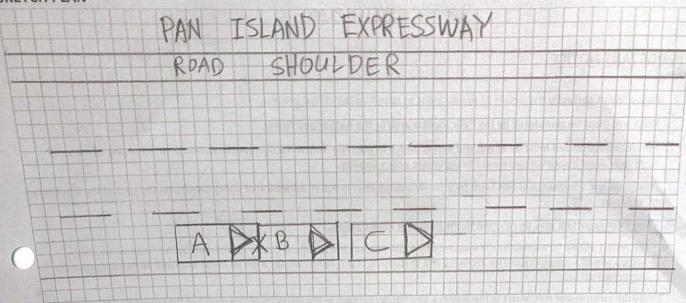
(If driver is not the policyholder)
Date & Time: 9 1118 2:00 pm

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

A:SLU4858M C:SHA7675G B; SHC8402K

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Car from Bukit Botok Station and wanted rented ne simei charging station. While on travelling at the speed of nearing Talon EUNOS PXI+ the first lane. Vehicle C explanation and Vehicle has no brake Jam torgas brake lam brake as well effective for me to stop in time and when the air bags got deplayed and windercan shaftered but still in frame. All the drivers come driver C for reason. Driver C then said he will leave not hit him. Driver B then exchanged details with me but left soon after because there was not a single Scratch on his vehicle After the cor was towed to the empty carpark in Euros, I than tound front was made out of Plastic which the damage to the and taxi Made of requirer

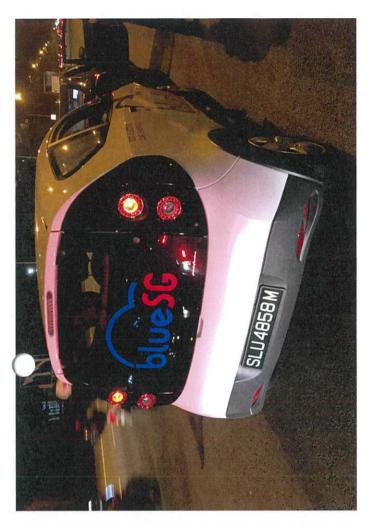
DECLARATION

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

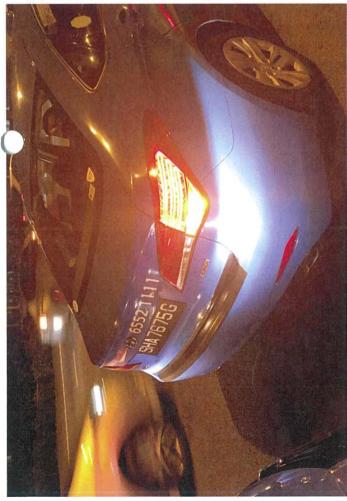
Driver's Signature

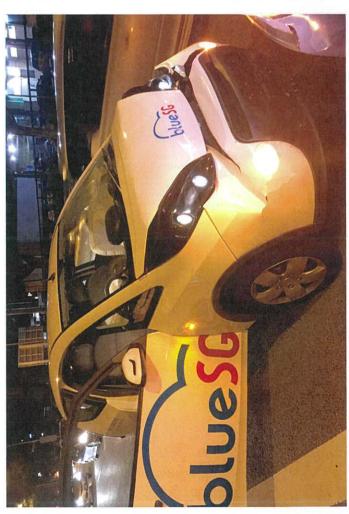
(If driver is not the policyholder) Date & Time: 9 1118 2100PM Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

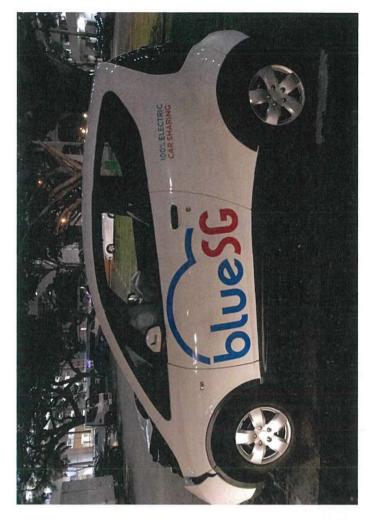
Policyholder's Signature Date & Time:













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