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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.
- 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.

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	ACCIDENT STATEMENT
Date Of Report	03/07/2018 14:01
Date Of Accident	03/07/2018 09:40
Exact Location Of Accident	CROSS JUNC OF JLN BUROH / JURONG PORT ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJD4867A
Insured/Policyholder	
Name Of Registered Owner	BEE96 TRANSPORT
Co Reg No	53351137B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98382538
Alternative Phone No	OFFICE-98382538
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC IMA A
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5086605991-01
Cover Note Number	
Driver	
Name of Driver	LIM KOK SENG
NRIC No	S1691750H

 Name of Driver
 LIM KOK SET

 NRIC No
 \$1691750H

 Date Of Birth
 06/07/1965

 Occupation
 OUTDOOR

 Date Of Driving Pass
 09/03/1987

Driving Experience 31 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98382538

Fax Number

Contact Number OTHERS-98382538

EMail Address NOEMAIL

BLK 686A WOODLANDS DRIVE 73 Address

#07-52

731686 Postcode

Was driver an employee of the Insured's Company NO

OTHER - CO OWNER If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE RAINING Weather Conditions WET Road Surface

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?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Remarks/ Reasons: Was there any audio recorded? YES YES

YES

NO

YES

NO

1

NO

NO

REVERT

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

XD9078L

Vehicle Make/Model/Colour

TRC3191H

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address Postcode LIM KOK SENG

SLIGHT

SJD4867A

YES

SKETCH PLAN

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.
- 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.

GEE96 TRANSPORT Co Reg No. 53351137B

Policyholder's Signature Date & Time:

Driver's Signature

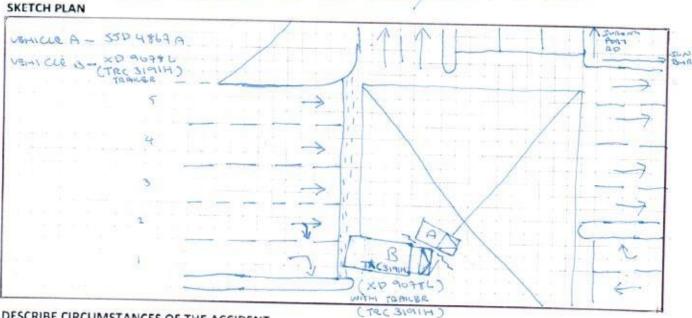
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was parking ALDRY JUN BURDLY TOWARDS PLONEER RUAD
DIRECTION, I WAS ON THE 2nd LANG, WITH INTENTION TO
THEN RIGHT TO JURING PORT ROAD (TOWARDS CORPORATION ROAD)
WHEN BY THE CROSS JUNCTION OF (JUN BUROH / JUNNIL PORT R
TOWARDS CORPORATION WHEE I WAS AT THE MELLOW BOX, SLOWING
DOWN TO GIVE WAY TO THE ON-GOING VENICUE FROM THE
opposite DIRECTION, SHODERRY I FELT A GREAT IMPORT
THIR RIGHT SIDE OF MY VENICUE.
ALIGHTED FROM MY VEHICUE, AND REALIZED A TRUCK (XD907) WITH A TRAILER (TRC 3191H) WAS ALSO MAKING A RIGHT TURN
FROM THE EXTREME RIGHT LANE, AND WHICH CAUSES HIM TO MAKE
A WIDE RIGHT TURN WHICH CAMSES HIM TO COLLIDE TO THE RIGHT SIPE OF MY VEHICLE.
FRONT VIEW FOOTAGE WAS CAPTURED BY MY IN-CAR CAMBRA.
NEMICUE A_ SJD 4867 A
VEMICUE B- XD 9078 L (TRC 3191 H TRAILER)

DECLARATION

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

BEE96 TRANSPORT Co Reg No: 53351137B

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 .:

Model / Make HONDA CINIC 1/07 / 2018 DORAGO HRS LOSS JUNCTION OF JLN BURNET SURENT PORT ROAD WORMAN LOUR EL 46 TRANSPORT D: 98372538 Home: Office: 3351137B LK 686 A WOODLANDS DR 73 # 07-52 S(731686) THIRD PARTY REPORTING ONLY NAME INTERPORT TO PARTY Third Party / Fire / Theft TO 8 660 S a a 1 - 0 Above If No. LIM KOK SEND 16 91750 H Any Passengers: NIL 16 91750 H Any Passengers: NIL 16 91750 H OFFICE: K 686 A WOODLANDS DR 73 # 07-52 S(731686) If yes, Reg No. ployee, If no, state ar Raining Other WED Other
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tdoor / Indoor of Mar 1977 le / Female 0: 98382538 Home: Office: K 686 A WOODLANDS DR 73 # 07-52 S(731686) If yes, Reg No. ployee, If no, state or Raining Other Wet Other
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If yes, Reg No. ployee, If no, state
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ar Raining Other Wet Other
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If Yes, Who?
IM KOK SEAL, 98382538
If Yes, Where?
Any Passengers:
Contact No.:
Any Passengers :
Witness Contact :
No FRONT

REPUBLIC OF SINGAPORE DENTITY CARD NO. \$1691750H





LIM KOK SENG

林国

CHINESE Date of birth S 06-07-1965 A Country of birth

SINGAPORE

Sex M

\$16**9175**0





NRIC No. S1691750H

Date of issue

17-03-2011

APT BLK 686A WOODLANDS DRIVE 73 #07-52 SINGAPORE 731686 JU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)
PASS DATE

Class 2B Motorcycles not exceeding 200 cc Class 3 Motor Cars and Motor Tractors the weight of 25 May 1988 29 Mar 1987



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: 5086605991-01

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

SJD4867A

Chassis Number

: JHMFD36208S206478

2 Name of Policyholder

: BEE96 TRANSPORT

3. Effective Date of Insurance

: 25 Mar 2018

4. Expiry Date of Insurance

: 24 Mar 2019

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) : 5\$2,000 EXCESS (SECTION 2) \$\$1,500 WINDSCREEN EXCESS : \$\$100 ADDITIONAL EXCESS : N/A

UNNAMED DRIVER EXCESS PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE YES NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO EXCESS WAIVER · NO PRIMARY DRIVER : UM KOK SENG

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

: INDEX AGENCY PTE LTD (00000572017)

Date of Issue

: 07 Feb 2018 10:43 hrs

FOR NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

eBao Tech									Gene	ralClaim
Hello, NAC_PAYA_UBI_80 My Desktop						,	Change La	nguage	· Change Passwor	d · Log Out
Notice of Loss	Poli	cy Query								
	Policy !	No.				Date of Ac	cident	03/07	7/2018 09:40	
	Vehicle	No.(For Motor)	SJD4867A					[5.474]	12010 00.40	
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence	Expiry Date
	9	5086605991- 01	BEE96 TRANSPORT	53351137B	GPC	drivo CLASSIC		SJD4867A	Date 25/03/2018	24/03/2019

Policy Information

Policy No.	5086605991-01	Policyholder Name	BEE96 TRANSPORT	Policyholder NRIC	53351137B
Address	BLK 686A #07-52 WOODLAND	S DRIVE 73 SIN	IGAPORE 731686	539/50-00/	
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	07/02/2018	Effective Date	25/03/2018 00:00	Expiry Date	24/03/2019 23:59
Third Party Excess	1500	Own damage Excess	2000	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000	Outside Singapore TP Excess	1500		
Agent	INDEX AGENCY PTE LTD	Agent Tel.		GST Flag	Υ
Co- insurance Flag	No				W.
Open Policy Info					
Certificate Info					
	older Mailing Address				
Address 1	BLK 686A #07-52	Address 2	WOODLANDS DRIVE 73	Address 3	SINGAPORE 731686
Address 4		Address Type	Singapore address	Post Code	731686
Jnit No.	07-52	Related Policy Number	5086605991-01		
▶ Insured	Object: SJD4867A				
▼ Endorse	ements				
Sequence	Date of Endorsement	Endorsen	nent Type Endors		

Continue Cancel

Claim Handling

Policy No.	5086605991-01	Vehicle No.	SJD4867A	GST Registration No.	
Policyholder Name	BEE96 TRANSPORT			***************************************	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Policyholder NRIC	
Contact No.(Mobile)	98382538	Contact No.(Office)	0	Loading	
Email Address	F-12-3-1-7-6-5-	Special Remark	0.	Contact No.(Home)	
KFK	» No Yes	TCA	and Machine Machine	eCode	-
NCD Protection	No		No Yes	eCode Reason	
Accident Details	140	NCD Entitlement(%)	20	Private Hire	1
Report Date	1 # 954 #04 #050 (20)	rechanged with a child by the specific and the specific a	STANCE.		
	04/07/2018 09:54	Accident Report Within 24 hrs	Yes	Accident Type	5
Date of Accident	03/07/2018	Time of Accident hh:mm	09:40	Country of Accident	9
Reporting Centre		Orange Force		ICM No.	
Accident Location	CROSS JUNC OF JLN BUROH / JURONG	PORT ROAD			
▽ Benefits					
▽ Excess					
Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	1
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00	The second second	,
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
GST Registered Inform	ation	555 S S S S S S S S S S S S S S S S S S	1,500.00		
GST Registered	Yes		GST Registration Date		
GST Registration No.	533511378		GST Status Verified	28/11/2016	
Modification History				No	
Policyholder Mailing A	ldress				
Address 1	BLK 686A #07-52	Address 2	WOODLANDS DRDUS TO	AND THE PARTY OF T	n to
Address 4			WOODLANDS DRIVE 73	Address 3	-
Unit No.	07-52	Address Type	Singapore address	Post Code	3
♥ OI Driver Info	W/-32	Related Policy Number	5086605991-01		
Driver Name	LIM KOK SENG		18 E 4 1 12 10 10 10 10 10 10 10 10 10 10 10 10 10		
Unnamed driver Name	EIN NON SENG	Driver Type	Main Driver		
Register Date of Driver License	00/03/1007	Driver NRIC	S1691750H	Driver DOB	0
Contact No.(Mobile)	98382538	Driver Age	52	Driving Experience	3
Address 1		Contact No.(Office)	0	Contact No.(Home)	0
Address 4	BLK 686A	Address 2	WOODLANDS DRIVE 73	Address 3	
Init No.	FO 200-200	Address Type	Singapore address	Post Code	7
Does he own a Singapore	#07-52				
Registered car?	Yes = No	Driver Vehicle No.		Driver Insurer Company	
eclaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	○ Yes ● No		
and ing :			Tes & No		
Carrier Landson					
odification History					
Claim 001 OD-MX New	Jh .				
	111				
laim Type •	OD-MX	Insured Name	BEE96 TRANSPORT	Insured NRIC	le:
ontact No.(Mobile)	NIL	Contact No.(Home)		COMMON PROPERTY CHARLES	53
mail Address		OI Vehicle Number	ETD49674	Contact No.(Office)	53 XC
laim Description	SJD4867A / XD9078L ON 3 Jul 2018	or remote normal	SJD4867A	TP Vehicle Number	X
referred Workshop Contact	100 100 111 110 100 100 100 100 100 100	Z S SON POZICIONANO III.		Name of Preferred Workshop	
0.		Insured Liability •	Partially at Fault ▼		
equire Finalisation	Yes v	Preferered Repair Option	Preferred Workshop, Name unknown	GIA report	R
ate Registered	04/07/2018 10:01	Claim Close Date		Date Received	04
eport Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired	- Inches
Print AK letter				ON OUNSELENS PRINCIPLES	
			Save Submit		
100-1					
Attachment					

Claim Handling(accident reporting Claim Task 001 OD-MX)

Accident No. Last Doc. Received

MT/1001527

● Yes ○ No

Path .

Claim No.

Upload Date

04/07/2018 10:00

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	Urgency	ential	Confide	•	Category	
13	Normal	*	NO		Please Select	Clear
-	Normal		NO	•	Please Select	Clear
-,	Normal	•	NO	•	Please Select	Clear
	Normal		NO	•	Please Select	Clear
	Normal	*	NO	*	Please Select	Clear
-,	Normal	•	NO	*	Please Select	Clear

Attachment List

Message Read

					Uploaded By/Date
Photos 20	Normal		Photos	NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	
Photos 20	Normal		Photos	NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UBI_800601
Photos 20	Normal		Photos	NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UBI_800601
Photos 20	Normal		Photos	(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UBI_800601
Photos 20	Normal		Photos	(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UB1_800601
Photos 20	Normal		Photos	(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UBI_80060
Photos 20	Normal		Photos	(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UBI_80060
Photos 20	Normal		Photos	(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UB1_80060
Photos 20	Normal		Photos	(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UB1_80060
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Photos 20	Normal		Photos	I (NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UBI_80060
Photos 20	Normal		Photos	1(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:58	NAC_PAYA_UB1_80060
Photos 20	Normal		Photos	1(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:59	NAC_PAYA_UBI_BD060
Photos 2	Normal		Photos	1(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:59	NAC_PAYA_UBI_80060
Photos 2	Normal		Photos	ol (NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 09:59	NAC_PAYA_UB1_8006
SAS 20	Normal		SAS	Jul 2018 09:59	NAC_PAYA_UBI_8006
NRIC/ Driving L	Normal		NRIC/ Driving License	DI(NATIONAL ASSESSMENT CENTRE SERVICES) on 04 Jul 2018 10:00	NAC_PAYA_UBI_8006
Descr	Urgency	9	Category	Uploaded By/Date	Attachment

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