NATIONAL Assessment Centre Services	Munus 91892	
*Date In: 16/07/2014 19/28 Jeb description	Date & Time Completed	Done by
10 Ve 0 100 100 01/1		
- Meditivity	10020	
12.72		
D.O.A. 1407 206 12:30 i-Motor Claim		
OD / P Deverying Chale	(Within: OD 2hrs. TP 4hrs)	mails for the
i-Photo Upioa		
TP Insurer Assessment/Sur	AND THE PROPERTY OF THE PROPER	
	Fax / Hand to Owner/Wksp Fax:	
Preferred Wksp / INC Assign Wksp / QW: (100	
TP Particulars: Veh No: SCC/96/H	INC()/Non-INC()	1
Owner / Driver: (Tel:	
Policy No. () Period: () Cover Type: (
Canfirmed by : (Date: Time:	
Insured/Driver Liability: (%) [Note-Est Status (W		
Year of Registration: () Warranty: YES ()/NO()	
Excess: (\$) Loading: \$1,000 () / \$2,000		
General Remarks:-	Tellings, and an arranged to the second seco	
() Walk-In Customer's Information strictly Con	nfidential & Strictly NO rater of repairer.	
() Total Loss Case : to e-mail Insurer URGENTLY.		
Drive-In () / Towed-In (); Invoice: YES () / N		
Remarks:- (INC horline: 6788 6616)	Date&Time Completed	Done by
Apply for Transport Allowance () / Courtesy Car ()	
2) QC Check / Post Repair Inspection ()	
3) Upload Resurvey Photo [Repair Cost > \$3000] ()	
Injury :	1	
	A STATE OF THE STA	
Date/Time Actions		
		SO COME OF SHARE HIS
	Invoice Preparation Checklist	Amt (\$) Amt (
The second of the second secon	1) AR : Aggident Reporting (\$30);	IR BIII COOL
Claimant's Particulars:-	2) DA : Damage Assessment (\$100); INC (\$80)	
Driver/Owner:	4) FT : Follow-Through Survey \$120	
Contact No:	5) FT : Follow-Through Survey (Resurvey) \$30 For claiming against INC Only (wef 10 Jen 2005)	
6) TR: Re-inspection \$75		
Damaged Portion:	7) N1 : Idae DA + SMRT Survey \$160 8) NTUC Additional Services:-	
OC Charled by Wage In Chargo's	OD.	
QC Checked by (Engr-In-Charge):	*N6: Repair Co-ordination 310	
Auditors! Comments:	*N7: Post Repair Inspection \$25 *N8: DV / Collect Excess Coordination \$5	
Auditors' Comments :-	TP (N11): TP (N:m INC) against INC \$20	
2at. 12	9) N12 Idao Mobile 30 Invoice dated Fee Charged	4 6 5 7 5
Cat. 2 / 3:	Invalue dated Fee Charged	1824.

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 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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- 4	\mathbf{c}	15/51)	11 31	-11	- 10	

Date Of Report

16/07/2018 19:28

Date Of Accident

14/07/2018 12:30

Exact Location Of Accident

ALONG HOUGANG AVENUE 9

Country/State of Loss SINGAPORE

-		1100	FOU	WALL V	E13	~	ı
u	EIA	ILS O	F OV	AM A	спі	UL	-

Vehicle Registration Number

Name Of Registered Owner

GBD1446X

Insured/Policyholder

LANDBIZ

Co Reg No

53376403C

Email Address

NATEKEK@YAHOO.COM.SG

Mobile Phone No

(LOCAL) +65-96888481

Alternative Phone No

OFFICE-96888481

Vehicle Particulars

Manufacturer

NISSAN

Model

NV350

Exact Purpose for which vehicle was being used at

time of accident

DOING DELIVERY

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

EQ INSURANCE COMPANY LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

DMCHHQ18-000065

Cover Note Number

Driver

Name of Driver

KEK CHOON THONG

NRIC No Date Of Birth S7111455D

Occupation

11/04/1971 OUTDOOR

Date Of Driving Pass

29/07/1991

Driving Experience

26 YEARS AND 11 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-96888481

Fax Number

Contact Number

OTHERS-96888481

EMail Address

NATEKEK@YAHOO.COM.SG

Page 1 of 16

Address

5 CANBERRA DRIVE

#04-09

Postcode

768103

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

COLLISION - HEAD ON COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

NO 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 (TYPE OF COLLISION IS HEAD TO SIDE)

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

SLC7467H

Vehicle Make/Model/Colour

SUBARU

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

TAN MUI LENG

NRIC/Passport Number

S1679191A

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.
- 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.
- 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:
 - 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

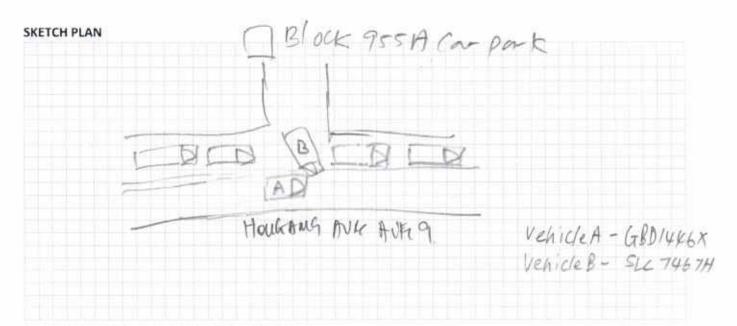
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ate: 14072018	
ime: 1230pm	
was priving vedicle A along Housang Ave 9, when I warm	ed the
Quicle B main out from there I try to Horn and Jam Bren	K But
's alvery toolate	

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.

NRIC/FIN No.:

ools STAMP

ACCIDENT STATEMENT

ACCI	DENT DATE: (14 / 07 / 2018)(DD/MM/YYY	Y). TIME:(12 : 30)(HH:MM)
LOCA	TION: Along Hougang Ave 9	
1.	DETAILS OF VEHICLE a) VEHICLE NUMBER: GBD 1446 X b) INSURANCE COMPANY: CG INSULAN	(e
	c)POLICY NUMBER: Description of the Description of	PACHE 18-00065 ARTY / THIRD PARTY FIRE &THEFT) RY / MOTORCYCLE / OTHERS) CIAL / MOTORCYCLE) Delivery
	IF NO, PLEASE STATE (THIRD PARTY CLAIM / F	The state of the s
2.	A)NAME: KEK (HOON THINK b)NRIC/FIN/PASSPORT: STINYSSD c)ADDRESS: BKS COLORIDA DIVE	(MALE) FEMALE) CONTACT: 9686895
x × ×	- Simpopore 76/103	
His of passanga, (Including divar)	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HIDRIVER a) NAME: LANDBIZ.	OLDER(MALE / FEMALE)
(1)	b)NRIC/FIN/PASSPORT: 53376403 C c)ADDRESS:	CONTACT:
	*d)DATE OF BIRTH: (1/) 04 / 1971 (DD) e)OCCUPATION: (INDOOR (OUTDOOR) f)YEARS OF DRIVING EXPRERIENCE: 2 7	/MM/YYYY)
4.	WAS DRIVER AN EMPLOYEE OF THE INSUR IF NO, RELATIONSHIP OF THE DRIVER WIT	
5.	a) WEATHER CONDITION: (CLEAR) RAINING /	
	b)ROAD SURFACE (DRY) WET / OTHERS	
	WAS ANYBODY INJURED (YES (NO) a) REPORTED TO POLICE (YES /NO) IF YES, PLEASE STATE WHICH POLICE STATION	4:
this of passenger	third party vehicle o) VEHICLE NUMBER: SLC 7467 H b) DRIVER'S NAME: Tab Mui Le	MODEL: SUBALG.
7 1	c) NRIC/FIN/PASSPORT: 5/679/9/A	CONTACT:
700	THIRD PARTY VEHICLE	
action at barrential	d) VEHICLE NUMBER:	MODEL:
(Industing driver)	e) DRIVER'S NAME:	CONTACT:
()		

Place = Note Kex@ Yahoo rom so,

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7111455D



KEK' CHOON THONG

CHINESE 11-04-1971 Country at birth SINGAPORE



4210984



Date of leave

09-04-2008

5 CANBERRA DRIVE #04-09 SINGAPORE 768103

NRIC No: 871114550

Date: 14/12/2015

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not ax seed 2500 killograms

NP 428A



EQ Insurance Company Limited

5 Muxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg no. 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA) THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

COMMERCIAL VEHICLE HIRE (SCH II) Comprehensive

Certificate No.: DMCHHQ18-000065

Form: LCVT1 Excess:

All Claims YEID

WindScreen

\$\$500.00

Additional

\$\$3,000.00 All Claims 55100.00

2. Name of Policyholder

LANDBIZ

GBD1446X

3. Effective Date of the Commencement of Insurance for the purpose of the Act 16/03/2018

4. Date of Expiry of Insurance 15/03/2019

Person or Classes of persons entitled to drive*

Index Mark and Registration Number of Vehicles

Goods Carrying - Hire Type (MZ301). Any of the following:-

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of. Court of Law or by reason of any enactment 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 has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use in connection with the insured's business.

Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.

Use for social domestic and pleasure purposes.

THE POLICY DOES NOT COVER:

Use for racing, pace-making, reliability trial or speed testing.

Use whilst drawing a greater number of trailers in all than is permitted by Law.

Use for the carriage of passengers for hire or reward.

4) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

*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.

IWE 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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Hitachi Capital Asia Pacific Pte Ltd

A000423/Car Insurance Agency Pte Ltd Date of Issue: 13/03/2018 15:05

Authorised Signatory EQ Insurance Company Limited

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

