NATIONAL Assessment Centre Servi	ices MUAU8094852		
	escription Date & Tune Completed	Done by	
REFNINBALLPC (180/332114 SAS	e-filing		
OUT OND A	nail (within Shrs, ADC 2hrs)		
TAPULA CONT	otor Claim Form		
i-Me	otor W/O (Within: OD 2hrs. TP 4hrs)	****	- 34-41-
OD ( P ) Pepotting Only	oto Uploaded	100	
Asset	ssment/Survey Report		
TP firsurer:	Report by Fax / Hand to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (	Tel: Fax:		- 115
TP Particulars: Veh No: SCT 7	TIR 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%	1	
Year of Registration: ( ) Warranty:	:YES( )/NO( )		
Excess: (\$ ) Loading: \$1,000 ( )	)/\$2,000(		
General Remarks:-	"一块"的数据是包含着2.4%。16.0%。15.0%。	Pi.	
( ) Walk-In Customer: Customer's information s			
( ) Total Loss Case : to e-mail Insurer URGE			
Drive-In ( )/ Towed-In ( ); Invoice: YES (	MATERIAL CONTRACTOR CO		1
princial ( ), lavoice. res (	) / NO ( ) , Towing Co. (		
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]	( )	, ii	
Injury :			
Tityany .	•		-
Date/Time Actions		12844.5	ì.,
38	Invoice Preparation Checklist	C. 10 10 10 10 10 10 10 10 10 10 10 10 10	mt (\$) dd Bill
A. GERT EALTHOUGH AN ACTION OF THE SECRETARY LINES OF THE SECRETARY	1) AR : Accident Reporting (\$30);	Ist Bill Ad	a Bill
Claimant's Particulars :-	2) DA : Damage Assessment (\$100); INC (\$80)		
Priver/Owner:	3) TF : Towing Fee \$40/\$45 4) FT : Fallow-Through Survey \$120		
Contact No:	5) FT: Follow-Through Survey (Resurvey) \$30		- 11
	For claiming against INC Only (wef 10 Jan 2005) 6) TR: Re-inspection 575		
Damaged Portion:	7) N1 : Idae DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		7
2C Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpt Allowance \$5		. 10.
1	• N6: Repair Co-ordination 510 • N7: Post Repair Inspection 525		- HS
Auditors' Comments :-	*N8: DV / Collect Excess Coordination \$5		77
at. 1:	TP (N11): TP (Non INC) against INC \$20		
at 2 / 3:	9) N12: Idaa Mobile 30  Invoice dated Fee Charged	27	7.
	Involve dated Fee Charges	:1045	

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Contact Number

EMail Address

- 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.
- 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.

- 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.

aforesaid.		
TO SERVICE AND SER	ACCIDENT STATEMENT	
Date Of Report	23/07/2018 14:48	
Date Of Accident	21/07/2018 15:05	
Exact Location Of Accident	PIE TOWARDS CHANGI AIRPORT NEAR TOA PAYOH	
Country/State of Loss	SINGAPORE	
S. C. Sales State of the D.	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKL933P	
Insured/Policyholder		
Name Of Registered Owner	WEE HEAN CHYE NICHOLAS	
NRIC No	S1441850D	
Email Address	JOEL.CM.WEE@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-92206754	
Alternative Phone No	OTHERS-92206754	
Vehicle Particulars		
Manufacturer	INFINITI	
Model	Q50-2.0 T PREMIUM (A)	
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?	NO	
If No, Please state action to be taken	THIRD PARTY	
Vehicle Category	PRIVATE CAR	
Insurance Company		
Name of Insurance Company	LONPAC INSURANCE BHD	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	Z18VP05019116	
Cover Note Number		
Driver		
Name of Driver	JOEL WEE CHONG MIN	
NRIC No	\$8923484J	
Date Of Birth	06/07/1989	
Occupation	INDOOR	
Date Of Driving Pass	15/06/2010	
Driving Experience	8 YEARS AND 1 MONTH	
Gender	MALE	
Mobile Number	(LOCAL) +65-92206754	
Fax Number		

OTHERS-92206754

JOEL, CM. WEE@GMAIL. COM

Address

BLK 130 TAMPINES STREET 11

#10-334

Postcode

521130

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

3

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

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)

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

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

SKT7117R

Vehicle Make/Model/Colour

BENTLEY

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

TIMORTHY TAN WEI YAN

NRIC/Passport Number

S8635385G

Contact Number

90218466

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 2** 

Vehicle Registration Number

SKQ8099T

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver

realine of Differ

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Passenger 1

MAZDA

PRIVATE CAR

PATRICK GOH MUI SENG

S1798120Z

98573859

2

NAME:

GENDER:

#### 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.
- 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.
- 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

23. July - 2018

(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	1 Tuas.	1 Changi Airport
TOA PAYOH  Buddhist  Euryle		SKD 8019 DRAIN SKL 933 P
RAFFER NO A		
<b>DECLARATION</b> I/We declare the foregoing particular	rs are true in every respect.	Tuy 2018 20/00/00
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.:

Date of incident: 21st July 2018

Time of incident: 15:05

Place of incident: PIE along Toa Payoh

Vehicle number: SKL 933P

Driver: Joel Wee

License number: 58923484J

Issue date: 15th June 2010

Details: I was driving along the PIE around TPY during heavy traffic. I was driving behind a red Mazda. An unknown car jammed break and also applied my jam break. A white Bentley driving behind hit me and caused my car to push forward into the red Mazda. I took pictures of the collision between the red Mazda and me as well as the Bentley and the back of my car. I also exchanged contact information between both drivers involved and received a copy of their driving license. No persons were injured in the accident, no damage to government property was sustained and no foreign vehicles were involved.

My car boot door is misaligned. There are scratches and dents on the bumper.

In the front, the hood is scratched and the front license plate has been split open.

Apart from surface damage, it is yet unknown if there are internal damages. The car is still operable.

graz lonhous Ros Liverters

Car that hit me: White Bentley, SKT 7117 R

Driver of Bentley: Timothy Tan, \$8635385G

Contact info: 9021 8466

License issue date: 1st June 2006

Car I hit: Red Mazda, SKQ 8099 T

Driver of Mazda: Patrick Goh, S1798120Z

Contact info: 9857 3859

License issue date: 16th Dec 2002

fus car :

## ACCIDENT STATEMENT

	71 07 7018 15 05
AC	CIDENT DATE: (21 107 2018 ) (DD/MM/YYYY), TIME: (13:05) (HH:MM)
LO	CATION: PIC on Toa Patoh
- A	C 033.D
20	1. DETAILS OF VEHICLE SAL 933 P
	DINSURANCE COMPANY: LON PAR INSURANCE BILD
	d)POLICY NUMBER: d)POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)
	e)MAKE & MODEL: Infinity Q50 7 Premium 2.0
	()TYPE: (SALOON / COUPE / MPY /V AN / LORRY / MOTORCYCLE / OTHERS)
	g) VEHICLE CATEGORY: (PRIVATE) COMMERCIAL / MOTORCYCLE)
	HIPURPOSE OF USING AT ACCIDENT TIME: YEVSAGE CYTAND
	I) ARE YOU CLAIMING UNDER YOUP OWN INSURANCE (YES/NO)
	IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)
	2. INSURED / POLICY HOLDER ANAME: Wee Hear Chie Widolas (MALE / FEMALE) -
	6) NRIC/FIN/PASSPORT: 5144-1850 D CONTACT: 9220 6754  C) ADDRESS: 130 TAMON ST 1 #10-334 5 521130
s 8	CINDORESS. 1 = 0 INTERIOR STATE OF THE STATE
	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER
₩Ho of passange	3. DRIVER Tool Like ( Lane Mark
Cincluding drive	) divame do
CLI	DINNE/FINIT ASSTORT.
-17	c) ADDRESS: 150 190400 /9000 3t (1 #10-354. 3521130
	*d)DATE OF BIRTH: (06 / 07 / 907 )(DD/MM/YYYY)
20	BLOCCUPATION: IINDOOR / QUITDOOR!
	DATE OF DRIVING PASS 15 June 2010
	4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES (NO)
i	IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: 12 THEY  S. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
	b)ROAD SURFACE: (DRY / WET / OTHERS
6	WAS ANYBODY INJURED (YES ANO)
	a) REPORTED TO POLICE (YES / NO)
	IF YES, PLEASE STATE WHICH POLICE STATION:
ews of many	
tho of pascinger	
Claduating drives	C) NRIC/FIN/PASSPORT: SK635385 G CONTACT: 9021 8466
( ) 9	TUIDO D'ARTY VEHICLE
A ion of pursonness	a) VEHICLE NUMBER: SKO 8099 7 MODEL: Mazda
26 The Control of the	E E LIGITATION CONTRACTOR CONTRAC
(Including drive	4) NRIC/FIN/PASSPORT: 517981207 CONTACT: 9857 3859
(2)	· ·
	CON 1 =
19	email = Joel & wee & grail com
	J. 71.
	And the second s



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 15 Jun 2010 of the driver; and other motor vehicles =< 2500kg

NP 428A

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8923484J





Name

JOEL WEE CHONG MIN

明

黄 Race

CHINESE

Date of birth

Sex

06-07-1989 M

Country of birth

SINGAPORE

389234D4J

4388155



NRIC No. S8923484J



Date of issue

30-03-2009

APT BLK 130 TAMPINES STREET 11 #10 - 334

SINGAPORE 521130

VRIC No: \$8923484J

Date: 24/02/2010

No: 6418690





### CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE. MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1900 (REPUBLIC OF SINGAPORE). ROAD TRANSPORT ACT 1987 (MALAYSIA). MOTOR VEHICLES (THIRD PARTY RISKS) RILLES, 1999 (MALAYSIA).

Certificate No. : Z18VP05019116

Type of Cover : COMPREHENSIVE

Index Mark and Vehicle Registration Number

INFINITI Q50 T PREMIUM 2.0

- SIG 933P

2. Name of Policy Holder

WEE HEAN CHYE NICHOLAS

3. Effective Date of the Commencement of Insurance for the purpose of the Act

1/07/2018

4. Date of Expiry of the Insurance

13/07/2019

- (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. 5. Persons or Classes of Persons entitled to drive
- USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT Limitations as to use COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

Excess

: S\$ 0.00 (SECTION 1) INSURED / NAMED DRIVERS

S\$ 1,000.00 (SECTION 1) UNNAMED DRIVERS

S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS

S\$ 100.00 WINDSCREEN EXCESS

LONPAC'S AUTHORISED WORKSHOPS

Condition : ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS OR DISTRIBUTOR-OWNED MOTOR WORKSHOP

\* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

IWE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Moto Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

CHIEF EXECUTIVE (Singapore Branch)

User ID: BRYANHO Date Issued: 26/06/2018