I THE THE TAX IN THE TAX IN	Job description	Date & Time Completed	Done by
Date In: 33/3/8 -17:41			-
Ref No: NA MIG 80 13362/24	SAS e-filing		
Veh No: 5m 698/6	E-mail (within Shrs, Al		
D.O.A: 2)2/18-17:15	i-Motor Claim For	'm	
OD (TP-) Reporting Only	i-Motor W/O (Withi	n: OD 2hrs, TP 4hrs)	
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey F	Report	
	Ass't Report by Fax	/ Hand to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW	/ : (Tel: F	ax:
TP Particulars: Veh No:	(LK)570H	INC()/Non-INC()	
Owner / Driver: (Tel;)
Policy No: ()	Period: () Cover Type: () .
Confirmed by: (Dat	e: Time:)
Insured/Driver Liability: (%) [Note-Est. Status (WO):	N: 0-20%; P: 21-79%. P: 80-1	00%]
Year of Registration: ((O()	
	\$1,000 ()/\$2,000 ()		
General Remarks:-		Marines and Sales and Sales	Series Series
() Walk-In Customer: Customer's	the state of the s	The state of the s	
() Total Loss Case : to e-mail In			
	voice: YES () / NO (); Towing Co: (•
			72.2000.7
Remarks:- (INC hotline: 6788 661		Date&Time Completed	Done by
1) Apply for Transport Allowance ()/Courtesy Car ()		
2) QC Check / Post Repair Inspection	()		
 Upload Resurvey Photo [Repair Cost 	> C30001 / \		
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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.
- 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.

ACCIDENT	STATEMENT
ACCIDENT	STATEMEN

Date Of Report 23/07/2018 17:41
Date Of Accident 21/07/2018 17:15

Exact Location Of Accident BKE (WOODLANDS) BEFORE TURF CLUB AVE EXIT

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJM6958K

Insured/Policyholder

Name Of Registered Owner WOODLANDS 11 CAR RENTAL

Co Reg No 53227415J
Email Address NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-89999999

Vehicle Particulars

Manufacturer TOYOTA

Model VIOS E AUTO

Exact Purpose for which vehicle was being used at

time of accident

COMMERCIAL 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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 999994666

Cover Note Number

Driver

Name of Driver THIEN BIN KIAT (TANG MINGJIE)

 NRIC No
 \$9047174J

 Date Of Birth
 09/12/1990

 Occupation
 OUTDOOR

 Date Of Driving Pass
 13/04/2016

Driving Experience 2 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87500103

Fax Number

Contact Number OFFICE-87500103

EMail Address NOEMAIL

BLK 743 WOODLANDS CIRCLE Address

#08-461

730743 Postcode

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

NO

NO

NO

1

NO

NO

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

Weather Conditions CLEAR DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident 2

NO Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

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

REFER TO STATEMENT.

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

SLK2570H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 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 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
- 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:
 - (1) 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 coffect, 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 lawyars/law firms), which may be sited outside of Singaporo, 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 freud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosers
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agendes as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Date & Time:

Priver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Pers Mael's Signature

Name:

NRIC/FIN No.:

on 21/07/2018 at about 1715 his at along BKE towards.

Sohor before Turf Club Ave. I was travelling on the

Lane 3 and when my front wehicle slow down and stop

other to heavy traffic hence I follow suit. Suddenly I

heard a loud bang from behind and when I alighted,

I realized that it was Vehicle (B) who hit onto my

Rear Portion of my Vehicle (A) causing damages

to my vehicle.

(A) SJM 6958 K

(B) SLK 2570 H

DECLARATION

I/We declare the foregoing particulars are true in every respon

Political der s Similare

Oriver's Signature (If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

Accident Date: >1 7 18 Time: 17 15 (hh:mm) 24 hr format			
Location BKE towards Johor before Turb Club Ave			
Jose are crae 1700			
Vehicle Number SJM 695FK			
Insured Name WOUDLANDS 11 CAR RENTAL			
NRIC /FIN 53227415 Contact Number			
Make 70 4079 Model VIOS E AUTU			
Are you claiming under your own insurance policy for repair to your vehicle?			
() Yes If No,Pls select: () Third Party () Reporting			
Insurance Company A16			
Type of Policy () Comphensive (/) Third Party Fire & Theft () TP Only			
Policy Number			
Name of Driver THIEN BIN KMT ()Same as Insured			
NRIC/FIN S904174 Contact Number 87500103			
Date of Birth 09 - 12 - 1990			
Driving Pass Date 13 - APR - 7016			
Occupation () Indoor () Outdoor			
Gender () Male () Female			
Email Address bk. thun @ live com ()NO EMAIL			
Address of Driver BLIC TUZ WOWDLANDS (IRCLE# 05-461			
S (730743)			
Was driver an employee of the Insured's Company? () Yes () No			
If No, Relationship of the Driver with the Insured			
() Owner () Spouse () Friend () Relative () Children () Sibling			
Does the Driver Own Any Other Vehicle? () Yes () No			
If Yes, Vehicle Registration Number of Driver's Own Vehicle			
Insurance Company of Driver's Own Vehicle			
Weather Conditions () Clear () Raining () Others			
Road Surface () Dry () Wet () Others			
Was any foreign vehicle involved in this accident? () Yes () No			
Was anybody injured in the accident? () Yes () No If yes , injured detail			
Was there any video captured by Car Camera? () Yes () No Was the Accident reported to the Police? () Yes () No If yes attach police report			
DETAIL COP 314			
Veh B SLk 2570 H			
Veh C			
Veh D			
Veh E			
Veh F			

Include Drive I person only

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$9047174J





THIEN BIN KIAT (TANG MINGJIE)

CHINESE

09-12-1990 M Country of birth SINGAPORE

EB047174H

Driver Shun 695K

NAIC No. S9047174J

27-12-2005

APT BLK 743 WOODLANDS CIRCLE #08-461 SINGAPORE 730743

NRIC No: \$9047174 Date: 14/01/2010 No: 6404496



Driver Sym 69581c

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

NP 428A



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 109)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

THIRD PARTY FIRE & THEFT COMMERCIAL MOTOR

.

SJM6958K 999994666

3K

POLICY EXCESS

S\$1500.00 (Sect II)

WINDSCREEN EXCESS

NA

(The below excess is subject to GST)

SUM INSURED

Market Value

INSURING WITH COE/PARF NA

SJM6958K

Woodlands 11 Car Rental

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

CERTIFICATE NO.

POLICY NO.

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

01 March 2018

28 February 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.

\$\$1,500.00 Section II Excess is applicable to driver's age above 22 years old and more than 2 years driving experience in Singapore.

556,000.00 Section II Excess is applicable to driver's age below 22 years old and/or less than 2 years driving experience in Singapore.

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) LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for fulfion, driving test, racing, pace-making, reliability trial or speed-testing, 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

TAI THONG LEE TRADING PTE LTD

"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, 1967 (Malaysia), are not to be included under these headings.

17 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).

Issued in Singapore 25 Apr 2018

503052-000 Hund 55 Lorong L Telok Kurau #02-59 Bright Centre Singapore 425500 AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL