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	i-Motor W/O (Within: OD 2h	rs, 7'P 4hrs)		
OD (TP-1) Reporting Only	i-Photo Uploaded			1
TDI	Assessment/Survey Report			
TP Insurer:	Ass't Report by Fax / Hand	to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (Tel: F	ax:	
TP Particulars: Veh No: JH	1919 H INC ()/Non-INC()	3	
Owner / Driver: (Tel:)	
Policy No: () F	Period: ()	Cover Type: ()	-
Confirmed by : (Date:	Time:)	
Insured/Driver Liability: (%)	[Note-Est. Status (WO): N: 0-2	0%; P: 21-79%. F: 80-1	00%]	
Year of Registration: ()	Warranty: YES ()/NO ()		-
	,000 ()/\$2,000 ()		SE SIGNOSINE	
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Remarks: (INC hotline: 6788 6616)		Date&Time Completed	Done	oy .
1) Apply for Transport Allowance ()/	Courtesy Car ()		**************************************	
	()	***		-
2) OC Check / Post Repair Inspection	()			
QC Check / Post Repair Inspection Upload Resurvey Photo (Repair Cost >)	\$30001			1111
QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > 5]	\$3000] ()			
	\$3000] ()			
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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.

By the lodgement of this report to the insurers, you aforesaid,	ou hereby consent to the archiving of this report at the centre and to copies of the report being made ava	ilable
	ACCIDENT STATEMENT	
Date Of Report	06/09/2018 10:01	
Date Of Accident	05/09/2018 14:55	
Exact Location Of Accident	JUNC TAMPINES AVE 1 & TAMPINES AVE 8	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLR6440L	
Insured/Policyholder		
Name Of Registered Owner	TIMOTHY ENTERPRISE	
Co Reg No	53349364A	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-90919003	
Alternative Phone No	OFFICE-90919003	

Vehicle Particulars

OPEL Manufacturer

MOKKA X 1.6 CDTI 6AT (LED) Model

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?

THIRD PARTY If No, Please state action to be taken PRIVATE HIRE Vehicle Category

Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

5093477498-01 Policy Number

Cover Note Number

Driver

TAN CHEE WEE (CHEN ZHIWEI) Name of Driver

NRIC No S7520987H 17/07/1975 Date Of Birth OUTDOOR Occupation 09/11/1994 Date Of Driving Pass

23 YEARS AND 9 MONTHS Driving Experience

MALE Gender

Mobile Number (LOCAL) +65-90919003

Fax Number

OFFICE-90919003 Contact Number

NOEMAIL EMail Address

BLK 19 TAMPINES AVENUE 8 Address

#04-31

Postcode 529603

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured OWNER

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 TO REAR

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO 2 Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged? I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. 2

Number of Passengers (Including Driver)

Passenger 1

NAME:

NO

NO

GENDER: : FEMALE

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

ON STATED DATE AND TIME, MY VEHICLE WAS STATIONARY STOPPED ALONG LANE 2 TAMPINES AVE 1 TWDS TAMPINES 8 AS THERE WAS INCOMING VEHICLE ALONG OPPOSITE FLOW OF TRAFFIC. SUDDENLY 1 FELT AN IMPACT OF MY VEHICLE, I ALIGHT FROM MY VEHICLE AND REALIZE THAT VEHICLE B HIT ONTO MY VEHICLE REAR LEFT PORTION.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

VIDEO FOOTAGE WITH DRIVER Remarks/ Reasons:

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJH1919H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

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.
- 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.

Policyholder Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personn

Name:

NRIC/FIN No.:

DECLARATION

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

Policyholde Oppar Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7520987H

9

Name

TAN CHEE WEE (CHEN ZHIWEI)

陈志

CHINESE Date of birth

17-07-1975 Country of birth

SINGAPORE









eBao Tech						interior Marijan				Genera	alClaim
Hello, NAC_PAYA_UBI_80	0601						• Change	Language	• Chan	ge Password	· Log Out
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Notice of Loss	Policy I	No.				Date	of Accident	0	5/09/2018	14:55	
	Vehicle	No.(For Motor)	SLR644	40L	-4	Certif	icate Number				
					1	Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5093477498- 01		TIMOTHY ENTERPRISE	53349364A	GPC	drivo PREMIUM	SLR6440L	SLR6440L	23/08/2018	22/08/2019
						Continue					

Policy No.	5093477498-01	Policyholder Name	TIMOTHY E	NTERPRISE	Policyholder NRIC	53349364A	
Certificate No.		1100011170			0.308.750		
Address	19 TAMPINES AVENUE 8 #04-31	ARC AT TAM	PINES SINGA	PORE 529603			
Product Name	PRIVATE CAR INSURANCE	Plan			Group Policy Flag	N	
Policy ssue Date	21/08/2018	Effective Date	23/08/2018	00:00	Expiry Date	22/08/2019 23:	59
Excess Type		All Claims Excess					
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			Young/I	Inexperience Driver Excess
Agent	ALPINE CREDIT PTE LTD	Agent Tel.	65113025		GST Flag	Υ	
Co- insurance Flag	No						
Open Policy Info							
Certificate Info							
Policy	holder Mailing Address						
Address 1	19 TAMPINES AVENUE 8	Addr	ess 2	#04-31 ARC AT TA	MPINES	Address 3	SINGAPORE 529603
Address 4		Addr	ess Type	Singapore address		Post Code	529603
Unit No.	04-31	Relat Num	ed Policy ber	5093477498-01			
D Insure	ed Object: SLR6440L						
□ Endors	sements						
Seque	nce Date of Endorsemen	nt	Endorsemen	t Type	Endorsement	t Status	Endorsement Content

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Claim 001 New xm Type * ntact No.(Mobile)	OO-MX	Contact No.(Home)		Contact No.(Office)	65113025
Claim 001 New	DD-MX		TUMOTHY ENTERPRISE		
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Idress 1	19 TAMPINES AVENUE 8	Address 2	ARC AT TAMPINES	Address 3	SINGAPORE 529603
ntact No.(Mobile)	80919003	Contact No.(Office)	0	Contact No.(Home)	0
gister Date of Driver Licens	09/11/1994	Driver Age	43	Driving Experience	23
named driver Name	TAN CHEE WEE (CHEN ZHIWEI)	Driver NR3C	57520987H	Driver DOB	17/07/1975
iver Name	Unnamed Driver	Driver Type	Unnamed Driver	DOTTO-CO.C.A	
OI Driver Info					
nt No.	04-31	Related Policy Number	5093477498-01		
idness 4		Address Type	Singapore address	Post Code	529603
ddress 1	19 TAMPINES AVENUE 8	Address 2	#04-31 ARC AT TAMPINES	Address 3	SINGAPORE 529603
Policyholder Hailing A	2dress				
odification History					
ST Registration No.	53349364A		GST Status Venfied	No	
ST Registered	740		GST Registration Date	01/11/2016	
GST Registered Inform					
♥ Benefits					
Pend Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
Innamed Oriver Escale	2,000.00	Outside Singapore OD Excess	2,000.00	AND DESCRIPTION OF THE PARTY OF	Anna Maria
wn damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
▼ Excess					
ccident Location	JUNC TAMPINES AVE 1 & TAMPINES AVE 8	27.302.002.00		2000000	
egorting Centre	UNIVERSAL PROPERTY.	Orange Force	10.00	JCM No.	CAT MARKETON
gte of Accident	05/09/2018	Time of Accident hhimm	14.55	Country of Accident	Singapore
sport Date	06/09/2018 14:02	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Accident Details					
CD Protection	No	NCD Entitlement(%)	10	Private Hire	Yes
TK.	® No ○ Yes	TCA	No ○ Yes	eCode Reason	
nail Address		Special Remark		eCode	tik 💙
ontact No.(Mobile)	90919003	Contact No.(Office)	0	Contact No. (Home)	0
roduct Code	PRIVATE CAR INSURANCE	Cover Type	prive PREMILIM	Loading	٥
	TIMOTHY ENTERPRISE			Policyholder NR3C	53349364A
skcyholder Name					
	5093477498-01	Vehicle No.	SLR6440L	GST Registration No.	53349364A
ortificate No.		1945/1956	SOMMA	Vienos de la composición del composición de la composición de la composición del composición de la com	1034 A034-0
tcy No. rtificate No.					
laim Handling scident MT/1010346 skty No. srtificate No. sktyholder Name					

