NATIONAL Assessment Contre		ve' : Jan'03)	1		Done by	£
Date in: 2010 123	Job description		Date & Time Co	ompleted	Done o	,
Ref Nox (BA) (C71 (80171344	SAS e-filing					
Veh No SKZ 6632U	E-mail (within 8)	irs. AIC 2hrs)				
04:00 \$06/P0/01 NOA	i-Motor Claim	Form -			HARAGE NO CONTRACTOR	
OD FRY BANK ONLY	i-Motor W/O	(Within: OD 2hrs	TP 4hrs)			• •
OD P.	i-Photo Uploa	ded				
TP Insurer:	Assessment/Sur	vey Report				
Tr insurer	Ass't Report by	Fax / Hand t	Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:		
TP Particulars: Veh No: S	DIIIJ .	, INC()/Non-INC	()		
Owner / Driver: (Tel:			
Policy No: () Per	riod: ()	Cover Type: (
Confirmed by: (-cos - Her	Date:	Time		7	
Insured/Driver Liability: (%) [1	Note-Est. Status (W	7O): N: 0-2	0%; P: 21-79%	6. P: 80-100	%]	
	Warranty: YES ()/NO()	1 		
Excess: (\$) Loading: \$1,00	00 () / \$2,000 (()				-
General Remarks:-	-7.37(2) 42.80			\$1.8.1.4. DO	de Mil.	H
() Walk-In Customer: Customer's info	rmation strictly Cor	nfidential & St	rictly NO refer o	f repairer.		
() Total Loss Case : to e-mail Insure						
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SINGAPORE ACCIDENT STATEMENT

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 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.

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.

· · · · · · · · · · · · · · · · · · ·	ACCIDENT STATEMENT
Date Of Report	20/09/2018 12:38
Date Of Accident	10/09/2018 20:40
Exact Location Of Accident	BLK 117 BUKIT MERAH VIEW OPEN CARPARK LOT 122
Country/State of Loss	SINGAPORE
从表表 写是 II 是 英国政策的问题的 D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKZ6632U
Insured/Policyholder	
Name Of Registered Owner	LEE SIN MEI
NRIC No	S8164197H
Email Address	HENRYSSG@YAHOO,COM,SG
Mobile Phone No	(LOCAL) +65-86123366
Alternative Phone No	OTHERS-91873133
Vehicle Particulars	
Manufacturer	BMW
Model	730LI
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1735331801
Cover Note Number	

Driver

HENRY SONG CHERN HSENG (SONG CHENGSHENG) Name of Driver

S7821673E NRIC No. 26/07/1978 Date Of Birth INDOOR Occupation Date Of Driving Pass 05/04/2003

15 YEARS AND 5 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-86123366 Mobile Number

Fax Number

OTHERS-91873133 Contact Number

HENRYSSG@YAHOO.COM.SG EMail Address

Address

BLK 109B DEPOT ROAD

#03-97

Postcode

102109

.....

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SPOUSE

Vehicle Registration Number of Driver's Own

.

Vehicle

.

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

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)

0

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

BUKIT MERAH WEST NPC

Police Station Address

ROAD: 500 BUKIT MERAH VIEW #01-01 , POSTCODE: 159682 ,

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180911

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

Details of Witness 1

Name

FAIZAL

Phone Number

87507230

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SGD111J

Vehicle Make/Model/Colour

HONDA CIVIC

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Page 2 of 19

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.
- 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

(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:

1212 hrs 20/09/2018

Reporting Centre Personnel's Signature

KETCH PLAN BIK 11	1 BUKIT WERENA	VIEW OPEN	CORPORK
	10/51	Mr. 34	A) SKZ66320 B) SGD 1113
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT LOT 122		
			01
		we put	
	Ja Pal	91/3/36	
P	April 18	3/11	
100			
DECLARATION I/We declare the foregoing par	ticulars are true in every respect.		La bold
Policyhoider's Signature Date & Time:	Driver's Signature (If driver is not the policyhol Date & Time:		ng Centre Personnel's Signature NNo.: Kep Li Watton





1 of 3

Report No. T/20180911/2126

Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682

Tel No: 1800-3779999

IT SALES

REPORTO	F A TRAFFIC	ACCIDENT	THE STATE OF THE S		
Date/Time Report Made: 11/09/2018 16:18			Vide Report No.:	Station Diary No.: 66	
Informat	nt's Particu	lars	The same of the sa		
Name of	f Informant: Address: SONG CHERN HSENG APT BLK 109B DEPOT ROAD #03-97 SINGAPORE				
ID Type / ID No.: NRIC NO / S7821673E			Contact No.: Home/Office: Mobile: 91873733		
National			Email:		
Sex: Male	Age:	Date of Birth: 26/07/1978	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation:			Driving Licence Information:	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/09/2018 20:40	Type of Location Car Park	
Weather:		Park lot 122 Road Surface:		Road Speed Limit:	
Clear Traffic Flow:		Traffic Control:		Traffic Volume: No Traffic	
Type of Coll Moving Vehi	sion: cle Against - Parked Ve	Type of Collision: Moving Vehicle Against - Parked Vehicle			

Details of V	The State of the S	the second secon	Model	Color	Condition	No of Passenge
Vehicle No.	Туре	Make	Model	COIO	The second second second	4
SGD111J	Car				Slightly Damaged	0.00
SKZ6632U	Car				Slightly	0

Details of Person Involved	
Any Pedestrian Involved: No	0 1-10
No of Pedestrians Injured: NIL	Use of Pedestrian Crossing; NA





Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682 Tel No: 1800-3779999

2 of 3 Report No. T/20180911/2126

CONTINUATION OF REPORT

Driver			ID No.		S7821673E
Name	HENRY SONG CHERN HSENG		Contact No.		91873733
Related Vehicle	NIL				
Hospital/Clinic	NIL			of g ce & / Date	Class: 3 Date of Expiry: NIL
	NIL	Date Disc	harge	NIL	
Date Treatment	ted Medical Leave NIL	Degree o		NIL	

On 10/9/18 at about 2050hrs, I was heading back to my vehicle (SKZ6632U) when a witness approached me informing me that earlier on, the car which was parked beside me at lot 121 had knocked onto my front bumper. I then checked on my bumper and found out that there was a crack and scratches at the middle part of my front bumper. Subsequently, I retrieved my in-car camera recording and viewed it. It showed that at about 2040hrs, the vehicle SGD111J was reversing into the lot beside my vehicle. However, while reversing, his back bumper had hit onto my front bumper. The vehicle then continued to make his adjustments and reversed into the lot. After parking, both the driver and passenger came out of the vehicle and walked passed my vehicle. They were seen looking at my front bumper while walking through.

I wish to state that the estimated cost for the damage is approx. \$10,000. This is the first time such incident happened and I have the recording of the whole incident. The witness who approached me is namely Faizal HP:87507230.





Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682 Tel No: 1800-3779999 3 of 3 Report No. T/20180911/2126

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: D / Sgt 3 NURJANNAH BINTE AMRAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/09/2018 16:18
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case:
Authentication Stamp NP168	·i1

ACCIDENT STATEMENT

10 00 Ddg	VV TIME: (20 .40)(HH:MM)
ACCIDENT DATE: 10,09,2014 HOD/MM/YY	YY), TIME:(0 : (12.2
LOCATION: BLK 117 Bukit Mean	View Carporte lot 122
LOCATION.	
1. DETAILS OF VEHICLE	· 14
OLVEHICLE NUMBER: SKZ 803	
DINSURANCE COMPANY: China T	aiping
DM(0)(\M 1 L \ 4 \ \)	1801
dIPOLICY TYPE: COMPREHENSIVE THIRD P	ARTY / THIRD PARTY FIRE &THEFT)
ISMW 130	A fight and the second
WEURE TO AND COURT IMPVIVANILO	RRY / MOTORCYCLE / OTHERS)
OVEHICLE CATEGORY ((PRIVATE / COMME	RCIAL / MOTORCT GEE/
LIBURDOSE OF LISING AT ACCIDENT TIME:_	CNI MAIR
WARE VOLL OF A MAING LINDER YOUR OWN IN	ASURANCE (TESANO)
IF NO, PLEASE STATE THIRD PARTY CLAIM	REPORTING UNLT)
2. INSURED / POLICY HOLDER	(MALE / FEMALE)
AINAME: LEE SIN MEI	CONTACT: 8612.33 66
DINRIC FINIT ASSTOR	02-97 (5) 102 09
CIADDRESS: 109B VERY OCORD T	05
. CONTINUE TO 3.4 IF DRIVER ALSO POLICY	HOLDER
A II	
CINAME HENCY SONY CHANT AS	MALE FEMALE
(Including driver) bINRIC/FIN/PASSPORT: \$782/6736	CONTACT: 418 13 13
(O) GIADDRESS: 109B Report and I	#03-97 (S) 102109
*d)DATE OF BIRTH: (26,07,1978)(DD/MM/YYYY)
DIOCCUPATION: (INDOOR) OUTDOOR)	04 2003
	OT ZONDANYZ (YES YNO)
1) DATE OF DRIVING PASS	WITH INCLIDED. SPOUSE
TEND RELATIONSHIP OF THE URIVER	WITH THOUNCE
5. DIWEATHER CONDITION: CLEAR RAINING	G / Ollicks
6. WAS ANYBODY INJURED (YES /NO)	
7. a) REPORTED TO POLICE (YES) / NO)	all Met NPC
7. a) REPORTED TO POLICE (YES) / NO) IF YES, PLEASE STATE WHICH POLICE STATE	MON: BUICH MYAN WENT 10.11.
8. THIRD PARTY VEHICLE	MODEL: Honda Civic
8. THIRD PARTY VEHICLE SGOIN J	MODEL:_ HONGE CANC
s. latindore site () DRIVER'S NAME:	
	CONTACT:
O THIRD P'ARTY VEHICLE	A Section 1
d) VEHICLE NUMBER:	MODEL:
e) DRIVER'S NAME:	CONTACT
NRIC/FIN/PASSPORT	CONTACT
Section 2	
5/10	1 000
le mont	ssg@yahoo.com.sg.
EMPAL = nemy	-7) -0

V1080 = 765

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S'7821673E



HENRY SONG CHERN HSENG (SONG CHENGSHENG)

CHINESE

Date of birth 26-07-1978 Country of birth

SINGAPORE



4291354



NIIIC NJ. S7821673E

13-10-2008

APT BLK 1098 DEPOT ROAD #03-97 SINGAPORE 102109

NRIC No: \$7821873E

Date: 27/01/2017

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

· IT SANTARIONES Class 3 Motor Cars== 3500kg with Fig. 2003 = 05 Apr 3003 = 05 A



中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD.

Co. Rag. No. 200208384E

MXIE R SN AN0576A Cov.Type: C

MOTOR PRIVATE CAR

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

		DMPCSN1735331801	Engine No :08547456N52B30AF ChaNo:WBAKB22090CN74572
CERTIFIC	CATE No.	DWh(2M1) 33331001	CHANGE LOSS CHI TO LE
1. Index	Mark and Registration	5KZ6632U	AUTOSAFE
Numb	er of Vehicle		
2 Name	of Policy Holder	LEE SIN MEI	
inturi	ive date of the Commencement of ince for the purposes of the Regulat ence or Eractment	21 July 2018	Named Drivers Ex Sect. I SS1,500.00 Additional Ex Other than Named Drivers: Ex Sect. I - Age <= 25 553,000.00
4. Date	of Expiry of Insurance	20 July 2019	Ex Sect, I - Age >= 26
5. Perso	ers or Classes of Persons entitled to	drive*	
(a)	The Policyholder.		
(d)	Any other person who is	driving on the Policyho	lder's order or with his permission.
regu	lations to drive the Mo	tor Vehicle or has been	cordance with the licensing or other laws or so permitted and is not disqualified by order of a ation in that behalf from driving the Motor vehicle.
use The tri	policy does not cover u il, speed-testing, the c	se for hire or reward tu	for the Policyholder's business. ition driving test racing pace-making, reliability han samples in connection with any trade or bysiness Trade.
	ess whichever is applica 1 be doubled.	ble for losses occurring	outside Singapore (Constructive Total Loss/Theft)
One	time waiver of Excess f	or the first S\$1,000 wil Authorised workshops for	l apply to the Insured and Named Drivers in the event each Policy Year.
HIR	E PURCHASE CO. : TOKYO C	ENTURY LEASING (S) PTE L	TO
	* Limitations rendered inoper and Section 95 of the Road 7	ulive by Section 8 of the Motor rensport Act 1987 (Melaysia), s	Vehicles (Third-Perty Risks and Compensation) Act (Chapter 189) re not to be included under these headings.
	I/We hereby Cer	tify that the policy to whi hicles (Third-Party Risks an	ch this Certificate relates is issued in accordance with the d Compensation) Act (Chapter 189) and Part IV of the Road
	Please see reverse		For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTI
			\cap
	LIM LEE CHOO		(Massan
Issued By:	Authorised Office		Authorised Signatory
	Admonsed Office		