

# NATIONAL Assessment Centre Services

Ver. 1.0

2 MAY 18/2012

Date In: 21/09/2018 14:20	Job description	Date & Time Completed	Done by
Ref No: NDAIC111001755/4	SAS e-filing		
Veh No: SKM 7578E	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 20/09/2018 20:20	I-Motor Claim Form		
OD: (TP) Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner / Wksp		

Preferred Wksp / INC Assign Wksp / QW: ( )

Tel:

Fax:

TP Particulars:

Veh No: 25C 624B

INC ( ) / Non-INC ( )

Tel:

Owner / Driver: ( )

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%]

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: (\$) Loading: \$1,000 ( ) / \$2,000 ( )

General Remarks:

( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co. ( )

Remarks:	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury: ( )

Date/Time	Actions

<p>Claimant's Particulars:</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments:</p> <p>Cal. 1:</p> <p>Cal. 2 / 3:</p>	<p>Invoice Preparation Checklist</p> <p>1) AR: Accident Reporting (\$30);</p> <p>2) DA: Damage Assessment (\$100); INC (\$80)</p> <p>3) TP: Towing Fee \$40/\$45</p> <p>4) FT: Follow-Through Survey \$120</p> <p>5) FT: Follow-Through Survey (Resurvey) \$30</p> <p>For claiming against INC Only (wef 10 Jan 2005)</p> <p>6) TR: Re-inspection \$75</p> <p>7) NI: Idao DA + SMRT Survey \$160</p> <p>8) NTUC Additional Services:-</p> <p>ON:</p> <p>*N5: Courtesy Car / Tp Allowance \$5</p> <p>*N6: Repair Co-ordination \$10</p> <p>*N7: Post Repair Inspection \$25</p> <p>*N8: DV / Collect Excess Coordination \$5</p> <p>TP (N11): TP (N/A INC) against INC \$20</p> <p>9) N12: Idao Mobile 30</p>		<p>Am't (\$)</p> <p>In Bill</p>	<p>Am't (\$)</p> <p>Add Bill</p>
	<p>Invoice dated</p>		<p>Fee Charged</p>	
	<p>Invoice dated</p>		<p>Fee Charged</p>	

## 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 withholding 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

Date Of Report	21/09/2018 14:20
Date Of Accident	20/09/2018 20:20
Exact Location Of Accident	ALONG YISHUN CENTRAL 1
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM7578E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONG SWEE TIN JULIET (WANG RUIZHEN)
NRIC No	S7711975B
Email Address	DANTBC@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98460102
Alternative Phone No	OTHERS-96818550

### Vehicle Particulars

Manufacturer	BMW
Model	118I 2.0 AT ABS D/AIRBAG 2W/D 5DR
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
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If No, Please state action to be taken	THIRD PARTY
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Vehicle Category	PRIVATE CAR
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### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DMPCSN3040071800
Cover Note Number	

### Driver

Name of Driver	TAN BEE CHENG (CHEN MEIQING)
NRIC No	S72106701
Date Of Birth	03/04/1972
Occupation	INDOOR
Date Of Driving Pass	02/07/1992
Driving Experience	26 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96818550
Fax Number	
Contact Number	OTHERS-98460102
EMail Address	DANTBC@GMAIL.COM

Address	70 JALAN MATA AYER #03-25 NORTHWOOD
Postcode	757488
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	SIDE SWIPE
Weather Conditions	AFTER RAIN
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	2
Passenger 1	NAME: : BRAYDEN TAN SHIH KIAT (SON) GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180921/2110

#### 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	SGC6824B
Vehicle Make/Model/Colour	TOYOTA VIOS
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)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBG7685S  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category COMMERCIAL VEHICLE  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name BRAYDEN TAN SHIH KIAT  
Approximate Age  
Injuries Sustain SLIGHT INJURY  
Injured person in which vehicle? SKM7578E  
Were seat belts worn? NO  
Was this injured conveyed to hospital by ambulance? YES  
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**.
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:

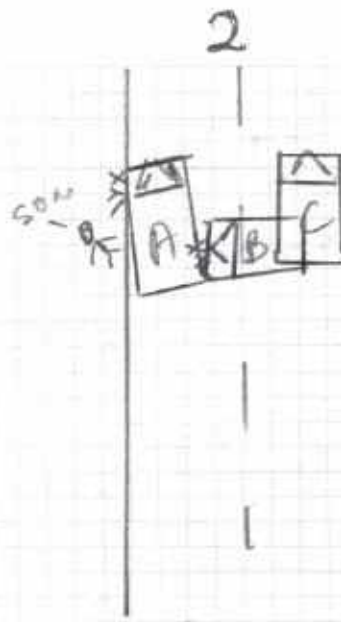
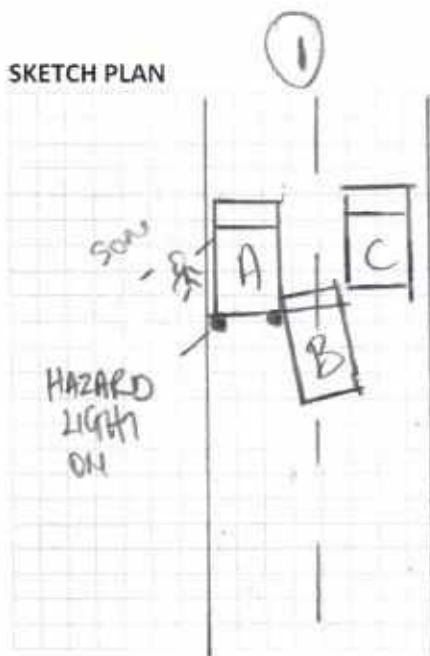
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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.
- (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'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



Along Yishun  
CENTRAL 1

A) SKM7578E

B) SGC 6824B

C) GEG7625S

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT  
12080921

## 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  
Name:  
NRIC/FIN No.:

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/09/2018 15:23	Vide Report No.:	Station Diary No.: 79
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Informant's Particulars

Name of Informant: TAN BEE CHENG			Address: 70 JALAN MATA AYER #03-25 SINGAPORE 757488		
ID Type / ID No.: NRIC NO / S72106701			Contact No.: Home/Office:		Mobile: 96818550
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 03/04/1972	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Sales			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 20/09/2018 20:20	Type of Location: Straight Road
Location: Along Road 1 YISHUN CENTRAL 1				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGC6824B	Car					0
SKM7578E	Car				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

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Report No. T/20180921/2119

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	TAN BEE CHENG		ID No. S7210670I
Related Vehicle	SKM7578E (Car)		Contact No. 96818550
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL		Degree of Injury NIL
<b>Passenger</b>			
Name	Brayden Tan Shin Kiat		ID No. T0522121D
Related Vehicle	SKM7578E (Car)		Contact No. NIL
Hospital/Clinic	KK WOMEN'S AND CHILDREN'S HOSPITAL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	20/09/2018		Date Discharge 20/09/2018
No. of Days granted Medical Leave	02		Degree of Injury Slight

**Brief Details.**

On 20/09/2018 at about 2015hrs, I was alighting my son ( Brayden Tan Shin Kiat/ 13 years) along Yishun Central 1 ( infront of Blk 930 Yishun after the bus stop). I had switched on my hazard light to indicate that I was stopping.

2) My son had already alighted from the left back passenger door but his door was still open. It was at this point of time that I felt a collision from the back. I had then alighted from my vehicle, I observed that another vehicle ( SGC6824B) had collided with the right rear of my car. I had then hurriedly went to check on my son and discovered that he had sustained injuries on his left leg and arm. I am not sure how my son had fallen or sustained his injuries. The said car which had collided with my vehicle had then moved infront of my car. I wish to state that this said car had apparently tried to overtake a van and had came onto the lane which my vehicle was stationery on; hence the collision. This was informed to me by the van driver (Reg no: GBG7685S)

3) A short while later , ambulance had arrived at scene together with the Traffic Police. My son was conveyed to KKH and was treated for his injuries, he was subsequently given 2 days medical leave.

4) I wish to state that I had not exchanged particulars with the said driver who collided with me as Traffic Police informed me that all details have been taken. My car had sustained dents and scratches to the right side bumper with the right rear and front left rims damaged ( mounted kerb). My cars suspension was also affected by the impact. My car is not equipped with an in car camera. That is all.



**SINGAPORE  
POLICE FORCE**



T/20180921/2119

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Report No. T/20180921/2119

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

CONTINUATION OF REPORT

Police Station Of Origin:  
Yishun North N P C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

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Report No: T/20180921/2110

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:

F /

SI LEE YAO MING, KEVIN GABRIEL

Signature Of Informant:



Signature Of Interpreter:  
Not applicable

Date/Time:  
21/09/2018 15:23

Officer In Charge Of Case:  
TP / GIT /

Staff Sgt MOHAMED HUSNUL TAUFIQ BIN MD  
YUSOF

Contact No: 65476358

Authentication Stamp:

NP168

Singapore Police Force

Classification Of Case:

# ACCIDENT STATEMENT

ACCIDENT DATE: 20/09/2018 (DD/MM/YYYY), TIME: 20:20 (HH:MM)

LOCATION: Yishan CR 1

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKM 7578E  
 b) INSURANCE COMPANY: \_\_\_\_\_  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: [COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT]  
 e) MAKE & MODEL: Bmw  
 f) TYPE: [SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS]  
 g) VEHICLE CATEGORY: PRIVATE / COMMERCIAL / MOTORCYCLE  
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: ONG SWEE TAN JULIA (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 98460102  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: Tom Pak Chan (Chan Man On) (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 960 8550  
 c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 03/09/1972 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) DATE OF DRIVING PASS: 02/07/1992

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) NO  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Spouse

5. a) WEATHER CONDITION: [CLEAR / RAINING / OTHERS] RAINING  
 b) ROAD SURFACE: DRY / WET / OTHERS

6. WAS ANYBODY INJURED YES / NO

7. a) REPORTED TO POLICE YES / NO

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SGC 6824B MODEL: Toyota Vios

- b) DRIVER'S NAME: \_\_\_\_\_

- c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: GBG 7685S MODEL: \_\_\_\_\_

- e) DRIVER'S NAME: \_\_\_\_\_

- f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

EMAIL = dantbc@gmail.com

VIDEO =

IDENTITY CARD NO. S72106701



TAN BEE CHENG  
(CHEN MEIQING)  
陈美清  
CHINESE  
Date of Birth: 03-04-1972  
Country of Birth: SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S72106701

Name: TAN BEE CHENG (CHEN MEIQING)

Birth Date: 03 Apr 1972  
Issue Date: 11 Jun 2003





S72106701



22-06-1994

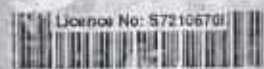
70, JALAN MATA AYER NORTHWOOD #03-25  
SINGAPORE 757488  
NRIC No: S72106701 Date: 06/07/2012 No: 7118346

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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	03 Jul 1992

NP 478A

Licence No: S72106701



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7711975B



ONG SWEE TIN JULIET  
(WANG RUIZHEN)  
王瑞贞  
CHINESE  
Date of Birth: 06-05-1977  
Country of Birth: SINGAPORE



中国太平  
CHINA TAIPING

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

3 Anson Road #18-00 Springleaf Tower Singapore 079909  
Tel: 6389 6111 Fax: 6222 1033  
Website: www.sg.chinataiping.com  
Co. Reg. No. 200208384E

ORIGINAL

THE SCHEDULE

Agency	AN0509A	Class of Policy	MOTOR PRIVATE CAR	Policy Number	..... DMPC5N3040071800
Account	AN0509A	Issued on	13/06/2018 in SINGAPORE		
Client	3206174	Acceptance Date	13/06/2018		

Period of Insurance from 14/06/2018 to 13/06/2019, both dates inclusive.

Insured's Name..... ONG SWEET TIN JULIET  
Address..... 70 JALAN MATA AYER  
#03-25  
NORTHWOOD  
SINGAPORE 757488

For Extensions, renewals & other related matters, please contact:  
(t): 6272 1221 (f): 6272 1033  
customerservice@chinta.com.sg

Business/Occupn... HOUSEWIFE

Premium	Base Annual Premium	SS1,775.40	
	Less 80th Anniversary Discount	SS80.00-	
	No Claim Discount	SS508.62-	
	Incentive Discount 10%	SS118.68-	
	Promotion Discount	SS200.00-	
	Total Annual Premium	SS868.10	Premium Due SS868.10
			Premium GST SS60.77
			Total Due SS928.87

Risk No. 001 MOTOR PRIVATE CAR  
ORIGINAL REGISTRATION DATE: 17-09-2009  
1. Registration SHM7578E Make/Model .. BMW 118I 5DR (A)  
Type of Cover Third Party No. of seats 5 Body Type ..... SALOON  
Engine No. ... A8791313N46B20BZ Capacity cc's 1995 Yr of Manuf/Regn 2008/2009  
Chassis No... WBAUE72080E016374  
Certificate Ref. MX1  
Named Drivers THE INSURED

The following clauses and endorsements apply to this policy  
Subject to Endt. 3(p).  
MODIFIED VEHICLES (FOR PRIVATE MOTOR CAR)

It is hereby declared and agreed that the Company shall only consider claims for modified cars on the following conditions:

- Such modifications does not require LTA's approval (to refer to LTA's website as guide);
- The modification is not the proximate cause of the loss/accident;

The damaged modified parts shall be replaced by original factory fitted parts. The Company shall have the final decision on the type of parts to be indemnified.

No claims is payable if the vehicle's modification requires LTA's approval or any modifications not approved by LTA.

Subject otherwise to the terms, exceptions and conditions of the Policy.

NO CLAIM DISCOUNT PROTECTION (NO CHARGE) - 10% NCD & ABOVE

It is agree that the No Claim Discount (NCD) entitlement in this Policy is protected as follows  
(APPLICABLE TO POLICYHOLDERS WITH 10% NCD AND ABOVE):

Continued on page 2

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: MUA418122612 Vehicle Registration No: SKM 7578E  
Name (as shown in NRIC): Tan Boon Chuan (Chuan Mui Chuan) NRIC/FIN/Passport No: ST2106701  
(\* Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address: \_\_\_\_\_ Singapore ( )  
Contact (Tel): \_\_\_\_\_ Mobile No.: 96818530  
Email Address: \_\_\_\_\_  
Date of Accident: 20/09/2018 Time of Accident: 20:20  
Place of Accident: Avenue 10 North (North)  
Insurance Company: China Insurance

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

- ① Weather Condition should be at Rain & Foggy
- ② Someone conveyed to Hospital (Yes)
- ③ Police Station should be Yisheng North NP.

Policyholder / Driver's Signature  
Date:

Reporting Centre Personnel's Signature  
Name: Poh Hui Hui  
NRIC/FIN No.:  
Date: 21/09/2018