NATIONAL Assessment Centre	Services +	vel i Jan'05) .	MNA 1181	4 . 225 .		
Date In: 29 [10] 15 15:32	Jcb description		Date &Time C		Done	py
Ref No: NA/ CTZ18019701/44.	SAS e-filing	227 (0.60 - 0.00)	İ		7	
Vch No: \$3V 1469 R.	E-mail (within Sh	rs, AIC 2hrs)				500
D.O.A : 29/18/18 09:00.	i-Motor Claim	Form	L	A Propinsi P	an Francisco	14
	l-Motor W/O	Within: OD 2hrs,	TP 4hrs)		The Control of the Control	
OD 7 TP-/ Reporting Only	i-Photo Uploac	ded				
TDI	Assessment/Sur	vey Report	Section Law e	4	the same	
TP Insurer:	Ass't Report by	Fax / Hand to	Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (THE PARTY NAMED IN COLUMN TWO IS NOT THE OWNER.		Tol:	Fax:)
TP Particulars: Veh No: 50	G 89 A.	. INC()/Non-INC	().		
Owner / Driver: (Tel:)	
Policy No: () Period	d: ()	Cover Type: ()	
Confirmed by : (Date:	Time	:)	
Insured/Driver Liability: (%) [Not	te-Est. Status (W	O): N: 0-20	%; P: 21-79%	. P: 30-1009	6]	-
Year of Registration: () Wa	rranty: YES ()/NO()			
Excess: (\$) Loading: \$1,000						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
General Remarks				A LANGE	850	
() Walk-In Customer : Customer's informa						
() Total Loss Case : to e-mail Insurer (JRGENTLY.			1		
Drive-In ()/ Towed-In (); Invoice: Y	ES () / NO) () ; To	wing Co: ()
	of average expedients		Date&Time Co	077	N. 30 A. 1	This is
Remarks: (INC hotline: 6788 6616)	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN 2 IN COL	and the state of	Datedclime Co	inpic out	A.VIXONG	by
The second secon	rtesy Car ()				-	
2) QC Check / Post Repair Inspection	()		-		,	
3) Upload Resurvey Photo [Repair Cost > \$3000	0] ()				•	
Injury:						
Date/Time Actions		100000000000000000000000000000000000000	Najakawa eta e	r Yson SDZ	A TANK	*********
Date/Time Actions		Attended to the service		WARRING ROADS AND THE STATE OF	RPCHISTS.	-
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laumant's Particulars	000000000000000000000000000000000000000) AR : Accident l) DA : Damege A		INC (\$80)	30.00	
river/Owner:	3) TF : Towing Fe	•	\$40/\$45		
	4) FT : Follow-The	rough Survey (Resu:	\$120 vey) \$30		
ontact No:	200	Por claiming ag	inst INC Only (we	(10 Jan 2005) \$75		
amaged Portion:) TR : Re-inspect) N1 : Idao DA +		5160		
1		NTUC Addition				
C Checked by (Engr-In-Charge):		OD* .	Car / Tpt Allowance	55	A SECOND	
		*N6: Repair Co-	ordination	510 \$25		
uditors Comments:		*N7; Post Repai *N8; DV / Colle	r Inspection et Excess Coordina	ion IS		
1.1:	offers' spirit fresh (5)	TP (N11) : TP (Non INC) against l?			
	The second secon) N12: Idac Mobi		ee Chargea		ania Jen
1 2/3:	1.7	nvoice dated	97.65	ee Charged	WEST N	

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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</u> as possible. Any wilful misrepresentation or witholding 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.
- 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.

(Market State of the Control of the	ACCIDENT STATEMENT
Date Of Report	29/10/2018 15:32
Date Of Accident	29/10/2018 09:00
Exact Location Of Accident	UPP PAYA LEBAR TWDS PAYA LEBAR
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJV1469R
Insured/Policyholder	
Name Of Registered Owner	TAN CHEE HENG ALFRED
NRIC No	S8031188E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83389966
Alternative Phone No	OFFICE-83389966
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	GRANDIS 2.4L SPORTS-GEAR
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	REPORTING ONLY
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	DMPCSN3094641700
Cover Note Number	29
Driver	
Name of Driver	TAN CHEE HENG ALFRED
NRIC No	S8031188E
Date Of Birth	04/10/1980
Occupation	INDOOR
Date Of Driving Pass	24/10/2000
Driving Experience	18 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83389966
Fax Number	

OFFICE-83389966

NOEMAIL

Address BLK 476B UPPER SERANGOON VIEW #11-518

Postcode 532476

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

5

Insurance Company of Driver's Own Vehicle

19

NO

NO

NO

NO

SCG88A

1

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR
Road Surface DRY

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? NO

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

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

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

- 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:
 - 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:

Name:

NRIC/FIN No.:

SKETCH PLAN A DONING R 1010137 1000 Lebuq

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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.:

(2)	3018
Date of Accident	: 29 ho 1 200. Accident Time: 9:00). (24-HR-Format)
Accident Place	: Upper paya Lebar towards paya tout.
Vehicle. No. (Car Plate No.)	: GSVINGE Make/Model: Nitgubishi Grandis 2-4
Insurace Company	: China Tail Bing . Policy No:
Owner or Company Name /IC No.	: Tan Chee Hong Alfred, S8031188E
Owner or Company Contact No.	: 83380066 Owner's HpCompany Tel
DRIVER'S Name / IC No.	: A A BS OLDINE
DRIVER'S Date Of Birth	: 04/10/1980 DRIVER'S License Pass Date 24/10/2000
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others:
DRIVER'S Address	: BIK H768 UPPER SERANGIOON VIEW #11-518 953
DRIVER'S Contact No./ Alt No.	:1)
DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address	·
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including I	Driver): Driver only
Was there any video Captured by c Exact purpose for which vehicle wa Any Injury (If YES, Pls state): \(\begin{array}{c} \beg	ar camera: YES (NO) · as being used at the time of accident: Private use \ Work purpose
Other	Party Driver's Particular (if any)
Vehicle. No: SCG 8	Vehicle. No:
Vehicle Make\Model:	15
Name Driver:	
IC No. Driver/Contact:	
* NEW Dessenger's name !	P. condon

* NEW - Passenger's name & gender:

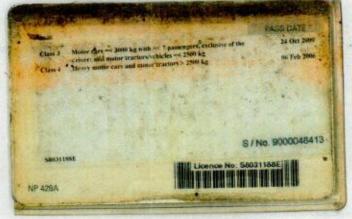
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中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Co. Reg. No. 200208384E

MX1F N SN AN0569A Cov.Type: C

MOTOR PRIVATE CAR

R

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)

Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960

Road Transport Act, 1987 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

С							
	ERTIFICATE No.		Engine No :4G69NY0275				
	77.7	SN3094641700	Chano: JMYLRNA4w9z000530				
1.	index Mark and Registration						
	Number of Vehicle SJV1	469R	AUTOSAFE				
0	No.						
2:	Maria Caracteria						
3.		CHEE HENG ALFRED					
	insurance for the purposes of the Regulations.	14200 TO 10000					
	Ordinance or Enactment	12 December 2017	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
A	Date of Expiry of Insurance	(10:31 Hours)	Additional Ex Other than Named Drivers:				
- 195	bate of Expiry of insurance		Ex Sect. I - Age <= 25 \$\$3,000.00				
		12 January 2019	Ex Sect. I - Age >= 26 \$\$500,00				
			* Age as at date of accident				
5.	Persons or Classes of Persons entitled to drive*		EX ON WINDSCREEN S\$100.00				
	(a) The Policyholder.						
	(b) Any other person who is drivin	g on the Policyholde	er's order or with his permission.				
	Provided that the		V 1970/12/ 2011 39 76 15				
	regulations to drive the war in	s permitted in accor	dance with the licensing or other laws or				
	Count of Law as his count of	icle or has been so	permitted and is not disqualified by order of a on in that behalf from driving the Motor Vehicle.				
6.	Limitations as to use:*						
	Use for social, domestic and please The policy does not cover use for I trial, speed-testing, the carriage or use for any purpose in connection	nire or reward tuiti of goods other than	on driving test racing pace-making, reliability samples in connection with any trade or business				
		on with the Motor Tr	ade.				
	Excess whichever is applicable for will be doubled.		ade. tside Singapore (Constructive Total Loss/Theft)				
	will be doubled.	losses occurring ou	ade. tside Singapore (Constructive Total Loss/Theft) ly to the Insured and Named Drivers in the event				
	will be doubled. One time Waiver of Excess for the of Own Damage Claim at our Authoris	losses occurring ou first s\$500 will app sed workshops for ea	ade. tside Singapore (Constructive Total Loss/Theft) ly to the Insured and Named Drivers in the event ch Policy Year.				
	of Own Damage Claim at our Authorise HIRE PURCHASE Condend INCOME TO Section 95 of the Road Transport A	losses occurring ou first s\$500 will app sed workshops for ea when a of the Motor Veh cct 1987 (Malaysia), are no	ade. tside Singapore (Constructive Total Loss/Theft) ly to the Insured and Named Drivers in the event ch Policy Year.				
	will be doubled. One time Waiver of Excess for the of Own Damage Claim at our Authorist HIRE PURCHASE Condend in Charles Hy S and Section 95 of the Road Transport A I/We hereby Certify the provisions of the Motor Vehicles (Times)	losses occurring ou first s\$500 will app sed workshops for ea when a of the Motor Veh cct 1987 (Malaysia), are no	ade. tside Singapore (Constructive Total Loss/Theft) ly to the Insured and Named Drivers in the event ch Policy Year. icles (Third-Party Risks and Compensation) Act (Chapter 189) of to be included under these headings. his Certificate relates is issued in accordance with the ompensation) Act (Chapter 189) and Part IV of the Road				
	will be doubled. One time waiver of Excess for the of Own Damage Claim at our Authoris. HIRE PURCHASE Condend INDEPENDENT OF SAME AND SECTION 95 of the Road Transport A I/We hereby Certify the provisions of the Motor Vehicles (TI Transport Act, 1987 (Malaysia).	losses occurring ou first s\$500 will app sed workshops for ea when a of the Motor Veh cct 1987 (Malaysia), are no	ade. tside Singapore (Constructive Total Loss/Theft) ly to the Insured and Named Drivers in the event ch Policy Year. icles (Third-Party Risks and Compensation) Act (Chapter 189) of to be included under these headings. his Certificate relates is issued in accordance with the empensation) Act (Chapter 189) and Part IV of the Road				
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ued I	will be doubled. One time waiver of Excess for the of Own Damage Claim at our Authorise. HIRE PURCHASE Producted in ANN AND THE SAME AND	losses occurring ou first s\$500 will app sed workshops for ea when a of the Motor Veh cct 1987 (Malaysia), are no	ade. tside Singapore (Constructive Total Loss/Theft) ly to the Insured and Named Drivers in the event ch Policy Year. icles (Third-Party Risks and Compensation) Act (Chapter 189) of to be included under these headings.				