NATIONAL Assessment Centre Services.	[well Jan'05]	d Done by
Date In: 03 /1 / 8 Jeb description	Date & Time Completed	1 Douc o
Ref No: NA/11/8019982/13 SAS e-11ling	g i	
	in Shrs, AIC 2hrs)	4
D.O.A: 02/11/18 0715 i-Motor Cl	alm Form	
I-Motor W	O (Within: OD 2hrs, TP 4hrs)	
OD / TP / Reporting Only i-Photo Up	loaded	1 12
Assessment/	Survey Report	
TP Insurer: Ass't Report	by Fax / Hand to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars: Veh No: SKJ178.	INC()/Non-INC()	
Owner / Driver: (Tel:	
Policy No: () Period: () Cover Type: (
Confirmed by : (Date: Time:)
Insured/Driver Liability: (%) [Note-Est. Status	(WO): N: 0-20%; P: 21-79%. P: 8	0-100%]
Year of Registration: () Warranty: YES	()/NO()	
Excess: (\$) Loading: \$1,000 ()/\$2,0	The state of the s	TP25777
General Remarks		1975 Cold 1955 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
() Walk-In Customer: Customer's information strictly (Confidential & Strictly NO refer of repair	er.
() Total Loss Case : to e-mail Insurer URGENTLY	<i>.</i>	
Drive-In ()/ Towed-In (); Invoice: YES ()	NO (); Towing Co: (/
Remarks: (INC hothac: 6788 6616)	A. A. L. Dates Timb Complete	180 Done by
1) Apply for Transport Allowance ()/ Courtesy Car ()	
2) QC Check / Post Repair Inspection (-)	
3) Upload Resurvey Photo [Repair Cost > \$3000] ()	
Injury:		
TO THE STATE OF TH		A COUNTY
Date/Time / Actions	Second in the second	KWAR INVESTMENT OF THE
37	•	
	3	
		STATE (S) (CAME (I)
	invoice Preparation Checklist	ANG TRAILS AND BILL
NA1807187	1) AR : Accident Reporting (530);	8 10 10 20 10 10 10 10 10 10 10 10 10 10 10 10 10
liumant's Particulars is the state of the st	2) DA: Demege Assessment (\$100); IN 3) TF: Towing Fee	CC (\$50) \$40/\$45
Oriver/Owner:	4) ET . Follow-Through Survey	\$120
Contact No:	5) FT: Follow-Through Survey (Resurvey) For claiming against INC Only (wef 10 Jan	2005)
	6) TR : Re-inspection	\$75 \$160
Damaged Portion:	7) NI : Idau DA + SMRT Survey 8) NTUC Additional Services:-	
of Charlest by Garage In Charge)	*NS: Courtesy Car / Tpt Allowance	\$3
QC Checked by (Engr-In-Charge):	*N6: Repair Co-ordination	510 \$25
Auditors' Comments:	*N7: Post Repair Inspection *N8: DV / Collect Excess Coordination	23
at 1:	TP (N11): TP (Non INC) against INC 9) N12: Idao Mobile	30
	Involve dated Fee Cha	SERVICE AT LANCE
2/3;	Involce dated Fee Cha	arged Minister

1 . pr ct 1 30

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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.
- 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 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. 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

WEST THEORY OF THE PARTY OF THE	ACCIDENT STATEMENT
Date Of Report	03/11/2018 09:42
Date Of Accident	02/11/2018 07:15
Exact Location Of Accident	BENDEMEER RD B4 THE ZEBRA CROSSING
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBC3083B
Insured/Policyholder	
Name Of Registered Owner	SOON TYRE PTE LTD
Co Reg No	2
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62355593
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M066604/18/700/3500
Cover Note Number	
Driver	
Name of Driver	OH CHEE XIANG(HU ZHIXIANG)
NRIC No	S7724151E
Date Of Birth	03/09/1977
Occupation	OUTDOOR
Date Of Driving Pass	26/12/2012
Driving Experience	5 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90933977
Fax Number	
Contact Number	

NOEMAIL

BLK 542 HOUGANG AVE 8 Address

#05-1281

530542

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

Postcode

Insurance Company of Driver's Own Vehicle

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)

Passenger 1

NAME:

NO

NO

: TEO JIA YI

GENDER:

: FEMALE

Passenger 2

NAME:

: ZACHARY OH

GENDER:

: MALE

Passenger 3

NAME:

: ZELIA 0H

GENDER:

: FEMALE

Passenger 4

NAME:

: ZEFIE OH

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20181103/2027

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

CAN'T UPLOAD FILE TOO BIG

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKJ1783J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

GRESSA MAK WEI ZHI

S7141671B

97970203

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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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's Signature Date & Time:

0

Driver's Signature

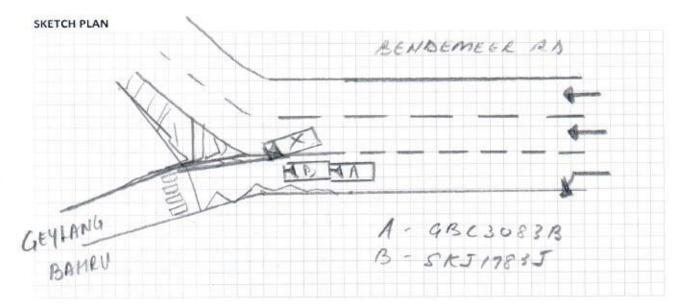
(HEdriver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PS	refi to	the poline	aport:	7/20181103/202

DECLARATION RE

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.:





T/20181103/2027

1 of 2

Report No. T/20181103/2027

POLICE REPORT (NP299)

Police Station Of Origin Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

Date/Time Report Made 03/11/2018 09:18	Vide Report No.		Station Diary No.	
Name Of Informant OH CHEE XIANG (HU ZHIXIANG)	Address APT BLK 542 HOUGANG AVENUE 8 #05-1281 SINGAPORE 530542			
ID Type / ID No. NRIC NO / S7724151E	Contact No. Home/Office Mobi		Mobile 90933977	
Nationality SINGAPORE CITIZEN	Email Address			
Occupation MOTOR VEHICLE TECHNICIAN	Sex Male	Age 41	Date of Birth 03/09/1977	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 02/11/2018 07:15 - 02/11/2018 07:20	Location Of Incident BENDEMEER ROAD SINGAPORE BEFORE THE ZEBRA CROSSING			

Brief details.

ON THE 02/11/2018 AT AROUND @0720HRS ALONG BENDEMEER ROAD

I WOULD LIKE TO LODGE A REPORT ABOUT THIS VEHICLE (SLJ5779J) FOR MAKING A VERY ABRUPT LANE CHANGE. I WAS TRAVELLING ALONG BENDEMEER ROAD ON EXTREME LEFT LANE OUT OF 2 LANE, THIS VEHICLE (SLJ5779J) WAS ON THE EXTREME RIGHT LANE OUT OF 2 LANES. THERE WAS AN OTHER VEHICLE IN FRONT OF ME AT THAT POINT OF TIME, WHEN I

Signature Of Informant: /		
/ hexal		
Date/Time: 03/11/2018 09:18		
Classification Of Case:		

Authentication Stamp







POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. T/20181103/2027

WAS DRIVING ALONG THAT ROAD. WHEN SUDDENLY THE VEHICLE (SLJ5779J), TRY TO CUT IN FRONT OF THE IN FRONT OF ME BY MAKING A VERY ABRUPT LANE CHANGE. WHICH MADE THE VEHICLE IN FRONT OF ME JAM HER BRAKE, BOTH VEHICLE CAME TO A HAIT AND LATER ON VEHICLE (SLJ5779J) QUICKLY ENTER INTO THE SIDE ROAD AND LEFT THE SCENE.

I HAVE IN CAR FOOTAGE OF THE INCIDENT, I WOULD LIKE TO REPORT ON THIS VEHICLE (SLJ5779J) FOR MAKING A ACCIDENT.

THAT'S ALL

Subjects Involve	d
Victim	
Person Name	OH CHEE XIANG (HU ZHIXIANG) (Informant)

Signature Of Officer Recording The Report:

TP / KEE CHUAN JIA MARCUS

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: TP / Traffic Police Department Investigation Branch /

Staff Sgt TANG SIEW PING Contact No.: 65476430

Authentication Stamp

Signature Of Informant: Well

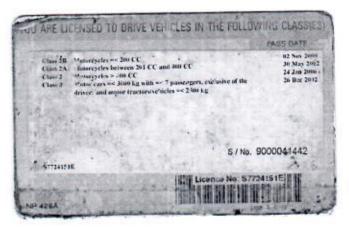
Date/Time: 03/11/2018 09:18

Classification Of Case:









Excess:

\$700 on SECT I

\$3500 on SECT I on driver below 26 & above 65 years of age &/or less than 2 years

Singapore Driving Licence

COMP

MARKET VALUE

CERTIFICATE NO. M066604/18/700/3500

1. Index Mark and registration Number of Vehicle

GBC 3083 B

- 2. Name of Policy Holder SOON TYRE PTE LTD
- 3. Effective date of the Commencement of Insurance for the purposes of 03 JUNE 2018 the Ordinance
- 4. Date of Expiry of Insurance

02 JUNE 2019

or with NOS permission.

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 in connection with the Policyholder's business.
 - (2) Use for the carriage of passengers (other than for hire or reward) in connection with Policyholder's business.
 - (3) Use for social, domestic and pleasure purposes.

The Policy does not cover

- (1) Use for hire or reward, or for racing, pace-making, reliability trial, or speed-testing.
- (2) Use whilst drawing a trailer except the towing of anyone disabled mechanically propelled vehicle.

*Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Federation of Malaya) or Section 7 of the Motor Vehicles (Third Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under these headings.

WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of part IV of the Road Traffic Ordinance 1958 (Federation of Malaya) and Motor Vehicles (Third Party Risks and Compensation) Act (Cap 88 of the Revised Edition)/(Amendment) Act 1980 (Republic of Singapore).

02.05.2018ja

for India International Insurance Pte. Ltd. (APPROVED INSURERS)

U. I. ENTERPRISE

M.Z. 300 (GOODS CARRYING) PRIVATE TYPE

AS CHIEF AGENT

Examd.....