

CS3/MSG/BE

REF

CS3/MSG18017204/Gqb-1

Special Instruction

Surveyor
Menmen
From (Person)

Gao Qiang
Jowyn Tay

ASSIGNMENT (Office)

MSIG

Date/Time 07-11-2018

Estimated Cost

Bill to

OD (TP) WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No

YL8332E

Insured

FBF 4141U

at Workshop n/s

Heng Motor

Tel

81123936

of

Blk 5 De fu lane 10 # 01-582

Policy No

28842144VMF

Claim No

M570688/JT

Sum Insured

Excess

Make of Veh
(Client's Record)

D.O.A 15/09/2018

CA / REV / RET. / REV 24 HRS lupo

Date/Time 10:55am @ 21/9/18

Person Contacted

Ah heng

R.O.D. Endorsement

Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate	Do Not Tintize
	YL8332E - CS3/INC15021833/Gqb3d1	DOA: 18/12/15
	FBF 4141U - X	
21/11/18	Pending both party GUA report	
22/11/18	Submit us \$5700, 7 days. (Red \$4750, 43%)	

RECEIVED 27 NOV 2018

[Signature]
26/11/2018

Repair days *7

Taim
lin

28/11/18

PRS
KAR

REF: NSIG

ASSIGNMENT

From _____ Date _____
 Estimated Cost _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s Heng Motor
 of _____
 Insured _____
 Policy No _____
 Claims No _____
 Sum Insured _____ Excess _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 7 days Res: Yes or No
 Lum Sum: 20 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: YL8332E Yr Regn: Oct 04
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or

Make: Toyota Dyna cc 2986
 Colour: Silver A/C: Insured / Std / NI / NA
 Sp Reading: 535185 T/Radio: Insured / Std / NI / NA

Eng/No: _____
 C/No: ITFUF35Y 00600 1010
 Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nip / S/Rim / STD A/Rim or

Tyre Size: F: 185 R14
 R: 155 R12

BS: DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or

Front Rear
 R/Bal: 5 mm R/Bal: 5/5 mm
 L/Bal: 5 mm L/Bal: 5/5 mm
 D.O.A. _____ D.O.I. 21-09-18

Survey held at w/s 5:30pm

Des. of Damages: Fr / Rear / O/S / NI / U/C / Rooftop or

and
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time _____ Action / Instruction
\$6000 - \$7000

RECEIVED 25 SEP 2018

Date/Time, File Pass to? ☐ : Preli. Report
☐ : Final Report

Date/Time, File Return to?

Days Of Repair: 7

Resurvey No. of Trip: -

Survey Fee:

Transportation

\$ + RS. \$

Photos

Others

TOTAL

Report Format: PRS

Lump Sum / I.B.I.: (\$ _____)

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	17 Sep 2018		21 Sep 2018 09:50 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

Insured:	Domino's Pizza Singapore Pte. Ltd., Co. Reg. No.: 200900719D [Created by insurer]		
Main Claimant:	NEW CASTLE BUILDERS PTE.LTD., Co. Reg. No.: 2010805585W		
Vehicle Reg. No.:	YL8332E	Date of Loss:	15/09/2018 00:00 - :59 [166 Months and 16 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 570688	Policy/Cover Note No.:	28842144VMF (Comprehensive) Coverage: 01/11/2017 - 31/10/2018
Vehicle Reg. No. (Insured):	FBF4141U	Policy No. (Claimant):	
Repairer:	Heng Motor Services (Defu) Blk 5 Defu Lane 10, #01-582, 539186 Defu Lane - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jowyn Tay Mei Ling - 6643 1307]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 09/11/2018]		
Adj Asg. Remarks:	Liability (Non-reporting). SJE DISAGREE APPOINT LKK. CONTACT NO: 81123936. WAITING FOR TP REPORT		

ASSOCIATED MAIL RECEIVED

- MSIG_SG (07/11/2018): Report Send Back Alerts - YL8332E (TP)

[View All](#)
[Compose Case Mail](#)

ALL ASSOCIATED TASKS

Due Date	Priority	Type	Task Group	Subject	Handler	View All	Search Tasks	Create New Task	Complete
						Assigned By	Completed On	Created On	Done?
No results.									

Catherine Chong (LKK Auto)

From: Jowyn Tay <jowyn_tay@sg.msig-asia.com>
Sent: Wednesday, 7 November, 2018 2:45 PM
To: Admin-D (LKKAuto); assignments; sur@lkkauto.com
Subject: Request for Paper Re-Survey for YL8332E (Our Ref: M570688/JT)

Importance: High

Dear Celine &/or Catherine,

Refer to the subject matter.

Please proceed to do paper re-survey for YL8332E. Copies of the 3rd party survey report has been uploaded and rights has been granted via Merimen.

Thank you.

Best Regards,

Jowyn Tay
Executive, Claims Services
D: +65 6643 1307 | F: +65 6225 7402 | jowyn_tay@sg.msig-asia.com



MSIG



Insurer Claims
Team of the Year
2016

MSIG Insurance (Singapore) Pte Ltd 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | T: +65 6220 9644 | F: +65 6225 6371 | Co. Reg. No. 200412212G | msig.com.sg



A Member of **MS&AD** INSURANCE GROUP

BONNIE KWOK LLC

Advocates & Solicitors

101A Upper Cross Street
#08-12 People's Park Centre
Singapore 058358

Tel : (65) 6536 6026
Fax : (65) 6536 2279
Not for service of court documents
GST Reg No. 2012035472

Your Ref: FBF 4141 U (570688)
Our Ref: BK.18786.18.jl

REG/CS/PAY/FA

07 NOV 2018

31 October 2018

M/s MSIG Insurance (Singapore) Pte. Ltd.
16 Raffles Quay
#24-01 Hong Leong Building
Singapore 048581

By Hand

Dear Sirs

ACCIDENT INVOLVING YL 8332 E & FBF 4141 U ON 15 SEPTEMBER 2018

We act for M/s New Castle Builders Pte Ltd, the owner of vehicle no. YL 8332 E in the above matter.

We are instructed that on the 15 September 2018, your insured riding motor vehicle no. FBF 4141 U had negligently collided into our client's said vehicle.

We are instructed that as a result of the said collision, our client has suffered loss and damage as follows: -

i.	Cost of Repairs	-\$	9,950.00
ii.	Loss of Use (13 days x \$150.00)	-\$	1,950.00
iii.	Survey Report	-\$	870.00
iv.	LTA search fees	-\$	8.00
v.	GIA search fees	-\$	29.00
vi.	Transport, Postage, Xerox and other incidental	-\$	53.50
vii.	Costs	-\$	1,605.00
	Total	\$	<u>14,465.50</u>

We enclose herewith a copy of the LTA search result, GIA report of our client, survey report, and repair bill, certificate of insurance and 150 original photographs for your attention.

Kindly note that under the NIMA protocol, all requests for resurvey are required to be made during the protocol period in eight (8) weeks from receipt of this letter.

Kindly revert whether liability is admitted.

Yours faithfully

BONNIE KWOK

Enc. (by hand)

c.c. Client; and
Domino's Pizza Singapore Pte Ltd

Yani, plz
(1) upload
(2) ML 1 or 2

John
07/11/18

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 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

Date Of Report	01/11/2018 12:50
Date Of Accident	15/09/2018 17:00
Exact Location Of Accident	ADMIRALTY ROAD WEST & SEMBAWANG DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBF4141U
Insured/Policyholder	
Name Of Registered Owner	DOMINO'S PIZZA SINGAPORE PTE LTD
Co Reg No	200900719D
Email Address	RAJESWARY.RATNASAMY@DOMINOS.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-91605933

Vehicle Particulars

Manufacturer	YAMAHA
Model	YBR125
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 28842144 VMF
Cover Note Number	

Driver

Name of Driver	MARZUQ BIN MOHAMAD RIZAL HUSAINY
NRIC No	S9912846A
Date Of Birth	29/04/1999
Occupation	INDOOR
Date Of Driving Pass	26/12/2017
Driving Experience	0 YEAR AND 8 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91605933
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	APT BLK 352A CANBERRA ROAD #03-263 S751352
Postcode	
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	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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?	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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SEMBANWANG NPC
Police Station Address	ROAD: 4 SEMBAWANG CRESCENT , POSTCODE: 757633 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE ATTACHED.

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	YL8332E
Vehicle Make/Model/Colour	LORRY
Details Of Properties	NIL
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NIL
NRIC/Passport Number	
Contact Number	NIL
Address	NIL
Postcode	NIL
Insurance Company Name	
Nature Of Damage	NIL

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	MARZUQ BIN MOHAMAD RIZAL HUSAINY
Approximate Age	19
Injuries Sustain	
Injured person in which vehicle?	FBF4141U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	APT BLK 352A CANBERRA ROAD #03-263
Postcode	751352

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:

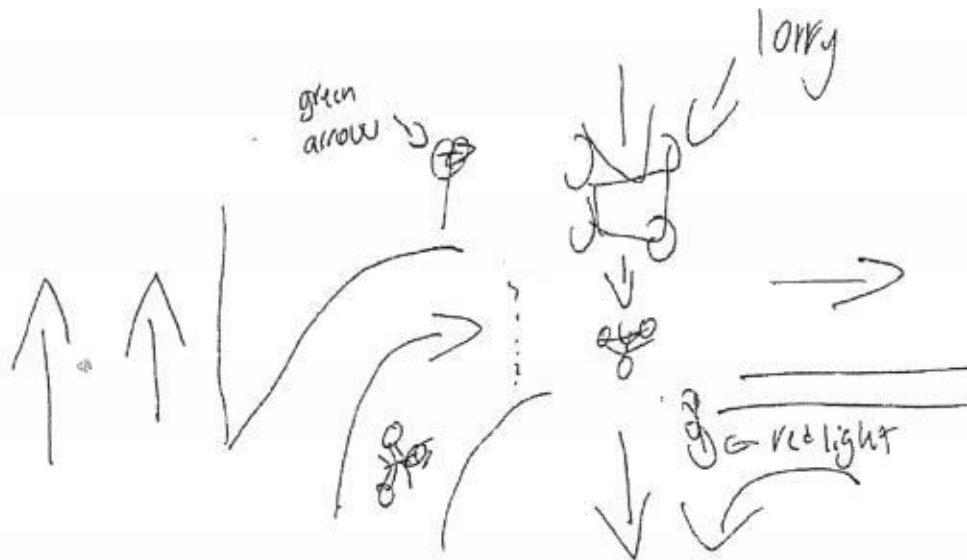
26/10/2018
14:30



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO THE ATTACHED POLICE REPORT 1/201808192184

I was on my way to Northlink to send a big order. I was passing through Senoko Industrial area, then there was a right turn that I had to make. As I enter the bend before I enter the bend the slowed down to ensure that the traffic light was a green arrow. As I proceed the green arrow was still there, after I made the turn I blacked out. After when I was ~~conscious~~ conscious once again I saw myself bleeding from head to toe and a lorry noticed a lorry was involved in my accident. I stayed calm although I took a very serious injury. Later noticed that one of my teeth came out and caused a hole on my upper lip. I couldn't move mobile most of the left side of my body.

VEH NO: FDF 4141 U

INS CO: MSIG INS

DOM: 15-09-2018

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: 26/10/18
14:30



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:





**SINGAPORE
POLICE FORCE**



T/20180919/2184

1 of 3

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

Report No. T/20180919/2184

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/09/2018 21:23		Vide Report No.:		Station Diary No.: 127	
Informant's Particulars					
Name of Informant: MARZUQ BIN MOHAMAD RIZAL HUSAINY			Address: APT BLK 352A CANBERRA ROAD #03-263 SINGAPORE 751352		
ID Type / ID No.: NRIC NO / S9912846A			Contact No.: Home/Office: Mobile: 91605933		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 19	Date of Birth: 29/04/1999	Type of Informant: Rider		
Race: Malay			Language:		Institution / School Name:
Occupation: Student			Driving Licence Information: Class: 2B,3A Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 15/09/2018 17:00	Type of Location: T-Junction
Location: Along Road 1 ADMIRALTY ROAD WEST SEMBAWANG DRIVE Junction of Admiralty Road West and Sembawang Drive.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBF4141U	Motorcycle					0
UNKNOWN (Not Accurate)	Lorry				Slightly Damaged	0

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



**SINGAPORE
POLICE FORCE**



T/20180919/2184

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

2 of 3

Report No. T/20180919/2184

CONTINUATION OF REPORT

Rider			
Name	MARZUQ BIN MOHAMAD RIZAL HUSAINY	ID No.	S9912846A
Related Vehicle	FBF4141U (Motorcycle)	Contact No.	91605933
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3A Date of Expiry: NIL
Date Treatment	15/09/2018	Date Discharge	16/09/2018
No. of Days granted Medical Leave	07	Degree of Injury	Serious

Brief Details.

On 15.09.2018, at about 1700hrs, I was going to Northlink Building for Pizza delivery. When I reach junction of Admiralty Road West and Sembawang Drive, the turning right arrow is green. I remember there is one vehicle stopped at the traffic light and it was stationary. Then moment I made a right turn, I believed some vehicle hit my motorcycle and I blacked out. When I woke up, I realized my face was full of blood, and I was then conveyed to KTPH by ambulance.



**SINGAPORE
POLICE FORCE**



T/20180919/2184

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

3 of 3



Report No. T/20180919/2184

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 / Staff Sgt WANG LIZHE	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 19/09/2018 21:23
Officer In Charge Of Case: TP / GIT / SI MOHAMMAD ABDILLAH BIN PALIL Contact No.: 65476246	Classification Of Case: 

Authentication Stamp
NP168

3347531

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES)

Class 2B Motorcycles < 200 CC
Class 3A Motor cars without clutch pedals < 3000 kg with < 7 passengers, exclusive of the driver; and motor tractors/trailers without clutch pedals < 2500 kg

Effective Date: 06 Feb 2016
26 Dec 2017

S / No: 9000312763

Licence No: S9912846A

Class 2B
Class 3A

S9912846A

7428A

NRIC No: S9912846A

Date of Issue: 29-08-2014

Address: APT BLK 352A GANBERRA ROAD #03-363 SINGAPORE 751352

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES)

Class 2B Motorcycles < 200 CC
Class 3A Motor cars without clutch pedals < 3000 kg with < 7 passengers, exclusive of the driver; and motor tractors/trailers without clutch pedals < 2500 kg

Effective Date: 06 Feb 2016
26 Dec 2017

S / No: 9000312763

Licence No: S9912846A

Class 2B
Class 3A

S9912846A

7428A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9912846A

Name: MARZUQ BIN MOHAMAD RIZAL HUSAINY

Race: MALAY

Date of birth: 29-04-1999

Sex: M

Country/Place of birth: SINGAPORE

002757706C

REPUBLIC OF SINGAPORE

DRIVING LICENCE

Licence Number: S9912846A

Name: MARZUQ BIN MOHAMAD RIZAL HUSAINY

Birth Date: 29 Apr 1999

Issue Date: 26 Dec 2017

002757706C

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
 Tel +65 6827 7888, Fax +65 6827 7800
 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
 (REPUBLIC OF SINGAPORE)
 THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.Y.100
 Commercial Cycles

MOTOR CYCLE FLEET MARKET VALUE
 Comprehensive

Certificate No. B 28842144 VMF

Excess: SGD300

1. Index Mark and Registration Number of Vehicle

FBP4141U

2. Name of Policyholder

Domino's Pizza Singapore Pte. Ltd.

3. Effective Date of the Commencement of Insurance for the purposes of the Act

01/11/2017

4. Date of Expiry of Insurance

31/10/2018

5. Persons or Classes of Persons entitled to drive*

Any other person provided he is in the Policyholder's employ and is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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. Limitations as to use*

(a) Use only for the Policyholder's business or profession.
 (b) Use for social domestic and pleasure purposes.

The Policy does not cover use for the carriage of passengers for hire or reward racing pace-making reliability trial or speed-testing.

* Limitations rendered Inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

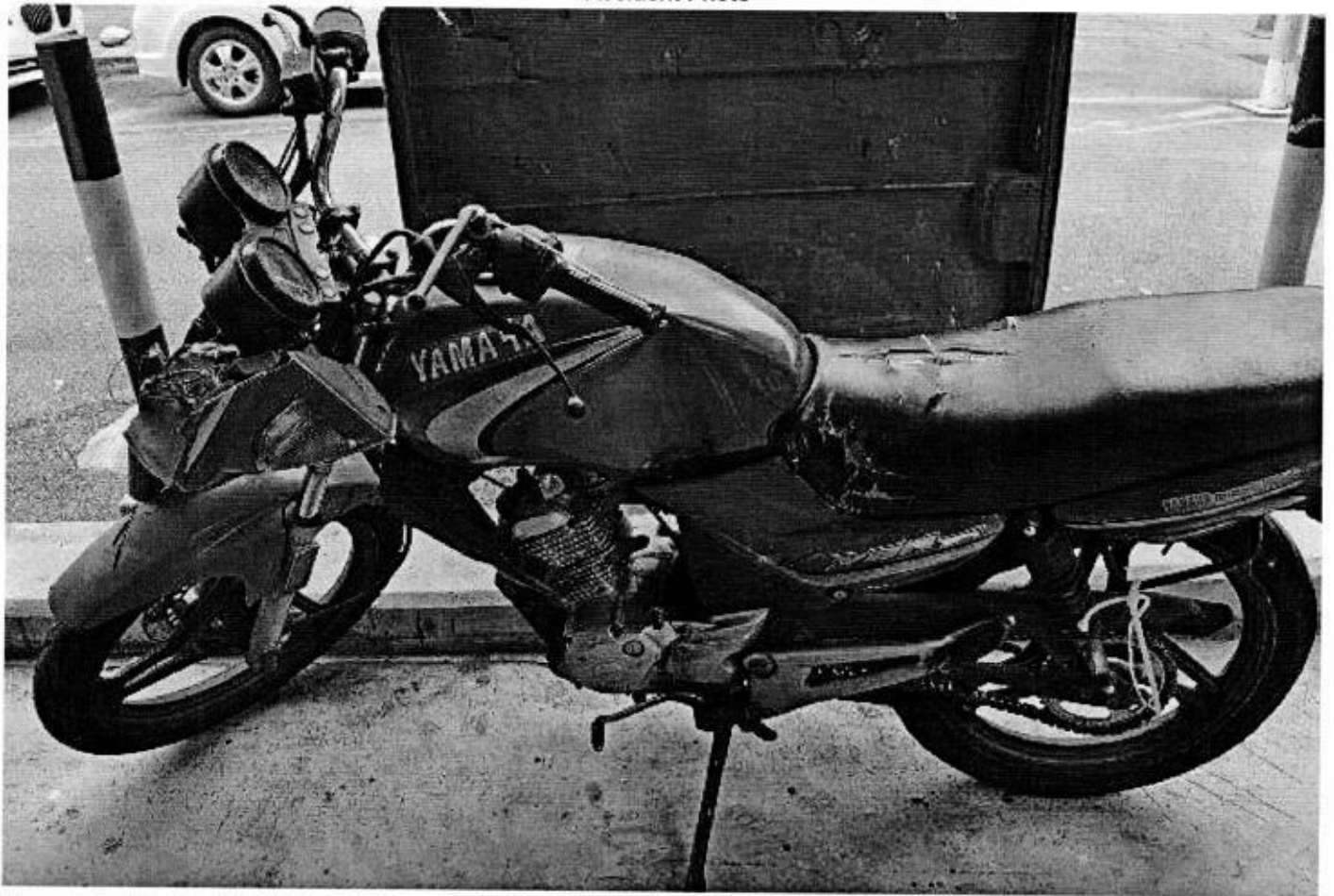
I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.
 Approved Insurers

for Chief Executive Officer

ELYM201711061152

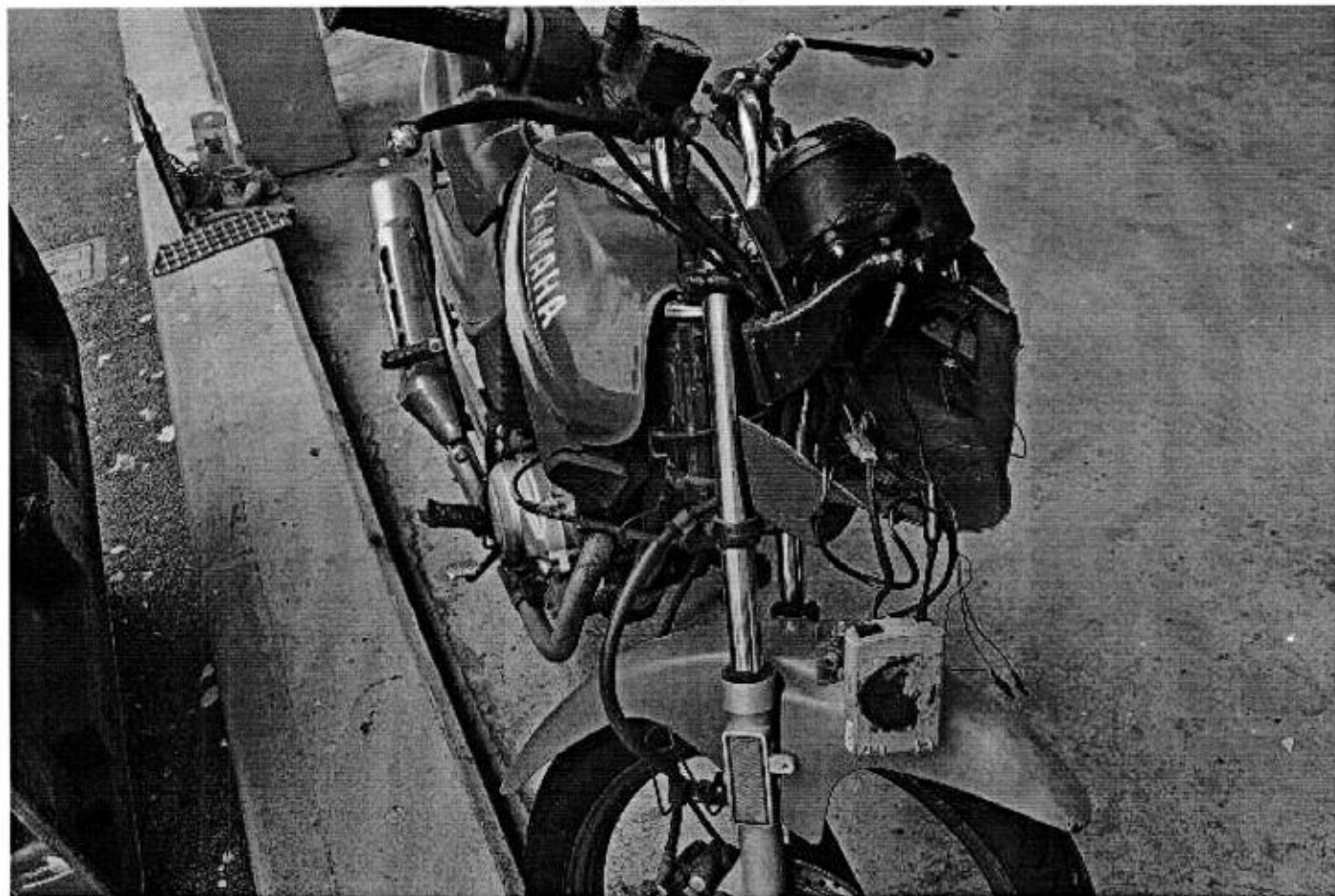
Accident Photo



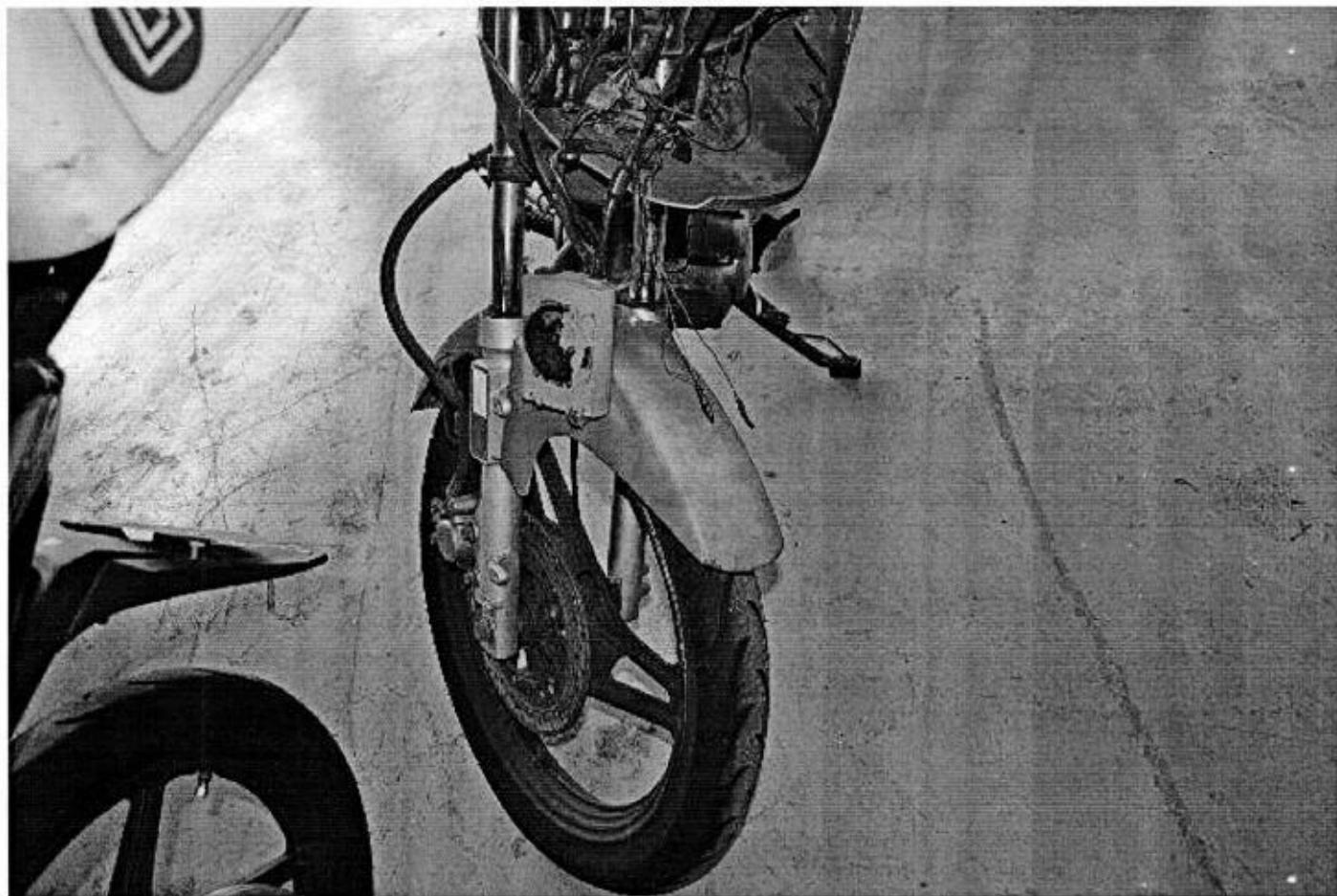
Accident Photo



Accident Photo



Accident Photo



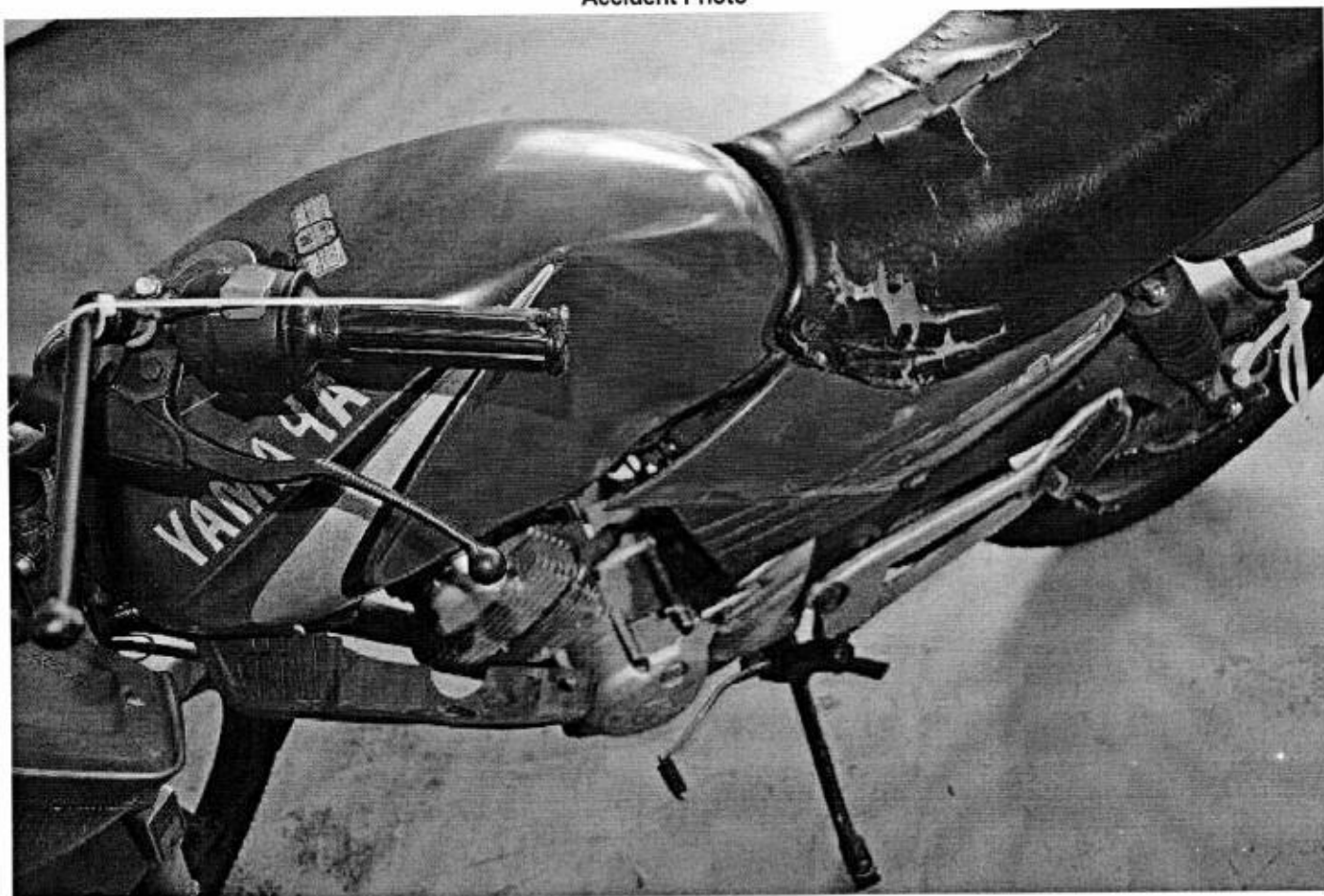
Accident Photo



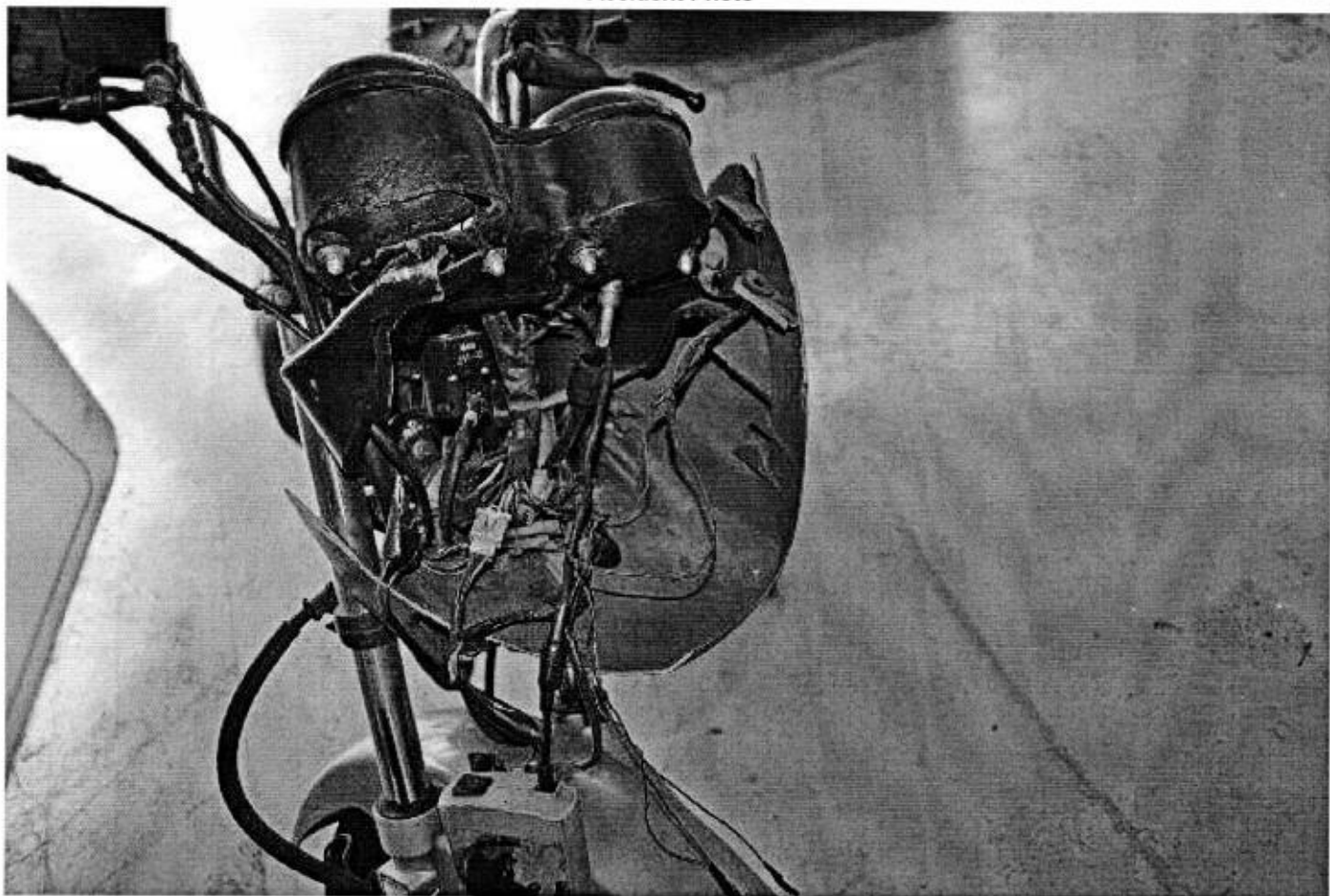
Accident Photo



Accident Photo



Accident Photo



Accident Photo



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	17/09/2018 15:22
Date Of Accident	15/09/2018 17:25
Exact Location Of Accident	ADMIRALTY ROAD WEST TOWARDS ADMIRALTY ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YL8332E
Insured/Policyholder	
Name Of Registered Owner	NEW CASTLE BUILDERS PTE.LTD.
Co Reg No	2010805585W
Email Address	TOHLENG@NEWCASTLEGROUP.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67677878

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORK
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5094827849
Cover Note Number	

Driver

Name of Driver	TAN KHIM POH
NRIC No	S7512836C
Date Of Birth	30/03/1975
Occupation	OUTDOOR
Date Of Driving Pass	08/12/1995
Driving Experience	22 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87430639
Fax Number	
Contact Number	
EMail Address	TOHLENG@NEWCASTLEGROUP.COM.SG

Address	BLK 141 MARSILING ROAD #09-2066
Postcode	730141
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	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO MOTORCYCLIST
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	FBF4141U (MOTORCYCLE)
Number of vehicles involved in the accident	2
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ON 15/09/2018 AT ABOUT 1725HRS. I WAS DRIVING MY LORRY ON ADMIRALTY ROAD WEST TOWARDS ADMIRALTY ROAD. ON THE MOST RIGHT LANE . AS I WAS APPROACHING THE JUNCTION OF ADMIRALTY ROAD WEST AND SEMBAWANG DRIVE . I SAW THAT THE TRAFFIC LIGHT WAS STILL GREEN ,AND THERE WAS NO VEHICLES TURNING RIGHT ONTO SEMBAWANG DRIVE. THUS I WENT ON TO PROCEED WITH DRIVING THROUGH THE SAID JUNCTION WHEN SUDDENLY, A RED MOTORBIKE (FBF4141U) TURNED RIGHT TOWARDS SEMBAWANG DRIVE FROM THE OPPOSITE OF ADMIRALTY ROAD WEST ,I IMMEDIATELY HIT MY EMERGENCY BRAKES HOWEVER MY LORRY STILL HIT ONTO THE MOTORBIKE ,I THEN SHIFTED MY LORRY TO ASIDE AND WENT OUT TO CHECK ON THE MOTORBIKE RIDER, I WAS NO INJURED , THE MOTORBIKE RIDER IS A MALE, MALAY 19YEARS OLD .HOWEVER I DID NOT MANAGE TO GET HIS PARTICULARS .I CALLED FOR POLICE AND THE TRAFFIC POLICE CAME AFTER AWHILE . THE AMBULANCE SENT THE RIDER TO THE HOSPITAL AND THE POLICE OFFICER INFORMED ME TO LODGE A TRAFFIC ACCIDENT REPORT WITH REF TO F/20180915/0220.

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	FBF4141U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE

Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name UNKNOWN
Approximate Age
Injuries Sustain
Injured person in which vehicle? FBF4141U
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Accident Sketch Plan

SKETCH PLAN


IMPORTANT NOTICE

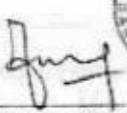

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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.

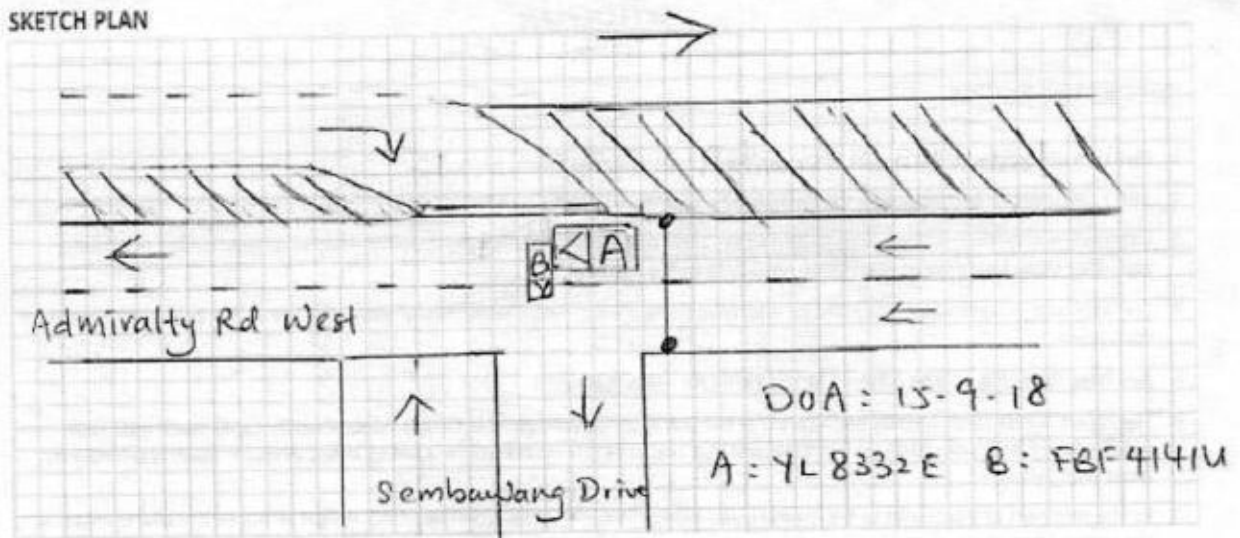

Policyholder's Signature
Date & Time: 17/9/18 1330hrs


Driver's Signature
(If driver is not the policyholder)
Date & Time: 17/9/18 1330hrs


Reporting Centre Personnel's Signature
Name: April
NRIC/FIN No.:


Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the attached Police Report No: T/20180915/2144

DECLARATION

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



Policyholder's Signature

Date & Time: 17/9/18 1330hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time: 17/9/18 1330hrs

Reporting Centre Personnel's Signature

Name: April

NRIC/TIN No:



POLIS REPORT



**SINGAPORE
POLICE FORCE**



1/20180915/2144

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

1 of 3

Report No. 1/20180915/2144

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/09/2018 21:30	Vide Report No.: F/20180915/0220	Station Diary No.: 162
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Informant's Particulars

Name of Informant: TAN KHIM POH			Address: APT BLK 141 MARSILING ROAD #09-2066 SINGAPORE 730141		
ID Type / ID No.: NRIC NO / S7512836C			Contact No.: Home/Office: Mobile: 87430639		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 43	Date of Birth: 30/03/1975	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SITE COORDINATOR			Driving Licence Information: Class: 2B,2A,2,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 15/09/2018 17:25	Type of Location: T-Junction
Location: Along Road 1 ADMIRALTY ROAD WEST SEMBAWANG DRIVE Junction of ADMIRALTY ROAD WEST and SEMBAWANG DRIVE Lamp Post Number: 141	Weather: Clear	Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: Dual Carriage Way	Traffic Control: Traffic Light - Working	Traffic Volume: Light		
Type of Collision: Between Moving Vehicles - Head To Side		Anyone conveyed by ambulance: No		

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF4141U	Motorcycle	YAMAHA		Red	Seriously Damaged	0
YL8332E	Lorry	TOYOTA		Silver	Seriously Damaged	0

Details of Person Involved

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

POLIS REPORT



**SINGAPORE
POLICE FORCE**



T/20180915/2144

2 of 3

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20180915/2144

CONTINUATION OF REPORT

Driver			
Name	TAN KHIM POH	ID No.	S7512836C
Related Vehicle	NIL	Contact No.	87430639
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 15/09/2018 at about 1725hrs, I was driving my lorry on Admiralty Road West towards Admiralty Road, on the most right lane. As I was approaching the junction of Admiralty Road West and Sembawang Drive, I saw that the traffic light was still green, and there was no vehicles turning right onto Sembawang Drive. Thus I went on to proceed with driving through the said junction when suddenly, a red motorbike (FBF4141U) turned right towards Sembawang Drive from the opposite of Admiralty Road West. I immediately hit my emergency brakes however my lorry still hit onto the said motorbike. I then shifted my lorry to aside and went out to check on the motorbike rider. I was not injured. The motorbike rider is a Male, Malay, 19 years old, however I did not manage to get his particulars. I called for police and the Traffic police came after awhile. The ambulance sent the rider to the hospital and the police officer informed me to lodge a traffic accident report with ref to F/20180915/0220.

POLIS REPORT

**SINGAPORE
POLICE FORCE**

T/20180915/2144

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

3 of 3

Report No. T/20180915/2144

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:

J /

Sgt 2 KOH YAO ZU

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD ABDILLAH BIN PALIL

Contact No: 65476246



Stamp

Signature :

Singapore Police Force

Signature Of Informant:

Date/Time:

15/09/2018 21:30

Classification Of Case: