Trade of the state	Services. par i savosi.	Date & Time Completed	Done by
Date In: 30/11/18 11:38	Job description	- Date of time companies	
Ref No. NAI MSG 18021598 164.	SAS c-filing		
Veh No: SGX 97885.	E-mail (within Shis, AIC 2hrs)		
DOA 33/11/18 17:00.	I-Motor Claim Form	4	
	I-Motor W/O (Within: OD 2)	ns, TP (hrs)	
OD Reporting Only	i-Photo Uploaded		
	Assessment/Survey Report	<u> </u>	
TP Insurer:	Ass't Report by Fax / Hand	to Owner/Wksp	ACCUSED THE PROPERTY OF THE PERSON NAMED OF TH
Preferred Wksp / INC Assign Wksp / QW: (	A construction of the cons	101;	ax:
1.1.1.51	IC 352 A . INC	( , )/Non-INC( ).	
Owner / Driver: (	V V3:-11	Tel:	)
Policy No: ( ) Peri	od: ( )	Cover Type: (	
Confirmed by : (	Date:	Time:	)
Insured/Driver Liability: ( %) [N	ote-Est. Status (WO): N: 0-	20%; P: 21-79%. P: 80-1	[00%]
USC 1000 000 000 000 000 000 000 000 000 0	'arranty: YES ( )/NO (	)	
Excess: (\$ ) Loading: \$1,00		and the substitute of the subs	ADEC PETERS
General Remarks			Con Si
( ) Walk-In Customer: Customer's Information	nation strictly Confidential & :	Strictly NO refer of repairer.	
( ) Total Loss Case : to e-mail Insurer		V 04 1 3	
Drive-In ( )/ Towed-In ( ); Invoice:		Towing Co: (	. )
(Cemarks) (INC hothur, 6788 6616) 1		Ditesclamo Cojuple 547.	NDone by
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#### 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 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.

A PARAMETER SECTION OF THE	ACCIDENT STATEMENT	it.
Date Of Report	30/11/2018 11:38	
Date Of Accident	23/11/2018 17:00	
Exact Location Of Accident	BEACH RD LOT 78 AT GOLDEN MILE FOOD CENTRE	
Country/State of Loss	SINGAPORE	
D	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGX9788S	
Insured/Policyholder		
Name Of Registered Owner	LIM KIM HOCK	
NRIC No	S0162682E	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-98162236	
Alternative Phone No	OFFICE-98162236	
Vehicle Particulars		
Manufacturer	HONDA	
Model	VEZEL	
Exact Purpose for which vehicle was being used at time of accident	PARKED	
Are you claiming under your own insurance policy for repair to your vehicle?	NO	
If No, Please state action to be taken	THIRD PARTY	
Vehicle Category	PRIVATE CAR	
Insurance Company		
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE, LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	A 80420972 QMX	
Cover Note Number	2	
Driver		
Name of Driver	LIM KIM HOCK	
NRIC No	S0162682E	
Date Of Birth	17/09/1949	
Occupation	OUTDOOR	
Date Of Driving Pass	14/03/1974	
Driving Experience	44 YEARS AND 8 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-98162236	
Fax Number		
Contact Number	OFFICE-98162236	
EMail Address	NOEMAIL	
	Page 1	-524

BLK 200 TOA PAYOH NORTH #10-1043 Address

310200 Postcode Was driver an employee of the Insured's Company NO

OWNER 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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

CLEAR Weather Conditions WET Road Surface

Other Information

Was any foreign vehicle involved in this accident?

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

TOA PAYOH NEIGHBOURHOOD POLICE CENTRE Police Station Name

ROAD: 93 TOA PAYOH CENTRAL TOA PAYOH COMMUNITY BUILDING , Police Station Address

POSTCODE: 319194, COUNTRY: SINGAPORE

NO

NO

YES

0

TEL NO: 1800-2519999 - FAX NO: 63548749 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

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

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SJC352A

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

#### SKETCH PLAN

### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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

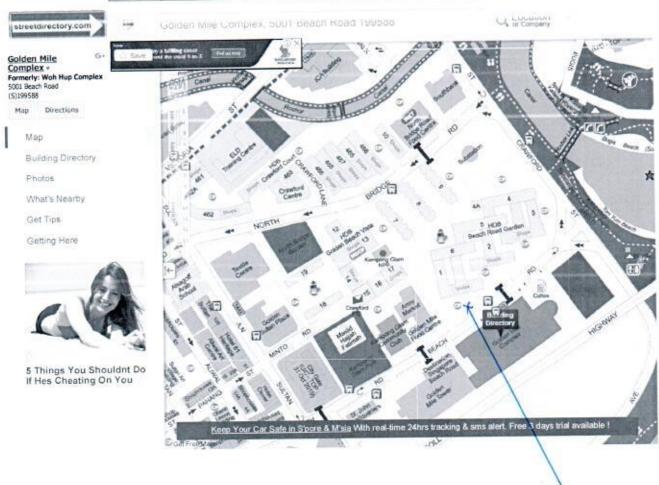
(ii) for complying with requirements under any regulations, laws or court orders.

Palicyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name:

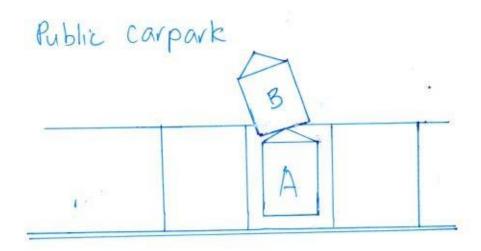
NRIC/FIN No.:





A-SGX9788S B-SJC352A

Accident site







1/20181129/2100

1 of 3

Report No. T/20181129/2100

Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 29/11/2018 17:34		Vide Report No.: T/20181123/2134	Station Diary No.: 155		
Informa	nt's Particu	ulars				
Name of Informant: LIM KIM HOCK			Address: APT BLK 200 TOA PAYOH NORTH #10-1043 SINGAPORE 310200			
ID Type / ID No.: NRIC NO / S0162682E		Contact No.: Home/Office: Mobile: 98162236				
National SINGAP	ity: ORE CITIZ	EN	Email:			
Sex: Male	Age:	Date of Birth: 17/09/1949	Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: CONSTRUCTION COMPANY OWNER		COMPANY	Driving Licence Informat Class: 3	ion: Date of Expiry:		

General Inform	mation of the Accider	nt			
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 23/11/2018 17:00	Type of Location: Car Park	
Location: Along Road 1 BEACH ROA AT OSCP LO		E FOOD CENTRE			
Weather: Road S		Road Surface: Wet		Road Speed Limit:	
Traffic Flow: Traffic Control:				Traffic Volume:	
Type of Collis Moving Vehic	sion: cle Against - Parked Ve	ehicle	1.0	Anyone conveyed by ambulance:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGX9788S	Car	HONDA	VEZEL	Purple	Slightly Damaged	0
SJC352A	Car					0

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





/20181129/2100

2 of 3

Report No. T/20181129/2100

Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

CONTINUATION OF REPORT

Driver						
Name	LIM KIM HOCK		ID No		S0162682E	
Related Vehicle	SGX9788S (Car)		SGX9788S (Car) Contact No		ct No.	98162236
Hospital/Clinic	NIL		Class Drivin Licent Expiry	g	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL [		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	f Injury	NIL	

#### Brief Details.

On 23/11/18 at about 1445hrs, I parked my car (SGX9788S) at the Open Space Carpark Lot 78 at Golden Mile Food Centre. At that time, my car was still intact.

Later on at about 1700hrs, I went back to the lot to retrieve my car and realized that there were 2 Traffic Police officers at my car. I discovered that my car's front left bumper was dented in and misaligned. The TP told me that someone called them as they witnessed a car hit and run on my parked car. They gave me a case card with report number A/20181123/0112 (IO Tan Chin Yong, tel: 65476178).

I have a front camera installed in my car and I had sent the footage to Traffic Police. TP also provided me with the defendant's vehicle registration number (SJC352A).

I am lodging this report for insurance claiming.





3 of 3

Report No. T/20181129/2100

Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 CONTINUATION OF REPORT Tel No: 1800-2519999

## 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: E / Staff Sgt MUHAMMAD FARIS BIN SUPARLI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/11/2018 17:34
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case:
Authentication Stamp SIGNATURE	









LIM KIM HOCK

CHINESE

17-09-1949 SINGAPORE

501626821

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

NAIC No. SO162682E

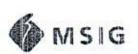
4873214

18-08-2012

APT BLK 200 TOA PAYOH NORTH SINGAPORE 310200

NP 428A

Licence No: \$0162682E



10352

MSIG Insurance (Singapore) Ptc. Ltd. 4 Shantan Way #21-01 SGX Cantro 2 Singapore 068107 Tel: (65) 8827 7888 Fax: (65) 8827 7690 Co. Rog. No. (200412212G GST Reg. No. 20-0412212G

# Certificate of Insurance

COPY

()

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (PEDERATION 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, 1995 EDITION (REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1 Individual Ownership

MOTOR MAX Comprehensive

Certificate No. A £0420372 QMX

Excess: SGD700

Windscreen Excess: SGD100

 Index Mark and Registration Number of Vehicle S3X9786S

2. Name of Policyholder Lim Kim Hock

- 3. Effective Date of the Commoncement of Insurance for the purposes of the Act 16/12/2017
- 4. Date of Exptry of insurance 15/12/2018
- 5. Parsons or Classes of Persons entitled to drive"

Lim Kim Rock

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

- Provided that the person driving is permitted in accordance with the ligansing or other laws or laws or regulations to drive the Motor Vehicle or hos 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.
- 5. Limitations us to use"

Use only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward racing pice-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Umitations randered inciparative 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.

PLEAST NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED

This Certificate is not transferable to a new owner of the vahicle. 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).

IAVE HEREBY CERTIFY that the Folloy to which this Cortificate relates is issued in accordance with the provisions of the Motor Vehicles (Taird-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 therapi.

Signature / Date

my Ler Senior Vice President, Agencies

MSIG Insurance (Singapore) Fite. Ltd. William. Approved Insurers

Counter-Signatory:

L-J Insurance Agency Pte, Ltd.

This cortificate is not write unless it is signed for & on behalf of the Company and Counter-Signed by a duly authorised representative of the Counter-Signalory.

XLJIATL 2017120516020067