

[wel 1 Jan'03]

Estimated Wksp / INC Assign Wksp / QW: () Tel: Fax:)

Owner / Driver: (Tel:)

Policy No: () Period: () Cover Type: ()

Confirmed by: (_____ Date: _____ Time: _____)

Injured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 80-100%]

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

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

General Remarks:	1. <i>Chrysomelidae</i>	2. <i>Chrysomelidae</i>	3. <i>Chrysomelidae</i>	4. <i>Chrysomelidae</i>	5. <i>Chrysomelidae</i>	6. <i>Chrysomelidae</i>	7. <i>Chrysomelidae</i>	8. <i>Chrysomelidae</i>	9. <i>Chrysomelidae</i>	10. <i>Chrysomelidae</i>	11. <i>Chrysomelidae</i>	12. <i>Chrysomelidae</i>	13. <i>Chrysomelidae</i>	14. <i>Chrysomelidae</i>	15. <i>Chrysomelidae</i>	16. <i>Chrysomelidae</i>	17. <i>Chrysomelidae</i>	18. <i>Chrysomelidae</i>	19. <i>Chrysomelidae</i>	20. <i>Chrysomelidae</i>	21. <i>Chrysomelidae</i>	22. <i>Chrysomelidae</i>	23. <i>Chrysomelidae</i>	24. <i>Chrysomelidae</i>	25. <i>Chrysomelidae</i>	26. <i>Chrysomelidae</i>	27. <i>Chrysomelidae</i>	28. <i>Chrysomelidae</i>	29. <i>Chrysomelidae</i>	30. <i>Chrysomelidae</i>	31. <i>Chrysomelidae</i>	32. <i>Chrysomelidae</i>	33. <i>Chrysomelidae</i>	34. <i>Chrysomelidae</i>	35. <i>Chrysomelidae</i>	36. <i>Chrysomelidae</i>	37. <i>Chrysomelidae</i>	38. <i>Chrysomelidae</i>	39. <i>Chrysomelidae</i>	40. <i>Chrysomelidae</i>	41. <i>Chrysomelidae</i>	42. <i>Chrysomelidae</i>	43. <i>Chrysomelidae</i>	44. <i>Chrysomelidae</i>	45. <i>Chrysomelidae</i>	46. <i>Chrysomelidae</i>	47. <i>Chrysomelidae</i>	48. <i>Chrysomelidae</i>	49. <i>Chrysomelidae</i>	50. <i>Chrysomelidae</i>	51. <i>Chrysomelidae</i>	52. <i>Chrysomelidae</i>	53. <i>Chrysomelidae</i>	54. <i>Chrysomelidae</i>	55. <i>Chrysomelidae</i>	56. <i>Chrysomelidae</i>	57. <i>Chrysomelidae</i>	58. <i>Chrysomelidae</i>	59. <i>Chrysomelidae</i>	60. <i>Chrysomelidae</i>	61. <i>Chrysomelidae</i>	62. <i>Chrysomelidae</i>	63. <i>Chrysomelidae</i>	64. <i>Chrysomelidae</i>	65. <i>Chrysomelidae</i>	66. <i>Chrysomelidae</i>	67. <i>Chrysomelidae</i>	68. <i>Chrysomelidae</i>	69. <i>Chrysomelidae</i>	70. <i>Chrysomelidae</i>	71. <i>Chrysomelidae</i>	72. <i>Chrysomelidae</i>	73. <i>Chrysomelidae</i>	74. <i>Chrysomelidae</i>	75. <i>Chrysomelidae</i>	76. <i>Chrysomelidae</i>	77. <i>Chrysomelidae</i>	78. <i>Chrysomelidae</i>	79. <i>Chrysomelidae</i>	80. <i>Chrysomelidae</i>	81. <i>Chrysomelidae</i>	82. <i>Chrysomelidae</i>	83. <i>Chrysomelidae</i>	84. <i>Chrysomelidae</i>	85. <i>Chrysomelidae</i>	86. <i>Chrysomelidae</i>	87. <i>Chrysomelidae</i>	88. <i>Chrysomelidae</i>	89. <i>Chrysomelidae</i>	90. <i>Chrysomelidae</i>	91. <i>Chrysomelidae</i>	92. <i>Chrysomelidae</i>	93. <i>Chrysomelidae</i>	94. <i>Chrysomelidae</i>	95. <i>Chrysomelidae</i>	96. <i>Chrysomelidae</i>	97. <i>Chrysomelidae</i>	98. <i>Chrysomelidae</i>	99. <i>Chrysomelidae</i>	100. <i>Chrysomelidae</i>
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*) Walk-In Customer : Customer's Information strictly Confidential & Strictly NO refer of repaler.

Total Loss Case : to e-mail Insurer URGENTLY.

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

100-443887-1000

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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<p> <input type="checkbox"/> CC: Clerk / Court Clerical Information () </p>	<p> <input type="checkbox"/> CC: Clerk / Court Clerical Information () </p>	<p> <input type="checkbox"/> CC: Clerk / Court Clerical Information () </p>
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1) Hybrid Recurrent Photo Repair Cost > \$30000	()		
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11/11/11

Time	Actions	Observations	Comments
08:00	Arrived at the site, checked the weather and the equipment.	Clear sky, 25°C, 75% humidity.	Good weather for the day.
08:30	Started the first experiment, measuring the reaction time of the participants.	Participants were nervous, reaction times were high.	Need to calm down the participants before starting.
09:00	Completed the first experiment, recorded the data.	Reaction times were around 2.5 seconds.	Good data for the first experiment.
09:30	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were lower.	Break time is important for the experiment.
10:00	Started the second experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the second experiment.
10:30	Completed the second experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the second experiment.
11:00	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
11:30	Started the third experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the third experiment.
12:00	Completed the third experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the third experiment.
12:30	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
13:00	Started the fourth experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the fourth experiment.
13:30	Completed the fourth experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the fourth experiment.
14:00	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
14:30	Started the fifth experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the fifth experiment.
15:00	Completed the fifth experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the fifth experiment.
15:30	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
16:00	Started the sixth experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the sixth experiment.
16:30	Completed the sixth experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the sixth experiment.
17:00	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
17:30	Started the seventh experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the seventh experiment.
18:00	Completed the seventh experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the seventh experiment.
18:30	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
19:00	Started the eighth experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the eighth experiment.
19:30	Completed the eighth experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the eighth experiment.
20:00	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
20:30	Started the ninth experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the ninth experiment.
21:00	Completed the ninth experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the ninth experiment.
21:30	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
22:00	Started the tenth experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the tenth experiment.
22:30	Completed the tenth experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the tenth experiment.
23:00	Had a break, ate lunch and talked to the participants.	Participants were relaxed, reaction times were low.	Break time is important for the experiment.
23:30	Started the eleventh experiment, measuring the reaction time of the participants.	Participants were relaxed, reaction times were low.	Good data for the eleventh experiment.
00:00	Completed the eleventh experiment, recorded the data.	Reaction times were around 1.5 seconds.	Good data for the eleventh experiment.

Year	Actual (%)	Projected (%)
1950	10.5	10.5
1960	11.5	11.5
1970	12.5	12.5
1980	13.5	13.5
1990	14.0	14.0
2000	14.5	14.5
2010	-	16.5
2020	-	18.0
2030	-	19.0
2040	-	19.5
2050	-	19.5

10. The authors are grateful to the referees for their valuable comments and suggestions.

[illegible]

NA1808098	Invoice Preparation Checklist	Prep Bill	Adj Bill
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Insured's Particulars:	1) AR : Accident Reporting (\$50);		
	2) DA : Damage Assessment (\$100);	INC (\$50)	

3) TF : Towing Fee	\$40/\$45
4) TOW : Towing Charge	\$120

5) PT : Follow-Through Survey (Resurvey)	\$30
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For claiming against U.S. Only (not available)	
6) TR - Re-innovation	575

7) NI : Idau DA + SMRT Survey	\$160
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5) NLOC Additional Services:- 0000			
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*N5: Courtesy Car / Tpt Allowance	50
*N6: Benefits Coordination	510

* N7: Post Repair Inspection	525
* N8: Post Repair Coordination	33

TP (N11) : TP (N'in INC) against INC	\$20	
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9) N12: Idaho Mobile			
Number dated		Fee Charged	

Invoice dated	Fee Charged	
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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 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	04/12/2018 14:11
Date Of Accident	03/12/2018 11:40
Exact Location Of Accident	BALESTIER RD TWDS LAVENDER ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ4877R
Insured/Policyholder	
Name Of Registered Owner	CHUANG YI INTERIOR DESIGNING
Co Reg No	53167167D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-93588881

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	18-MC009565-R07
Cover Note Number	

Driver

Name of Driver	ZHENG ZEBAO
NRIC No	S2735800D
Date Of Birth	07/07/1966
Occupation	OUTDOOR
Date Of Driving Pass	10/10/1997
Driving Experience	21 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93588881
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 303 CANBERRA ROAD #14-39
Postcode	750303
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 - HEAD TO REAR
Weather Conditions	DRIZZLING
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?	NO
Was any injured conveyed to hospital by ambulance?	NO
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING ALONG BALESTIER RD TWDS LAVENDER ST. WHILE TRAVELLING STRAIGHT SUDDENLY A VEH INFRT MADE A E-BRAKE, I IMMEDIATELY MADE A E-BRAKE AS WELL. DUE TO THE WET SURFACE AND HEAVY LOAD, I COULDN'T STOP INTIME AND MAKE A SLIGHT HIT ONTO THE VEH INFRT.

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	SBU3822R
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)	

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 : MNA118156814 Vehicle Registration No: GZ4877R
Name(as shown in NRIC) : ZHENG ZEBAO NRIC/FIN/Passport No : SJ73580015
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 303 CANBERRA RD #14-39 Singapore(750303)
Contact (Tel) : _____ Mobile No.: 93588881
Email Address : _____
Date of Accident : 03/12/18 Time of Accident : 1140
Place of Accident : BALESTIER RD TWAS LAVENDER RD
Insurance Company: TOKIO MARINE

(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:

IT SHOULD POLICY NUMBER NOT COVER NOTE

Policyholder / Driver's Signature
Date:

sfym 04/12/18

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

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.

创艺专业室内傢俬装修工程
CHUANG YI INTERIOR DESIGNING

Policyholder's Signature
Date & Time:

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

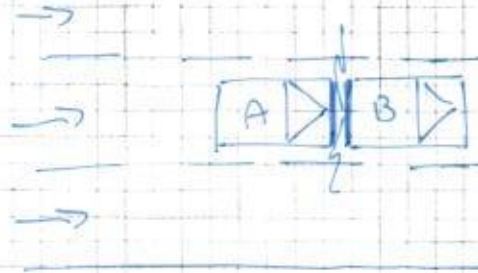
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

BALESTIER ROAD TOWARDS
LAVENDER STREET.

VEHICLE A - GZ 4877R

VEHICLE B - SBH 3822R



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG BALESTIER ROAD TOWARDS LAVENDER STREET.

WHILE TRAVELLING STRAIGHT SUDDENLY A VEHICLE IN FRONT MADE A EMERGENCY BRAKE, I IMMEDIATELY MADE A EMERGENCY BRAKE AS WELL, BUT DUE TO THE WET WEATHER AND HEAVY LOAD, I COULDN'T STOP IN TIME AND MAKE A SLIGHT HIT ONTO THE VEHICLE IN FRONT.

VEHICLE A - GZ 4877R

VEHICLE B - SBH 3822R

DECLARATION

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

HUANG YI INTERIOR DESIGNING

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.:

Vehicle No.	GE 4877 R	Model / Make	mitsubishi CANTER
Date of Accident	03/12/2018		
Time of Accident	1140	HRS	
Location of Accident	RALESTIER ROAD TOWARDS LAVENDER ROAD		
Exact purpose use during accident	WORKING HOUR		
Name of Owner	CHUANH SI INTERIOR DESIGNING		
Telephone No.	H/P: 9358 8881	Home :	Office :
NRIC	S3167167D		
Address	BLK 303 CANBERRA ROAD #14-39 S(750303)		
Claim type	OD THIRD PARTY REPORTING ONLY		
Insurance Company	TOKIO MARINE		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire /Theft
Policy No.	18-MC 009565-807		
Name of Driver	As Above If No, ZHENH ZHBAO		
NRIC	S2735800D	Any Passengers :	NIL
Date of birth	07/07 / 1966		
Occupation	Outdoor / Indoor		
Driving License Pass Date	10 OCT 1997		
Gender	Male / Female		
Contact No.	H/P: 9358 8881	Home :	Office :
Address	BLK 303 CANBERRA ROAD #14-39 S(750303)		
Driver have any own vehicle	No, If yes, Reg No.		
Relationship	Employee, If no, state		
Weather condition	Clear	Raining	Other DRIZZLING
Road Surface	Dry	Wet	Other
Any Injuries	No, If Yes, Who?		
Name And Contact No.			
Name And Contact No.			
Police Report	No, If Yes, Where?		
Vehicle B No.	SBU 3822 R	Any Passengers :	
Name of Driver		Contact No. :	
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	FRONT.		
Camera Recorder	Yes / No		
Email Address			
HAVE YOU BEEN APPROACH BY UNKNOWN PERSON SOLICITING / OFFERING ACCIDENT CLAIMS ASSISTANCE?			
			Yes / No
PARTICULAR WORKSHOP	TUNCAR AUTOMOTIVE PTE LTD		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	IAN		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	Sales@n51.com.sg		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2735800D



Name

ZHENG ZEBAO

郑泽宝

Race
CHINESE

Date of birth
07-07-1966

Sex
M

Country/Place of birth
CHINA



3580

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S2735800D

Name

ZHENG ZEBAO

Birth Date: 07 Jul 1966

Issue Date: 02 Oct 2012



002109124J

9330077



NRIC No. S2735800D



Nationality

CHINESE

Date of issue

08-05-2014

Address

APT BLK 303 CANBERRA ROAD
#14-39
SINGAPORE 750303

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 10 Oct 1997



Licence No. S2735800D

NP 428A

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No. 192300014M) (GST Reg No. M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



**TOKIO MARINE
INSURANCE GROUP**

FORM MZ300

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)**

Policy No.: 18-MC009565-R07 (Comm Vehicle Carry Own Goods)

1. **Index Mark and Registration Number of Vehicle** GZ4877R **Chassis No.:** FB70ABA00348
2. **Name of Policyholder** CHUANG YI INTERIOR DESIGNING
3. **Effective date of the Commencement of Insurance for the purposes of the Act** 18/05/2018
4. **Date of Expiry of Insurance** 17/05/2019
5. **Persons or Class of Persons entitled to drive***

Any person who is driving on the policyholder's order or with their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations 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 the Policyholders' 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 any one disabled mechanically propelled vehicle.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost/destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 1023DDA

Insurance Plan: Third Party, Fire & Theft
Limit for total loss or theft: Prevailing Market Value
Financial Interest: TAI THONG LEE TRADING PTE LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

