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OD (FP) Reporting Only	i-Motor W/O (Within: OD 2hr	rs, TP 4hrs)	
OD / IF Reporting Only	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
IF Insurer	Ass't Report by Fax / Hand	to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: ((Tel: Fax	c:)
TP Particulars: Veh No: JL	2877 INC ()/Non-INC()	81
Owner / Driver: (Tcl:)
Policy No: (Period: ()	Cover Type: ()
Confirmed by : (Date:	Time:	
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number

Contact Number EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

5. Any false reporting may be referred to the Police for investigation.

- 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.

A STATE OF THE STA	ACCIDENT STATEMENT
Date Of Report	12/12/2018 15:06
Date Of Accident	11/12/2018 11:10
Exact Location Of Accident	BLK 27 BENDEMEER RD OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE
D. D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLA5935Y
Insured/Policyholder	
Name Of Registered Owner	LYE PUAY ENG
NRIC No	S0077123F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98480560
Alternative Phone No	OFFICE-98480560
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS CLASSIC 1.6 CVT
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1716361801
Cover Note Number	
Driver	
Name of Driver	TAN KOON (CHEN JUN)
NRIC No	S7402333I
Date Of Birth	11/01/1974
Occupation	INDOOR
Date Of Driving Pass	03/01/1996
Driving Experience	22 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98480560

OFFICE-98480560

NOEMAIL

BLK 110B PUNGGOL FIELD Address

#09-578

Postcode 822110

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

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

NO

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles involved in the accident 2 Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. Number of Passengers (Including Driver) 0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name PUNGGOL N.P.C

ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY: Police Station Address

SINGAPORE

NO

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20181211/2163.

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 SLZ8727E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
 interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (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.

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Person Name:

Name: NRIC/FIN N

NRIC/FIN No.:

el's Signature

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DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per	Police	Report	T/20181211/2163	
				<u></u>

DECLARATION

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

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

Name: NRIC/FIN No.:

	BASIC IN	FORMATION					
Date of Accident:	11/12/2018	Time of Accident:	11:10				
Exact Location:	Blk 27 Bendemeer F	Blk 27 Bendemeer Road					
	The state of the s	OWN VEHICLE					
Vehicle Registration No.	SLA 5935 Y						
Name of Registered Owner:	Lye Puay Eng						
NRIC / FIN / Passport no:	200	77 123 8					
Vehicle Make:	Toyota	Vehicle Model:	Altis				
Type of Claim:	Third Party						
Vehicle Category:	Private						
Name of Insurance Co:	China Taiping						
Type of Policy:	Comprehensive						
Policy Number:	DMPCSN 17-16	361801					
	DR	RIVER					
Name of Driver:	Tan Koon		same as owne				
NRIC / FIN / Passport no:	S7402333I	Date of Birth:	11/01/1974				
Occupation:	Indoor	Driving Pass Date:	03/01/1996				
Contact Number:	9848 0560	Gender:	Female				
Address:	Blk 110B Punggol Fi	eld #09-578 S(822110)					
		CIG NOO OLO CIOLLILO					
Relationship with Owner:	Child	010 010 0(022110)					
Relationship with Owner:		old #66 616 6(6221 <u>16)</u>					
Relationship with Owner:	Child GENERAL INFORMAT	TION OF THE ACCIDENT:					
	Child GENERAL INFORMAT	TION OF THE ACCIDENT:					
Type of Collision:	Child GENERAL INFORMAT		t perked vehicle)				
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Signature of Driver

Date and time





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

1 of 3 Report No. T/20181211/2163

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/12/2018 23:10			Vide Report No.:	Station Diary No.: 86		
Informar	t's Partic	ulars				
Name of TAN KOO	Informant: DN		Address: APT BLK 110B PUNGGOL FIELD #09-578 SINGAPORE 822110			
ID Type / ID No.: NRIC NO / S7402333I			Contact No.: Home/Office:	Mobile: 98480560		
Nationalit SINGAPO	y: ORE CITIZ	EN	Email:			
Sex: Age: Date of Birth: Female 44 11/01/1974			Type of Informant: Driver			
Race: Chinese Occupation: HAWKER			Language: Institution / School Nati English			
			Driving Licence Information: Class: 3 Date of Expiry:			

General Infor	mation of the Accide	nt		
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 11/12/2018 11:10	Type of Location: Car Park
Location: Along Road 1 BENDEMEER Blk 27 open s	ROAD			
		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage		Traffic Control: Not Controlled		raffic Volume:
Type of Collis Moving Vehic	ion: le Against - Parked Ve	ehicle	а	Anyone conveyed by imbulance:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SLA5935Y	Car					0
SLZ8727E	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Punggol N.P.C

21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

Report No. T/20181211/2163

2 of 3

CONTINUATION OF REPORT

Driver		E SPECIAL SECTION		TOTAL SECTION		
Name	TAN KOON	TAN KOON).	S7402333I
Related Vehicle	SLA5935Y (Car)			Conta	ct No.	98480560
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	The state of the s		
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	
Name	Unknown			ID No		NIL
Related Vehicle	SLZ8727E (Car)			Contact No.		NIL
Hospital/Clinic	NIL		Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc		NIL	
No. of Days grant	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

On 11/12/2018 at about 1000hrs, I parked my family vehicle (SLA5935Y Toyota Corolla Altis) at a open car park lot located at Blk 27 Bendemeer Road. After which I left for my work at the nearby hawker centre. At about 1107hrs, I returned to my vehicle and discovered that there is a piece of paper placed on my vehicle windscreen with the following content " I saw SLZ8727E hit you car @1054am. Call me at 97570445" I then checked my vehicle and discovered that there long and deep scratch marks on my front bumper. I called the number given and the witness gave me his name as Tan Shiwei, Eugene and he informed me that he witnessed the hit and run on my vehicle. I then called for police vide A/20181211/0091 and TP attended to the case and I am advised to lodge a Traffic accident report for hit and run, the in-charge case is Rashidah from TP. That's All.





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 3 of 3 Report No. T/20181211/2163

CONTINUATION OF REPORT

Sketch Plan

Authentication Stamp

NP168

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: F / Sr Staff Sgt CHAN LEE WAH	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/12/2018 23:10
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:

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.



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S0077123F



Name



LYE PUAY ENG

賴培英

CHINESE Outs of Birth Sex 26-08-1950 F

Country of Birth
SINGAPORE



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

PASS DATE

lass 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 30 Nov 1977 of the driver; and other motor vehicles =< 2500kg

Licence No: S0077123F

NRC No. S0077123F

Blood Group Date of issue

A+ 24-02-1994

APT BLK 121 POTONG PASIR AVENUE 1 #15+285 SINGAPORE 1335

NP 428A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$74023331





TAN KOON (CHEN JUN)

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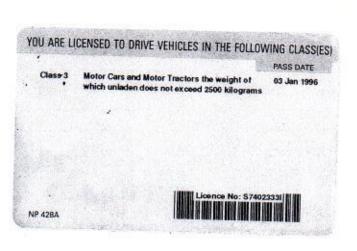
CHINESE

11-01-1974 Country of Birth SINGAPORE











中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINCIAPORE) PTE LTD

Co. Reg. No. 200208184E

MXIII R SN AMOO44A Cov.Type: C

MOTOR PRIVATE CAR

CERTIFICATE OF INSURANCE

Motor Vehicles (That Party Risks and Compensation) Act (Chapter 189 Motor Vehicles (Third-Party Risks and Compensation) Fules, 1960 Point Transport Act, 1987 (Malaysia)

ORIGINAL

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CEN	RTIFICATE No.	DMPC5N1716361801	Engine No :12RX534318 Chaho:MR053REH104540081
	Index Mark and Regalitative Number of Vehicle	SLA5935V	
2.	Name of Policy Holiser	LYE PUAY ENG	
3	Effective date of the Communicament of Insurance for the purposes of the Regulator Ordinance or Enactment	08 March 2018	Named Drivers Ex Sect. I
4	Date of Expiry of Insurance	07 March 2019	Ex Sect. I - Age >= 26
5 (Persons or Classes of Persons sintied to de	Tyre*	
	(a) The Policyholder.		

(b) Any other person who is driving on the Policyholder's order or with his 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. Limitations as to use:*

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-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.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft)

will be doubled.

One time Waiver of Excess for the first \$\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : HONG LEONG FINANCE LTD AS HP OWNER

*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 (Maleysia), are not to be included under these headings.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

		TAN NGEE LING EILEEN
ssued	Ву:	Authorised Officer