NATIONAL Assessment Centr	e Services	(he² 1 23/05)			
Date In 36/12/18	Jeb description			ed Done by	
REINO NA/OAZ18023060/	3 SAS e-filing	SAS e-filing			
Veh No SQX 7519R		n, Shrs, AIC 2hrs)			
DOA 25/12/18 1120	i-Motor Cla	um Form			
OD (TF) Reporting Only	i-Motor W/	O (Within: OD 2hrs	s. TP 4hrs)	* . * * * · · · · · · · · · · · · · · ·	
Traporting Only	i-Photo Upl			796 444 60	
TP Insurer	Assessment/S	Survey Report			
	Ass't Report	by Fax / Hand t	o Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (VISION A	TOWORK	Tel: Fax		
	SKU6572K	INC ()/Non-INC()		
Owner / Driver: (Tel:)	
	riod: ()	Cover Type: ()	
Confirmed by : (Date:	Time:)	
			0%; P: 21-79%. F: 80-100)%]	
The second secon	Warranty: YES ()/NO()		
Excess: (\$) Loading: \$1,0	00 ()/\$2,000	0()			
Drive-In () / Towed-In (); Invoice			owing Co. ()
		.,,,,,	wing co. (-	
Remarks:- (INC horline: 6788 6616)	77		Date&Time Completed	Done	by
	Courtesy Car ()			
2) QC Check / Post Repair Inspection	()			
3) Upload Resurvey Photo [Repair Cost > \$3	000] ()			
Injury: ——————					7
Date/Time Actions					
			STANSORD CONTRACTOR OF FORCE		
			,		70 10
				111111111111111111111111111111111111111	
NA1808430		Invoice Prep	aration Checklist	Amt (S)	Amt (S
laimant's Particulars :-		1) AR : Accident Reporting (\$30); 2) DA : Damage Assessment (\$100); INC (\$80)			Aut Di
ver/Owner:		2) DA : Damage A 3) TF : Towing Fe	5		
		3) TF : Towing Fee \$40/\$45 4) FT : Follow-Through Survey \$120 5) FT : Follow-Through Survey (Resurvey) \$30			
ontact No:	For claiming a ged Portion: 6) TR: Re-inspe		ainst JNC Only (wef 10 Jan 2005)		******
amaged Portion:			6) TR : Re-inspection \$75 7) N1 : Idac DA + SMRT Survey \$160		
	3	8) NTUC Addition			
C Checked by (Engr-In-Charge):	X 30 33 34 30 30 30 30 30 30 30 30 30 30 30 30 30	• N5; Courtesy Car / Tpt Allowance \$			
utitonal Communication		*N6: Repair Co *N7: Post Repair			
uditors' Comments :-		*N8: DV / Collect Excess Coordination \$5			
		TP (N11): TP (9) N12: Idac Mobi	Non INC) against INC \$20 le 30		1
1.2/3:	W - 5 15 1/4 = 1 15 1/4 2 15	Invoice dated	Fee Charged		新物质

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or 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.

Ar	Š	ב	TC	ТΛТ		-	
	J	UEI	NT S	IAI	=141	EΝ	ш

 Date Of Report
 26/12/2018 10:26

 Date Of Accident
 25/12/2018 11:20

Exact Location Of Accident X-JUNC OF PASIR RIS DR 4 & PASIR RIS DR 3

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGX7519R

Insured/Policyholder

Name Of Registered Owner TAN, BRYAN YI HUI

NRIC No \$9326420G

Email Address BRYAN_SEBEST@LIVE.COM

 Mobile Phone No
 (LOCAL) +65-93879839

 Alternative Phone No
 OTHERS-93879839

Vehicle Particulars

Manufacturer HONDA

Model CIVIC

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 PRIVATE CAR

Insurance Company

Name of Insurance Company

DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD

Type Of Coverage

Vehicle Category

COMPREHENSIVE

Fleet Policy

NO

Policy Number

MT/00573141

Cover Note Number

Driver

Name of Driver TAN, BRYAN YI HUI

 NRIC No
 \$9326420G

 Date Of Birth
 27/07/1993

 Occupation
 OUTDOOR

 Date Of Driving Pass
 10/04/2014

Driving Experience 4 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93879839

Fax Number

OTHERS-93879839

Contact Number

BRYAN_SEBEST@LIVE.COM

EMail Address

BLK 487 PASIR RIS DR 4 Address

#09-509

510487

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE

Weather Conditions CLEAR Road Surface DRY

Other Information

Postcode

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

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. 1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

2

NO

NO

NO

NO

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH WORKSHOP

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKU6572K

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 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.
- (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

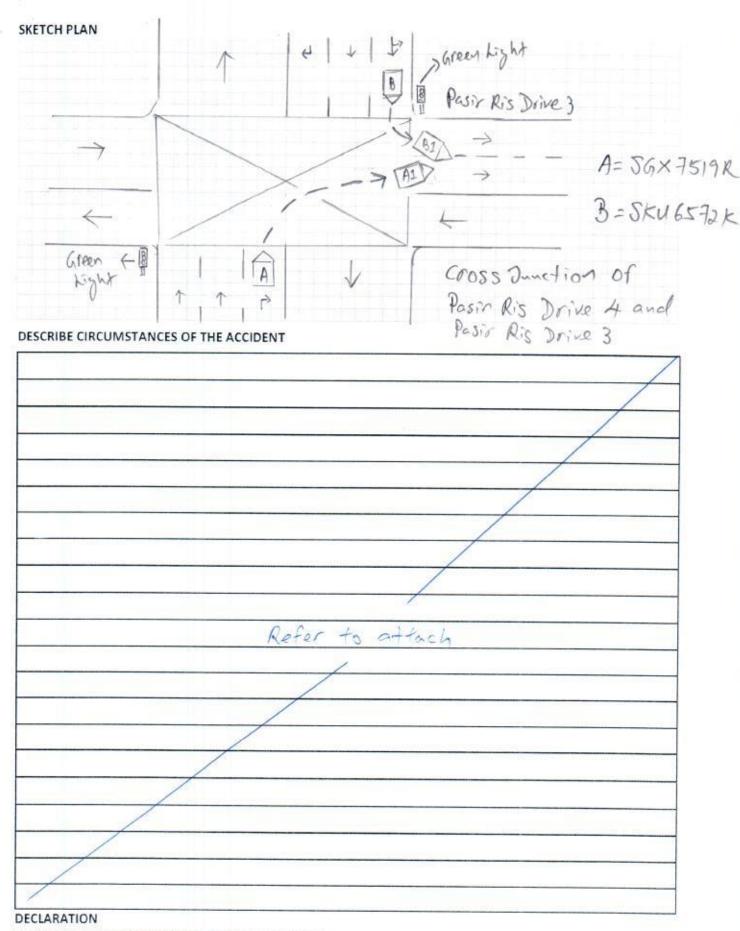
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



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:

Ayu 20/12/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

On 25.12.18 at about 11:20 hours at Cross Junction of Pasir Ris Drive 4 and Pasir Ris Drive 3. I was along Pasir Ris Drive 4 turning right into Pasir Ris Drive 3 and the traffic light was green. I was waiting for the pedestrians to cross over to the side of the condo, before turning into lane 1 of the road. Vehicle (B) was also waiting for the pedestrians to clear his side and when I was completely into the lane 1, suddenly vehicle (B) from opposite direction turned left with such a wide angle and instead of moving into lane 2, it cut into my lane (lane 1), hence collided to my front left hand side portion of my vehicle (A).

Vehicle (A): SGX 7519R

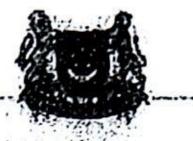
Vehicle (B): SKU 6572K

Ty

SINGAPORE ACCIDENT STATEMENT

Accident Date: 25/12/2018 Time: 11-20 (hh:mm) 24 hr format
Location (WSS Junction of Pasir RIS Drive 4 and Pasir Ris
Drive 3
Vehicle Number SGX 7519A
Insured Name Tan Yi Hui, Bryan
NRIC/FIN 593264204. Contact Number 93879839.
Make Honda Model Civic
Are you claiming under your own insurance policy for repair to your vehicle?
() Yes If No,Pls select: (V) Third Party () Reporting
Insurance Company Direct Asia.
Type of Policy (/) Comphensive () Third Party Fire & Theft () TP Only
Policy Number MT / 00673141.
Name of Driver (V)Same as Insured
NRIC / FIN Contact Number
Date of Birth 27/07/1993
Driving Pass Date 10/04/2014.
Occupation () Indoor (V) Outdoor
Gender () Male () Female
Email Address bran_ Schest@ live. com ()NO EMAIL
Address of Driver Buk 487 Pasir Ris Drive 4
#09-509 Singapore 510487.
Was driver an employee of the Insured's Company? () Yes () No
If No, Relationship of the Driver with the Insured
(V) Owner () Spouse () Friend () Relative () Children () Sibling
Does the Driver Own Any Other Vehicle? () Yes () No
If Yes, Vehicle Registration Number of Driver's Own Vehicle
Insurance Company of Driver's Own Vehicle
Weather Conditions () Clear () Raining () Others
Road Surface (V) Dry () Wet () Others
Was any foreign vehicle involved in this accident? () Yes (✓) No
Was anybody injured in the accident? () Yes (✓) No
If yes, injured detail
Was there any video captured by Car Camera? () Yes () No
Was the Accident reported to the Police? () Yes () No If yes attach police report
DETAILS OF 3 rd party Name / Nric Contact
Veh B SKU 6572K.
Veh C
Veh D
Veh E
Veh F

REPUBLIC OF SINGAPORE





. Hame

TAN YI HUI, BRYAN

陈毅考

CHINEBE Dig ocupus 27-07-1993

SING APORE



A251214



MIX No. 59326420G



31-07-2008

Lebers

APT BLK 487 PASIR RIS DRIVE 4 #09-500 SHIGAPORE 510487



SGX 7519 R Own & driver

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

EFFECTIVE DATE

Motor Cars=< 3000kg with =<7 passengers, exclusive 10 Apr 2014 of the driver; and other motor vehicles =< 2500kg

NP 428A





Contact us at

Hotline: (65) 6532 2888 E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated,

Certificate No.

: MT/00573141

Type of Coverage / Driver Plan

Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No.

Sgx 7519 r

Chassis No.

.

2) Name of Policy Holder

: Tan, Bryan Yi Hui

3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act

: 15/12/2018 00:00

4) Date/Time of Expiry of Insurance

: 14/12/2019 23:59

- 5) Persons or Classes of Persons Entitled to Drive
 - (a) Any named person under the policy who is driving on the Policyholder's permission.
 - (b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use*

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business,

"Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured

Market Value

Own Damage Excess

S\$ 800.00 (before any applicable GST)

Windscreen Excess

S\$ 100.00 (before any applicable GST)

Choice of workshop

DirectAsia approved workshops

Finance company / Hire Purchase

Main driver

Tan, Bryan Yi Hui

Named driver

None

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

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 Com pensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on:

14/12/2018

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer ompany Registration 2008z25110