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| P Particulars: Veh No: GB | 5236 M | . INC(| | (). | | | |
| Owner / Driver: (| | M | Tel: | •• | | | - |
| | iod: (|) | Cover Type: (| | | | |
| | • | Date: | Time | | 00047 | | |
| Insured/Driver Liability: (%) [1 | Note-Est. Status (WC |); N; 0-2 | 0%; P: 21-79% | . P; 50-1 | 0074 | | |
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SINGAPORE ACCIDENT STATEMENT

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.
- 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.

- 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.

| By the lodgement of this report to the insurers, you hereby constant aforesaid. | ent to the archiving of this report at the centre and to copies of the report being made svallable |
|--|--|
| A SECOND PORT OF THE PARTY OF T | ACCIDENT STATEMENT |
| Date Of Report | 30/01/2019 11:09 |
| Date Of Accident | 29/01/2019 16:40 |
| Exact Location Of Accident | ALONG VANDA ROAD |
| Country/State of Loss | SINGAPORE |
| 型。 自然是其中的社会是不是一种的一种。 D | ETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SJE6717G |
| Insured/Policyholder | |
| Name Of Registered Owner | JEANNE ENG CHER FONG |
| NRIC No | S7170039I |
| Email Address | JEANNEHSI@HOTMAIL.COM |
| Mobile Phone No | (LOCAL) +65-81387931 |
| Alternative Phone No | OTHERS-81387931 |
| Vehicle Particulars | |
| Manufacturer | HONDA |
| Model | FIT |
| 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 | REPORTING ONLY |
| Vehicle Category | PRIVATE CAR |
| Insurance Company | |
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5104656916 |
| Cover Note Number | |
| Driver | |
| Name of Driver | JEANNE ENG CHER FONG |
| NRIC No | \$71700391 |
| Date Of Birth | 20/09/1971 |
| Occupation | INDOOR |
| | |

27/07/2007 Date Of Driving Pass

11 YEARS AND 6 MONTHS **Driving Experience**

MALE Gender

(LOCAL) +65-81387931 Mobile Number

Fax Number

Contact Number OTHERS-81387931

JEANNEHSI@HOTMAIL.COM EMail Address

Address

23 LOTUS AVENUE

Postcode

277606

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

Vehicle

-

Insurance Company of Driver's Own Vehicle

*

General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?

124.50

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

Details of 1 office rection

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

PLEASE REFER TO SKETCH PLAN

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

GBH5236M

Vehicle Make/Model/Colour

NISSAN NV350

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

LIM CHOONG BENG (LIN JUNMING)

NRIC/Passport Number

S7107595H

Contact Number

85907377

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

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 t
 - (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
- 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.
- 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)

OW Date & Time:

Reporting Centre

SKETCH PLAN DOOR CORIVERS Vanda ____ Vanda Drive By

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

| I WAS | TR | AVELLIN | 16 | STRAIG | HT | DOWN | ALON | 9 | VAr | DA P | LUAD |
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| DOOR | AND |) put | CROR. | | | | | | | | |
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DECLARATION

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

Policyholder's Signature

Driver's Signature

/19, 11-25am (If driver is not the policyholder)
Date & Time:

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

Claim Handling Accident HT/L030128 entire two. SYDERSOLD Vehicle No. 63967170 GST Registration No. Certificate No Pulicyholder Name JEANNÉ ENGIOHEA FONG Palayholder MICC 571700391 Cover Type: Leading: Product Code PRIVATE CAR INSURANCE three CLASSIC 0 Contact No.(Mobile) 81387993 Contact No./Office) Contact No.(Home) Email Address Special Remark eCode 10.1 eCode Reason TCA - No Yes KFR Private Hire Ng Nath Descurtion No NOT Protected N.T. × * Accident Details Accident Type Acodent Report Wittin 34 fire Report Date 30/01/2019 11:24 Country of Accident Time of Academit Milmin Singapore Date of Accident 25/01/2019 16:40 Reporting Centre Orange Force ECH No. ALONG VANDA KOAD Accident Location - focuse 600.00 Aggregat Except Windscreen Excess 100.00 Outside Singapore CO Excess N00.00 Umamed Driver Excess Outside Gingapore TP Excess Third Party Excess. 0.00 0.00 T Benefits → GST Registered Information GSY Registration Date GST Registration No. **GET Status Verified** Title **Hudfication History** Policyholder Meiling Address Address 3 \$15GMORE 27760E Address 2 LUCKY PARK Somett 1 33 LBTUS AVENUE Address & Address Type Singapore address Pest Cale 277506 Unit No. Related Folicy Number 5109658916 T Of Driver Info JEANNE ENGICHER FONG Orlver Type Driver Name Bod wend 20/09/1971 Driver HRIC 571700395 Unnamed priver Name Driving Experience Register Date of Driver License 93/62/2007 Driver Age 11 #1307931 Contact No Dittorne) Contact No (Mobile) Contact No.(Office). Address 7 LUCKY PARK Address 1 53NGAPORE 277606 21 LOTUS AVENUE Address # Post Code 277606 linit No. Dices he own a Singapore Registered car? Driver Insurer Company Yes a No Driver Vehicle No. SIEA717G WHILE Declaration Brawthadyser or Blood Test Reading? Any injury? Claim 001 00-MX Nsw DD-MX * Imured SEANNE ENG CHEA FONG Interest NRIC S7179019E Claim Type * 96614238 Contact No.(Motive) Email Address GBRG176M Claim Description 83667170 / GBH5236H CN 29 Jan 2019 insured Linking | Not at Fault | Registre | Preferred Workship Workshop Receive No. Yes Finalization Preferred Workshop, Name unkno Sate 30/01/2019 11:35 30/01/2019 11:27 Date Registered Total Loss but HOSLI WAHAR Report Taken By of front AK letter Save Submit Attachment Claim No. Accident No. HT/1030128 20/01/2019 12:31 Last Doc. Received # Yes O No Upload Date tingency * Desiriation Dategory T ND * Normal Choose File No file chosen Char Please Select . Chaose File No file chosen * 100 . • Northal Chiar Please Select Choose File No file chosen Clear Please Select * NO Normal * Normal * NG ٠ Chaose File No file chosen Ciner Please Select . * ND * Normal Chaose File: No file chosen Char Please Select * NO Chause File No file chasen Clear Please Select Printage Read Send Hessage T Attachment List ? Heg Swet? Description Attachment Upleased By/Date Catagory Urgency 776 NAC_MINIT_MERAH_BOSG76(NATIONAL ASSESSMENT CENTRE SERVICE B (BUXIT MERAH)): on 30 3er 3019 12:31 NRLC/ Driving License 2019-1-30 NATC/ Driving License NAC_BURGT_MERAH_BIDDOPS(NATIONAL ASSESSMENT CENTRE SERVICE | 6 (BURGT MERAH)) on 20 Jan 2019 12:31 NASC/ Driving License Normal NRIC/ Driving Desnie 2019-1-30 NRTC/ Driving License 2019-1-30 SAC_MUNIT_MERAH_HODG?N; NATIONAL ASSESSMENT CENTRE SERVICE S (BUNIT MERAH)) on 30 Jan JOLY 12-31 NRIC/ Driving License Normal

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| F Video List | | | | | | |
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| | NAC_BUNIT_MERAH_BUIGTA(NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 30 Jan 2019 11:35 | | Protos | Normal | Position 2019-1-30 | |
| | NAC_BURIT_MERAH_BOORTH; NATIONAL ASSESSMENT CENTRE SHRVICE 5 (BURIT MERAH)) on 30 Jan 2019 11:35 | | Photos | Normat | Philips 2019-1-35 | |
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| 19 | | ONAL ASSESSMENT CENTRE SERVICE on 10 Jan 2019 12:31 | SAS | Normal | SAS 3011 | 1-1-30 |
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ACCIDENT STATEMENT

| ACCIDENT DATE: 1 1 (DD/MM | ////), TIME:(16. 40)(HH:MM |
|--|--|
| LOCATION: VANDA RD | 3 S |
| 1. DETAILS OF VEHICLE | 4.5 |
| a) VEHICLE NUMBER: SJE 6 | 1176 |
| DINSURANCE COMPANY: NOUC | |
| CIPOLICY NUMBER: 610465651 | 16 |
| | |
| 6) MAKE & MODEL: THEN FLT | D PARTY / THIRD PARTY FIRE &THEFT) |
| | CORVINCE CONTRACTOR |
| f)TYPE:(SALOON / COUPE / MPV /VAN / L .g)VEHICLE CATEGORY:(PRIVATE / COMM | AEBOIN (MOTORCYCLE / OTHERS) |
| h)PURPOSE OF USING AT ACCIDENT TIME | Revala will |
| IJARE YOU CLAIMING UNDER YOUR OWN | INISIDANCE NEEDIG |
| IF NO, PLEASE STATE (THIRD PARTY CLAIN | A / PEPOPTING ONLY |
| 2. INSURED / POLICY HOLDER | A / KEP.OKTING ONLY) |
| A)NAME: | (MALE / FEMALE) |
| b) NRIC/FIN/PASSPORT: | CONTACT: |
| c)ADDRESS: | |
| | |
| * CONTINUE TO 3.d IF DRIVER ALSO POLICE | YHOLDER |
| THO of passange, DRIVER | |
| [Including distant] | R FONG (MALE / FEMALE) |
| C \) DINRIC/FIN/PASSPORT: 5/1/00391 | CONTACT: 8138793 |
| CIADDRESS: 23 LOTUS AVE 5(2 | 77606) |
| *d)DATE OF BIRTH: (/ | A CONTROL OF THE CONT |
| PIOCCUPATION (VIDEOSS VILLED CO.) | DD/MM/YYYY) |
| ODATE OF DRIVING PASC | |
| 4. WAS DRIVER AN EMPLOYEE OF THE INS | SUPERIO COMPANDO OFFICIÓN |
| IF NO, RELATIONSHIP OF THE DRIVER | WITH INCLIDED |
| 5. DIWEATHER CONDITION: (CLEAR / RAINING | G / OTHERS |
| DIROAD SURFACE: (DRY) WET / OTHERS | -, -, -, -, -, -, -, -, -, -, -, -, -, - |
| 6. WAS ANYBODY INJURED (YES / NO) | |
| 7. a) REPORTED TO POLICE (YES / NO) | |
| IF YES, PLEASE STATE WHICH POLICE STATE | ION: |
| 8 THIRD PARTY VEHICLE | V |
| No of passenger a) VEHICLE NUMBER: 68H 5236 | M_MODEL: |
| Including driver) b) DRIVER'S NAME: LIM CHOONG FENG/LI | The state of the s |
| () NRIC/FIN/PASSPORT: STIOTS95H | CONTACT: 8590 7377 |
| | 979/2012/000000000000000000000000000000000 |
| -1 Dougenie | MODEL: |
| Including driver) f) NRIC/FIN/PASSPORT: | 9. 10. |
| J INNS/FIN/FASSFORT | CONTACT |
| | CONTACT: |

email = VIDEO

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$71700391





Name

JEANNE ENG CHER FONG

Race

CHINESE

Date of birth

Sex

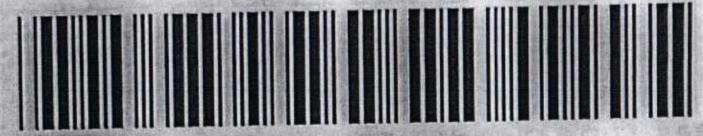
20-09-1971

F

Country of birth

MALAYSIA





NRIC No. S71700391

Date of issue 31-07-2006

23 LOTUS AVE SINGAPORE 277606 NRIC No: S7170039 I Date: 04/07/2016



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

Class 28 Motorcycles == 200 ec
Class 3 Motor bars with unladen weight == 3000kg with == 7 27 Jul 2007
passangers, exclusive of driver; and other motor
vehicles with unladen weight == 2500kg EFFECTIVE DATE

NP 426A



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