A CTION OF				345-1		STUDENT
		e Services (me)			- FX	h.
Date In: 07/02/	THE RESIDENCE OF THE PROPERTY OF THE PARTY O	Job description	i Da	te & Time Completed	Done	υy
Ref No NA/CTI		SAS e-filing	11		()	
Veh No 51249	58€	E-mail (within 8hrs, Ale	C 2hrs)			
DOA 06/03/	9 1235	i-Motor Claim For	m			
OD (P) Reporting Only		i-Motor W/O (Within	n: OD 2hrs, TP 4	lurs)		
		i-Photo Uploaded				
TP Insurer		Assessment/Survey R	eport			
		Ass't Report by Fax	Hand to Ow	ner/Wksp		
Preferred Wksp / INC As	ssign Wksp / QW: (MOTORSPORTS	Te	I: Fax	:	
TP Particulars:	Veh No:	GBF2050L	INC()	/ Non-INC ()		
Owner / Driver: (Т	el:)	
Policy No: () Pe	riod: () Co	ver Type: ()	
Confirmed by	- N	Date		Time:)	
Insured/Driver Liabil		Note-Est. Status (WO):		P: 21-79% F: 80-100)%]	
Year of Registration:		Warranty: YES ()/N	10()			
Excess: (\$) Loading: \$1,0	000 ()/\$2,000 ()				
1) Apply for Transport 2) QC Check / Post Rep 3) Upload Resurvey Ph Injury: Date/Time Actions	pair Inspection	Courtesy Car ()	***************************************			
	1901039	Invo	ice Prepara	tion Checklist	Amt (\$)	Amt (\$)
A STATE OF THE PARTY OF THE PAR	See Ton Concession of the Real Concession		: Accident Repor	ting (\$30);	Ist Bill	Add Dil
Claimant's Particulars		F # 25 30 10 12 14 10 10 10 1 10 10 10 10 10 10 10 10 10 1	Damage Assess Towing Fee	ment (\$100); INC (\$80) \$40/\$	45	
river/Owner:	4) FT :	Follow-Through	Survey \$17			
Contact No:		Fore	claiming against	INC Only (wef 10 Jan 2005)		
amaged Portion:		7) N1 :	Re-inspection Idae DA + SMF	T Survey \$10	50	
C Checked by (Engr-	In-Charge):	OD:	JC Additional Se Courtesy Car / Repair Co-ordi	Tpt Allowance	\$5 10	
uditors' Comments :-	•N7	*N7: Post Repair Inspection \$25 *N8: DV / Collect Excess Coordination \$5				
at. 1;		TP	N11) : TP (N::n	INC) against INC S	20	-
at. 2/3;		9) N12 Invoice	: Idac Mobile s dated	Fee Charged	30	11 30 J
AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	Invoice	Invoice dated Fee Charged				

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

ACCIDENT STATEMENT

	Addition of Artement	
Date Of Report	07/02/2019 19:07	
Date Of Accident	06/02/2019 12:35	
French Location Of Applicant	OTE (AVE) DA DO ADDELL DO EVIT	

Exact Location Of Accident CTE(AYE)B4 BRADDELL RD EXIT

SINGAPORE Country/State of Loss

TAILS OF	OWN VEHICL	E
ı	AILS OF	AILS OF OWN VEHICL

Vehicle Registration Number SJZ4958E

Insured/Policyholder

Name Of Registered Owner MR CHIN TOW HING

NRIC No S0080211E NOEMAIL Email Address

Mobile Phone No (LOCAL) +65-97504958 Alternative Phone No OTHERS-96172356

Vehicle Particulars

Manufacturer **BMW**

Model

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?

THIRD PARTY If No, Please state action to be taken Vehicle Category PRIVATE CAR

Insurance Company

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. Name of Insurance Company

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMPCSN3034651806

Cover Note Number

Driver

Name of Driver CHIN RONG KAI, SIMON

NRIC No S9125755F 17/07/1991 Date Of Birth Occupation OUTDOOR Date Of Driving Pass 03/06/2011

7 YEARS AND 8 MONTHS **Driving Experience**

MALE Gender

(LOCAL) +65-96172356 Mobile Number

Fax Number

Contact Number

EMail Address SIMONCHIN.ME@GMAIL.COM Address 1 TANAH MERAH KECHIL ROAD

#09-06 466663

Postcode 4666

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 CHAIN COLLISION

Weather Conditions CLEAR
Road Surface DRY

Other Information

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?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

4

NO

YES

NO

2

: HANNA YUET MEI CHANDAR

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBF2050L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SDW3369Z

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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SLN8672S

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.
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- 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
- 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:

Name:

NRIC/FIN No .:

07/02/19

On the	stated time, location and date, I was travelling
on the	third most extreme left lone. The vehicle in front of
my val	hide stopped and I follow suit. Suddenly, I felt
x big	impact from the room and the impact caused my
Jehicle	move forward and collided on the front which.
d com	ne out and find out that it was a chain
collision	n involving of four whicks.

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.:

	Date of Accident	6 2 20 19 Accident Time: 12 35 (24-HR-Format)			
	Accident Place	CTE CAYED Before Braddell Rd Exit			
	Vehicle, No. (Car Plate No.)	ST249588 Make/Model: BNW 3.18			
	Insurace Company	Policy No:			
	Owner or Company Name /IC No.	: Chin Tow Hing (S 0080211E)			
	Owner or Company Contact No.	Owner's Hp 9750 4958 Company Tel			
	DRIVER 'S Name / IC No.	: Chin Rong Kai, Simon			
	DRIVER'S Date Of Birth	: 17 07 1991 DRIVER'S License Pass Date 03/06/2011			
	Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others:			
	DRIVER'S Address	: 1 Tanah Merah Kechil Rd #09-06 (46666			
	DRIVER'S Contact No./ Alt No.	:1) 96172356 2)			
	DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)			
	Email Address	: Simonchin me @gmail-com			
	Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET			
	Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance			
	Number of Passengers (Including D	river): 62			
	Was there any video Captured by ca Exact purpose for which vehicle was Any Injury (If YES, Pls state):	ar camera; YES \ 100 s being used at the time of accident: Private use \ Work purpose			
	Other P	Party Driver's Particular (if any)			
B	Vehicle. No: GBF 2050L				
	Vehicle Make\Model:	Vehicle Make\Model:			
	Name Driver:	Name Driver:			
	IC No. Driver/Contact:	IC No. Driver/Contact:			
	* NEW - Passenger's name &	gender: D Vehicle No: SLN 86725			
	Hanna Yuf Mei	Chandar.			
	(Foundle)	7			
		waiting for			
		CI			





17-07-2006

1 TANAH MERAH KECHIL ROAD #09-06 SINGAPORE 466663

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

EFFECTIVE DATE

NP 428A

Licence No: S9125755F

REPUBLIC OF SINGAPORE IDENTITY CARD NO. SOOBO211E





Name

CHIN TOW HING







Date of birth 13-01-1951

Country of birth SINGAPORE







NUTTO No. S0080211E

10-10-2007

1 TANAH MERAH KECHIL ROAD #09-06

SINGAPORE 466663 NRIC No: \$0080211E

Date: 25/09/2010

No: 6593902

I. Chin Tow Hing (S00802117)

authorise my son chin Rong Kai Simon

authorise my son chin Rong Kai Simon

(S91217XYF) to Sign for the

accident report on my behalf due

to being Overseas

Chin Tow Hing

OBSO211/E

OBSO211/E

Car Oner

SJZ 4988 E

SJZ 4988 E



CERTIFICATE OF INSURANCE

PLM 316902

DRIGHAL

1456 MM

New Years and Temperature

100PC63034551905

DM PCSN

gine my | Nicelsonnessing Change WARRY 72050A7 83925

Name of Policy Holder

MR CHIN TOW HING

utoSafe

Effective date of the Comminguance for the purposes Ordinance or Emiddinent

med Drivers by Sect. I ... Additional Ex Other than Named Briv

Date of Expery of Insurance

09 August 2019

. Age as at date of accident

Persons or Classes of Persons entitled to drive?

(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 Walver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

* 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.

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

Authorised Officer

Issued By:

Authorised Signatory



MOTOR PRIVATE CAR

中国太平保险(新加坡)有限公司

MELE . . Cov. Type: C

PLM 316902

ORIGINAL

CERTIFICATE OF INSURANCE

Alotto: Verkides (Third Porty Risks and Correportations) Act (Chapter 16 Metal Verhides (Third-Porty Risks and Correportation) 6-966, 1900 Road Transport Act, 1907 (Malaysia) Motor Vehicles (Third-Party Risks) Fulles, 1800 (Metalysia)

CERTIFICATE NO

T00PC0N3034651806

Magine No : MISSISSINGSBIONE ChaNo: WRAPP72050A783535

To Index Mark and Registration Number of Venicle

SJE495BE

AutoSafe

Name of Policy Holder

HR CHIM TON HIMS

Effective date of the Commercement of Insurance for the purposite of the Regulations, Ordinance or Erractment

10 August 2018

Mamed Drivers Ex Sect. I 59750.00 Additional By Other than Named Drivers

Ex Sect. I - Age ex 25...... 843,000.00

09 August 2019

. Age as at date of accident

- 5 Persons or Classes of Persons entitled to drive*
 - (a) The Policyholder.

4. Date of Expery of Insurance

(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 Vahiule 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.

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Please see reverse.

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

CERTIFICATE OF INSURANCE

PLM 316902

DERDPICATE NO

SMC-CS#3034612#04

Engine to BERRICHMENSON

Marin Mary med Playment St. Number of Vehicle

N2249588

Charle 19827721518791511

Martin of Piolesy Husber

MR CHIN TON MINO

AutoSafe

Effective data of the Commencement of Insurance for the purposes of the Regulations Ordinarios of Englishment

10 August 2018

Named Drivers &z Sect I Additional By Other than Named Drivers

56256 56

4 Date of Explay of Insurance

09 August 2019

. Age as at date of accident

EX ON MEDICALERY ...

Persons of Cressos of Persons and ted to private

(a) The Policybolder.

(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.

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tive Maiver of Excess for the first 551,000 will apply to the Insured and Maned Drivers in the president m Delage Claim at our Authorised Morkshops for each Policy Year.

indered inoperative by Section 8 of the Afotor Vehicles (Third-Party Risks and Complete Months Au Charles 134) 8 of the Road Transport Act 1987 (Malaysiet, are not to be visited united bear the action)

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FOR CHINA TAIPING INSURANCE (SINGAPORE) PTE. L

Authorised Signatory

GERTIFICATE OF INSURANCE

PLM 316902

ORIGINAL

Royton Bo - Privateo Destains Chang. wmarr720502767838

Hamed Drivers Ex Sect. I .

ME CHIN TON NING

10 August 2018

Date of Expiry of Insurance

09 August 2019

Persons or Classes of Persons entitled to drive

(a) The Policybolder.

- HATE NO

Name of Policy Holder

Re Sect. I - Age x+ 25..... 053,000.00 . Age as at date of accident

(b) Any other person who is driving on the Policyholder's order or with his permission.

DEPCENSULATIONS

SJE495BX

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Please see reverse

Issued By:

FOR CHINA TAIPING INSURANCE (SINGAPORE) PTE.

Authorised Officer

Authorised Signatory



HOTOP PRIVATE CAR

中国太平保险(新加坡)有限公司

Co they have project that

CERTIFICATE OF INSURANCE

Motion Variation (Therd-Party Policy and Companisation) Act (Chine 1901)

Medica Variation (Third Party Policy and Companisation) Rules, 1904

Medica Variation (Third Party Policy and Companisation) Rules, 1904

Medica Variation (Trierd-Party Policy) Phone, 1909 (Managera)

HELB n die DROSSSP Cov. Typer C

PLM 316902

DRIGINAL

CERTIFICATE No.

DECPCEMON 3 8 6 8 1 0 0 6

Proline No ipanersolucenzons Chang WRAPF 2010A753533

1 - hutes Mark and Repositions Number of Values

202355W

AutoSafe

2 Name of Public States.

NR CHIN TOW HIND

Prescriment to the Commence of the Populations 10 August 2018
Prescriment to the commence of the Populations.
Confession of Confession

Hamed Drivers By Sect. 1 55750.00

Additional By Other than Haned Drivers:

09 August 2019

RK BOOL, T - Age 34 36 85500.00

. Age as at date of accident

RE ON WINDSCREEN #\$100.00

It Property in Common of Persons smithed to drive

(a) The Pelicykolder.

A Live of Expery of Insurance

(b) Any other person who is driving on the Policyholder's order or with his pecutation.

receited that the parson driving is permitted in accordance with the licensing or other lave or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Cours of Law or by reason of any enartment or regulation in that behalf from driving the Mutor Vehicle.

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MOTOR PRIVATE VAN

CERTIFICATE OF INSURANCE

Roy Verticies (Thirth-Piety Roks and Compensation) Act (Chapter 169) Minor Vehicles (Thirth-Party Risks and Compensation) Rules, 1980 Hosti Transport Act, 1987 (Matrysia) Motor Vehicles (Thort-Party Risks) Pases, 1999 (Matrysia)

MELEN DECEMBER COV. Type: C

PLM 316902

ORIGINAL

CERTIFICATE NO.

EMPCHM3034651806

Engine Me (\$284760194682082 Chano, WRAPPT 2030A793333

1 - Iridan Mark and Reputration Named to Volume

2324955

AutoSafe

2. Nations of Policy Hotels

HR CHIM TOW HIRD

Effective date of the Commencioners of believes for the purposes of the Regulations Confederate or Enalthrent

Hamed Drivers &m Sact. I \$6750.00 Additional Ex Other than Hamed Drivers:

OR August 2015

. Age as at date of accident MK ON WINDSCREEN #8100.00

- Persons in Council of Persons entitled to drive?
 - In) The Policyholder.

Date of Expery of tosureross

(b) Any other person who is driving on the Policyholder's order or with his permission.

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O Lumbahura ne to our "

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

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Please see revers

Authorized Officer

FOI CHINA TAIPING INSURANCE (SINGAPORE) PT

Authorized Bignatory

insued By