

NATIONAL Assessment Centre Services.

(ver 1 Jan 2003)

NA9019417

Date In: 12/02/2019 12:43	Job description	Date & Time Completed	Done by
Ref No: N/A 1211900x6917	SAS e-filing		
Veh No: SMC 2696J	E-mail (w/dia 8hrs, AIC 2hrs)		
D.O.A: 06/02/2019 17:00	I-Motor Claim Form		
OD: TP Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: JTD 9101

INC () / Non-INC ()

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured/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:

() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

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

Remarks: ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time	Action

NA9001100

Claimant Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors Comments:

Ref 1:

2/3

Invoice Item	Amount	INC (S)	Non-INC (S)
1) AR: Accident Reporting (\$30)			
2) DA: Damage Assessment (\$100)		INC (\$80)	
3) TP: Towing Fee	\$40/\$45		
4) PT: Follow-Through Survey	\$120		
5) PT: Follow-Through Survey (Resurvey)	\$30		
For claiming against INC Only (ver 10 Jan 2003)			
6) TR: Re-inspection	\$75		
7) NI: Idao DA + SMRT Survey	\$160		
8) NTUC Additional Services:			
QD:			
*NS: Courtesy Car / Tpl Allowance	\$5		
*N6: Repair Co-ordination	\$10		
*N7: Post Repair Inspection	\$25		
*N8: DV / Collect Excess Coordination	\$5		
TP (N11): TP (N-in INC) against INC	\$20		
N12: Idao Mobile	\$0		
Invoice dated			
Invoice dated			
Fee Charged			
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 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	12/02/2019 12:43
Date Of Accident	06/02/2019 17:00
Exact Location Of Accident	EDL ENTERING JB CHECK POINT BANGUNAN SULTAN ISKAND
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMC2696J
Insured/Policyholder	
Name Of Registered Owner	HITACHI CAPITAL ASIA PACIFIC PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91057091
Alternative Phone No	OFFICE-91057091

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	CLA 180
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V07123/VPZ/R00
Cover Note Number	

Driver

Name of Driver	SIM WING SING
NRIC No	S7066730D
Date Of Birth	17/11/1970
Occupation	INDOOR
Date Of Driving Pass	25/06/2013
Driving Experience	5 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91057091
Fax Number	
Contact Number	OTHERS-91057091
Email Address	NOEMAIL

Address	BLK 688F WOODLANDS DRIVE 75 #08-76
Postcode	736688
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JTD9101 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	2
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?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 WOODLANDS DRIVE 63 , POSTCODE: 738070 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7679999 - FAX NO: 67673652
Was notice of Intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT L/20190207/7031 AND TRAFIK JOHOR(S)003370/19

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	JTD9101
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SARGUNA A/P MUNIANDY
NRIC/Passport Number	900811075596
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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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.

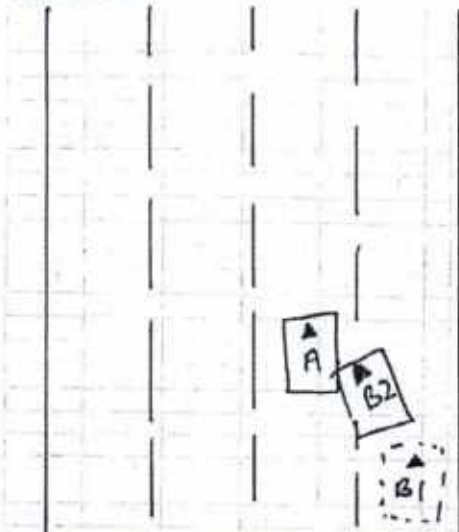
HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

.....
MATTHEW LEE (MR)
Senior Manager
Policyholder's Signature
Total Vehicle Solutions Department
Date & Time:

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

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

SKETCH PLAN



EDL Entering JB Checkpoint
Bangunan Sultan Iskandar
Malaysia

Vehicle A: SMC 2696J

Vehicle B: JTD 9101

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report L/20190207/7831
TRAFIK JETTER BAHRI (S) 003370/19

DECLARATION

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

☒ MATTHEW LEE (MR)
Senior Manager

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.:



POLIS DIRAJA MALAYSIA
REPOT POLIS

Balai : TRAFIK JOHOR BAHRU(S)
Daerah : J/BAHRU SELATAN
Kontinjen : JOHOR
No Repot : TRAFIK JOHOR BAHRU(S)/003370/19
Tarikh : 06/02/2019
Waktu : 1720 PM
Bahasa Diterima : B. Malaysia

Pegawai Penyiasat : R188489

Butir-butir Penerimaan Repot

Nama : MUHAMMAD RAZIS BIN RUSHAIDI

No Personal : R186022

Pangkat : L/KPL

Butir-butir Jurubahasa (Jika Ada)

Nama : —

No K/P (Baru) : —

No Polis/Tentera: —

No Paspot: ---

Bahasa Asal : —

Alamat: —

Butir-butir Pengadu

Nama : SIM WING SING

No K/P (Baru) : 701117015487

No Polis/Tentera : A1703535

No Paspot : —

No Sijil Beranak : —

Jantina : Lelaki

Tarikh Lahir : 17/11/1970

Umur : 48 tahun 2 bulan

Keturunan : Cina

Warganegara : Malaysia

Pekerjaan : SWASTA

Alamat Tempat Tinggal : NO 38 JLN SERIKAYA 15 85000 SEGAMAT JOHOR MALAYSIA

Alamat Ibu/Bapa : —

Alamat Pejabat : —

No Tel (Rumah) : —

No Tel (Pejabat) : —

No Tel (HP) : 6591057091

Pengadu Menyatakan:-

PADA 06/02/2019 JAM LEBIH KURANG 1700HRS SAYA MEMANDU SEBUAH M/KAR NO SMC2696J JENIS MERCEDES CLA180 DARI MELAKA HENDAK MENUJU KE SINGAPORE. PADA KETIKA ITU, SEMASA SAYA SAMPAI DI SUSUR KELUAR L/RAYA PENYURAIAN TIMUR (EDL). KEADAAN JALAN RAYA AGAK SESAK. SAYA MEMANDU DI LORONG TENGAH DAN MEMBERHENTIKAN M/KAR SAYA UNTUK MENUNGGU KESESAKKAN JALAN RAYA. TIBA-TIBA ADA SEBUAH M/KAR NO JTD9101 DARI LORONG KANAN TELAH MENGELAK DARI MELANGGAR M/KAR NO TIDAK PASTI LALU MELANGGAR M/KAR SAYA DI BAHAGIAN BELAKANG. SAYA TIDAK MENGALAMI APA-APA KECEDERAAN. KEROSAKKAN PADA M/KAR SAYA ADALAH : BUMPER BELAKANG KANAN, MUDGUARD BELAKANG KANAN, LAIN-LAIN KEROSAKKAN MASIH BELUM PASTI. SEKIAN LAPORAN SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada) :

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak

: R519Q81B | 07/02/2019 10:00:49 AM

TRAFFIC JOHOR BAHRU (S)
SALINAN YANG DISAHKAN BENAR
(HANYA UNTUK TUNTUTAN SIVIL)

KETUA TRAFIK DAMPAH JONHER SANTO (D. JEFF)
TIDAK PERAH DI LINTAS BANYAK LEBIH DARI 1000 KENDARAAN

3rd party



POLIS DIRAJA MALAYSIA
REPOT POLIS

Balai : TRAFIK JOHOR BAHRU(S)
Daerah : J/BAHRU SELATAN
Kontinjen : JOHOR
No Repot : TRAFIK JOHOR BAHRU(S)/003371/19
Tarikh : 06/02/2019
Waktu : 1727 PM
Bahasa Diterima : B. Malaysia

Pegawal Penyiasat : R188489
No Repot Bersangkut : TRAFIK JOHOR BAHRU
(S)/003370/19

Butir-butir Penerima Repot

Nama : MUHAMAT SUHAIRI BIN SBHIRAN
Butir-butir Jurubahasa (Jika Ada)
Nama : —
No Paspot: —
Alamat: —

No Personel : R151991

Pangkat : KPL

No K/P (Baru) : —

No Polis/Tentera: —

Bahasa Asal : —

Butir-butir Pengadu

Nama : SARGUNA A/P MUNIANDY

No K/P (Baru) : 900811075596

No Polis/Tentera : —

No Paspot : —

No Sijil Beranak : —

Jantina : Perempuan

Tarikh Lahir : 11/08/1990

Umur : 28 tahun 5 bulan

Keturunan : India

Warganegara : Malaysia

Pekerjaan : SWASTA

Alamat Tempat Tinggal : NO 9 JLN PERJIRANAN 10/22 BANDAR DATO ONN 81100 JOHOR BAHRU JOHOR
MALAYSIA

Alamat Ibu/Bapa : —

Alamat Pejabat : —

No Tel (Rumah) : —

No Tel (Pejabat) : —

No Tel (HP) : 018-2255093

Pengadu Menyatakan:-

Pada 06/02/2019 Jam lebih kurang 1700hrs semasa saya memandu M/Kar NO.JTD9101 dari Bandar Dato Onn menuju ke Pusat Bandar.Tiba di L/Raya Edl susur ke Jalan Pasir Pelang saya memandu di lorong kanan dan hendak menukar lorong ke kiri semasa tukar lorong sebuah M/Kar NO Tak pasti tidak mahu memberi laluan kepada saya dan terus ke depan.Saya cuba mengelak lalu terlangar belakang M/Kar NO.SMC2696J yang berada di lorong tengah hadapan saya.Saya tidak mengalami kecederaan dan kerosakan M/Kar saya ialah bumper hadapan dan lain-lain kerosakan saya belum pasti.Sekian laporan saya.

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada) :

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak

PEJ. SALINAN REPO
TRAFFIC INFORMATION 10:00:52 AM
SALINAN YANG DISAHKAN BENAR
(HANYA UNTUK TUNTUTAN SIVIL)

KETUA TRAFIK DAERAH JOHOR BAHRU (S) JOHOR
TIDAK BOLEH DIGUNAKAN UNTUK TUJUAN



KETUA POLIS DAERAH
IBU PEJABAT POLIS DAERAH JOHOR BAHRU SELATAN
80250 JOHOR BAHRU
JOHOR

Tel : 072237977 Samb :

Ruj :
Tkh : 06/02/2019

SIM WING SING No KP : 701117015487
NO 38 JLN SERIKAYA 15 SEGAMAT
85000 Johor - Motokar SMC2696J

KEPUTUSAN PENYIASATAN KES

No. Pengaduan Polis : TRAFIK JOHOR BAHRU(S)/003370/19
Tkh/Masa Rpt : 06/02/2019 17:20 HRS
Kesalahan : R10 LN166/59
Tkh/Masa Kemalangan : 06/02/2019 17:00 HRS
Tempat Kemalangan : L/RAYA PENYURAIAN TIMUR (EDL)

Dengan hormatnya saya merujuk kepada pengaduan yang dibuat sepertimana dinyatakan di atas.

2. Untuk makluman, pihak yang bertanggungjawab melakukan kesalahan di atas telah disaman polis (RM 300.00) pada 6/2/2019 (CARS190024882).

3. Butir-butir pihak yang disalahkan adalah seperti berikut :-

SARGUNA A/P MUNIANDY KP : 900811075596
NO 9 JLN PERJIRANAN 10/22 BANDAR DATO ONN JOHOR BAHRU
81100
JTD9101 PEMANDU Motokar

"BERHATI-HATI DI JALAN RAYA"

(R188489 - MURNIHIDAYAH BINTI MOHD)
AIO TRAFIK
80250 JOHOR BAHRU

s . k KST No :
[Notis ini hanya sebagai makluman anda sahaja]

PEJ. SALINAN REPO
TRAFIK JOHOR BAHRU (S)
SALINAN YANG DISAHKAN BENAR
(HANYA UNTUK TUNTUTAN SIVIL)

KETUA TRAFIK DAERAH JOHOR BAHRU
TIDAK BOLEH DIGUNAKAN



**POLIS DIRAJA
MALAYSIA**

RESIT RASMI

Nombor Resit Induk : 0201002019P0001801
Kaedah Bayaran : Tunai
Nombor Siri : -
Jumlah : RM18.00
Tarikh Bayaran : 07/02/2019
Pengeluar Resit : JOHOR BAHRU
Nama : SIM WING SING
Nombor K/P :
Bilangan : 6 muka surat 1/1

Nombor Resit Kecil	Jenis Rutipan	RM
1 0201002019L003262	REPOT KEMALANGAN 003370/19	4
2 0201002019L003263	KEPUTUSAN KES 003370/19	0
3 0201002019L003264	RAJAH KASAR 003370/19	4
4 0201002019L003265	GAMBAR KEMALANGAN 003370/19	3
5 0201002019L003266	GAMBAR KEMALANGAN 003370/19	3
6 0201002019L003267	REPOT KEMALANGAN 003371/19	4



SILA SIMPAN RESIT UNTUK REKOD ANDA
TERIMA KASIH
220145R5M19019P0100009180701180202010018
KK/BPKS/10/600-2/1/2 (2)



KETUA POLIS DAERAH
IBU PEJABAT POLIS DAERAH JOHOR BAHRU SELATAN
80250 JOHOR BAHRU
JOHOR

Tel : 072237977 Samb :

ID Jurugambar: R185235
No. Pengaduan: TRAFIK JOHOR BAHRU(S)/003370/19
Tarikh Cetak: 07/02/2019
Dicetak Oleh: R5190818



REPO
TRAFIK JOHOR BAHRU (S)
SALINAN YANG DISAHKAN BENAR
(HANYA UNTUK TUNTUTAN SIVIL)

KETUA TRAFIK DAERAH JOHOR BAHRU
TIDAK BOLEH DIGUNAKAN

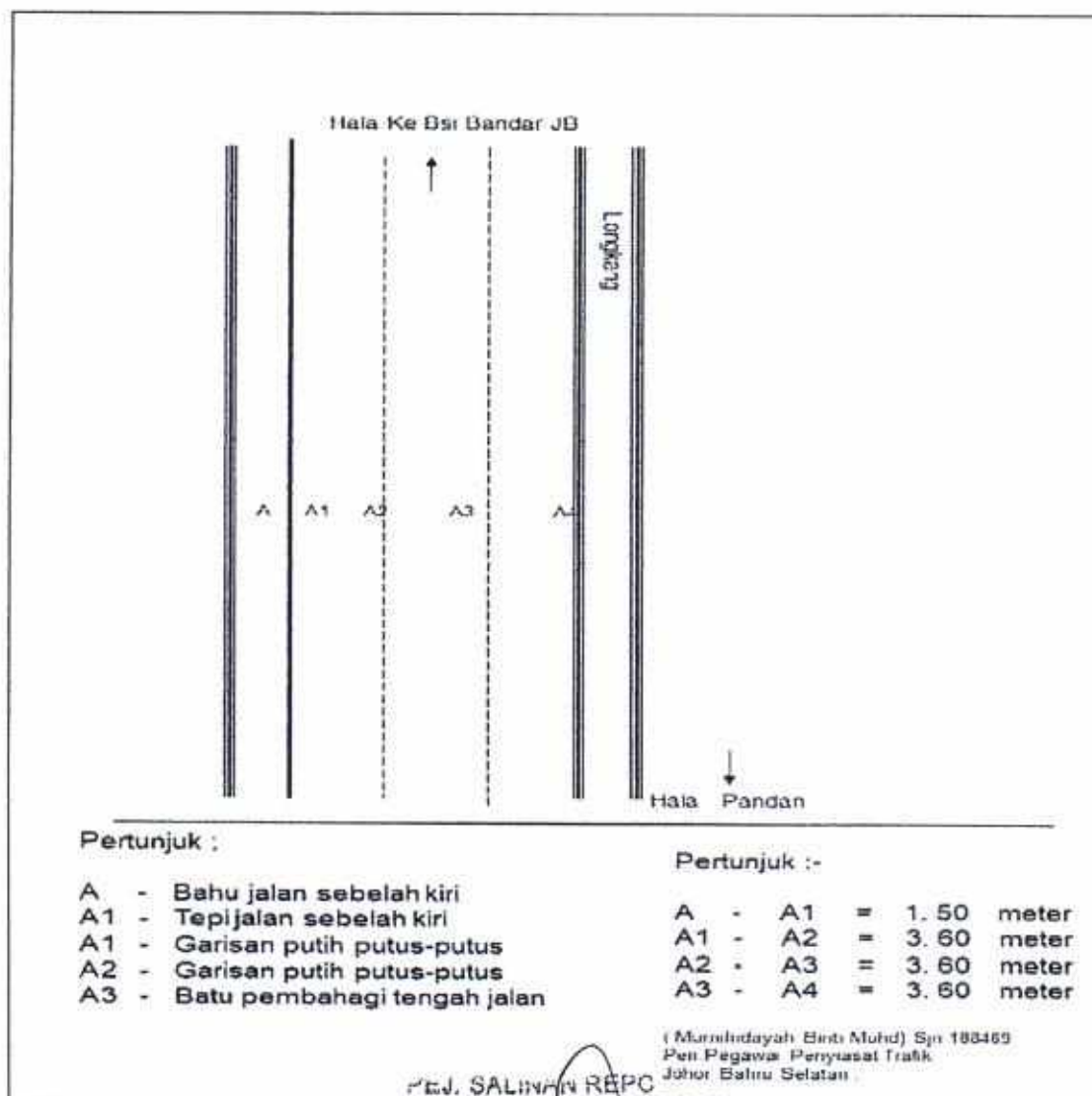


KETUA POLIS DAERAH
IBU PEJABAT POLIS DAERAH JOHOR BAHRU SELATAN
80250 JOHOR BAHRU
JOHOR

Tel : 072237977 Samb :

No. Pengaduan : TRAFIK JOHOR BAHRU(S)/003370/19
Tarikh Cetak : 07/02/2019
Dicetak Oleh : R5190818

(Rajah Kasar Tidak Mengikut Skala)



PEJ. SALINAN REPC
(TRAFIK JOHOR BAHRU (S))
SALINAN YANG DISAHKAN BENAR
(HANYA UNTUK TUNTUTAN SIVIL)

KETUA TRAFIK DAERAH JOHOR BAHRU
TIDAK BOLEH DIGUNAKAN



POLICE REPORT (NP299)

Report No. L/20190207/7031

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000

Date/Time Report Made 07/02/2019 18:31	Vide Report No.	Station Diary No.
Name Of Informant SIM WING SING	Address APT BLK 688F WOODLANDS DRIVE 75 #08-76 SINGAPORE 736688	
ID Type / ID No. NRIC NO / S7066730D	Contact No. Home/Office: Mobile: 91057091	
Nationality MALAYSIAN	Email Address vincentsim70@gmail.com	
Occupation Chief operating officer/General Manager	Sex Male	Age 48
	Date of Birth 17/11/1970	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 06/02/2019 17:00	Location Of Incident APT BLK 688F WOODLANDS DRIVE 75 #08-76 SINGAPORE 736688	

Brief details.

On 06/02/2019 at about 5.00 p.m., I was driving my car, White Mercedes CLA180, SMC2696J, at EDL, queuing up to enter Johor Bahru's Immigration Checkpoint, Bangunan Sultan Iskandar, Malaysia. The traffic was terrible as it was a massive jam. During that point of time, my car was stationary. As the traffic was congested, I kept on moving forward slowly, just to proceed further front towards the checkpoint.

Not long after that, I heard a bang at the rear of my vehicle. I realised that there was a car, JTD9101, had

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Not applicable	
Signature Of Interpreter:	Date/Time:
Not applicable	07/02/2019 18:31
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



L/20190207/7031

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20190207/7031

collided with the rear of my car. When I came out, I realised that the car, was from my right, wanted to go to my lane, behind my car. However, the initial vehicle behind my car did not give way. Due to that, the car, JTD9101, had misjudged the distance and had collided with my car.

My car's damages are dents and scratches at the rear bumper.

I am lodging this report for insurance claiming purposes.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/02/2019 18:31
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Email: sm@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 6/2/2019 (dd/mm/yy) Time of Accident: 17:00 (24-HR-FORMAT)

Vehicle No.: SMC 2696 J Vehicle Make & Model: Mercedes CLA 180

Exact location of Accident: EDL entering JB Check Point Bangunan Sultan Iskandar Malaysia

Policyholder's Name / IC No.: Hitachi Capital Asia Pacific Pte Ltd

Driver's Name / IC No.: Sim Wing Sing S7066730D (As Above) ☐

Driver's Contact No.: 9105 7091 Company Contact No: _____

Driver's Address: _____

Insurance Company: Liberty Email address (if any): _____

Relationship between Owner & Driver: Owner

or Others specify: _____

What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Exact purpose for which the vehicle
Was being used at time of accident?

☒ Private use / ☐ Work purpose

Occupation (nature of job) ☒ Indoor/ ☐ Outdoor

No. of Passengers (Including Driver): _____

Passenger Name: _____

Gender: _____

Passenger Name: _____

Gender: _____

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☒ Yes / ☐ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No: _____ Vehicle No: JTD 9101

Driver's Contact No: _____ Insurance Company (If any): _____

2. Driver's Name / IC No: _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

REPUBLIC OF SINGAPORE DRIVING LICENCE

S7066730D

SIM WING SING

Date of birth: 17 Nov 1970

Valid till: 25 Jun 2013

002195162C

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7066730D

SIM WING SING

沈文

Race: CHINESE

Date of birth: 17-11-1970

Country of birth: MALAYSIA

Sex: M

S7066730D

KAD PENGENALAN MALAYSIA IDENTITY CARD

701117-01-5487

SIM WING SING

NO.38
JALAN SERI KAYA 15
85000 SEGAMAT
JOHOR

WARGANEGARA
LELAKI

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

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

25 Jun 2013

Licence No: S7066730D

NF 428A

NRIC No: S7066730D

Nationality: MALAYSIAN

Date of issue: 02-01-2008

APT BLK 688F WOODLANDS DRIVE 75 #08-78 SINGAPORE 736688

NRIC No: S7066730D Date: 21/06/2015



Handwritten signature

**KETUA PENGARAH
PENDAFTARAN NEGARA**

**701117-01-5487-02-01
(A1703536)**

**Touch
nGO**

**30K
chip**

BY 220900107



Liberty Insurance Pte Ltd
Registration no 199002781D
51 Club Street
#03-00 Liberty House
Singapore 069428
Tel: (65) 6221 8611 Fax: (65) 6225 6590
Website: <http://www.libertyinsurance.com.sg>

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)

Certificate No	SD18V07123 VR2 / R00
Form	MZ406
Date Of Issue	11-JUL-2018
1. Index Mark and Registration No. of Vehicle:	SMC2696J
2. Chassis number of Vehicle:	WDD1173422N653672
3. Name of Policyholder:	HITACHI CAPITAL ASIA PACIFIC PTE LTD
4. Effective date of Commencement of Insurance for the purpose of the Act:	28-JUN-2018 00:00 AM
5. Date of Expiry of Insurance:	27-JUN-2019 23:59 PM
6. Persons or Classes of Persons entitled to drive*:	
Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired. 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.	
7. Limitations as to use*:	
A) Use for carriage of passengers or goods in connection with the Policyholder's business. B) Use for social, domestic, pleasure and business purposes of any person to whom the vehicle is hired.	
8. Policy does not cover:	
A) Use for racing, pace-making, reliability trial or speed-testing. B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. C) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.	
*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 provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).	
For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers	
 Authorised Signature	
For information only:	
COVERAGE:	Comprehensive, Unlimited Windscreen
SUM INSURED:	MARKET VALUE AT THE TIME OF LOSS
EXCESS:	Section 1 - For SIM WING SING Only - Singapore S\$1500 / Outside Singapore - S\$3000, Section 1 - Unnamed Drivers - Singapore S\$2000 / Outside Singapore - S\$4000, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers - S\$5000, Windscreen Excess - S\$100
FINANCE COMPANY:	HITACHI CAPITAL ASIA PACIFIC PTE LTD
PRODUCER NAME:	CAR TIMES INSURANCE AGENCY PTE LTD

PLYW/PLYW/11-JUL-18

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11-JUL-18

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