	NAL Assessment Centre	VELVICES			
Date In:	01/03/19	Job description	Date &Time Completed	Done	by
	NA/1MI19003878/13	SAS e-filing	12.		*
	510419714	E-mail (within Shrs, AIC 2hrs			
DOA	28/02/19 1800	i-Motor Claim Form			Taylor V
		i-Motor W/O (Within: OD	2hrs, TP 4hrs)		
OD (I	Peporting Only	i-Photo Uploaded			1.4
TP Insure	apr.	Assessment/Survey Repor	t		
		Ass't Report by Fax / Han	d to Owner/Wksp		
Preferred V	Wksp / INC Assign Wksp / QW: (	MGARAGE.	Tel: Fax	C	
TP Partice	ulars: Veh No:	SKV86354 INC	( )/Non-INC( )		alle see
Owner /			Tel:	)	I E-MESS
Policy No	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	od: (	) Cover Type: (	)	
	Confirmed by : (	Date:	Time:	)	
			-20%; P: 21-79%. F: 80-100	0%]	
Excess: (	The state of the s	arranty: YES ( )/NO (	)		
General Re	3 7 1	0()/\$2,000()			
	emarks:- lk-In Customer : Customer's infor	The second second second		147	
3) Upload I	ck / Post Repair Inspection Resurvey Photo [Repair Cost > \$30	( )			
Injury :			*		
Date/Time	Actions				
	NA1901685	Invoice Pr	reparation Checklist	Anit (\$)	
Claimant's P		1) AR : Accide	ent Reporting (\$30);	Ant (\$)	
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river/Owne	Particulars :-	1) AR : Accide 2) DA : Dama 3) TF : Towing 4) FT : Follow 5) FT : Follow For claiming	ent Reporting (\$30); ge Assessment (\$100); INC (\$80) g Fee \$40/54 -Through Survey \$12 -Through Survey (Resurvey) \$3 g against INC Only (wef 10 Jan 2005)	1st Bill	
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Oriver/Owne Contact No: Damaged Por C Checked	Particulars :- er: etion: by (Engr-In-Charge):	1) AR : Accide 2) DA : Dama 3) TF : Towing 4) FT : Follow 5) FT : Follow For claiming 6) TR : Re-ins 7) N1 : Idae D 8) NTUC Add OD* *N5: Courte *N6: Repair *N7: Post R *N8: DV / C	ent Reporting (\$30); ge Assessment (\$100); INC (\$80) g Fee \$40/\$4 -Through Survey \$12 -Through Survey (Resurvey) \$3 g against INC Only (wef 10 Jan 2005) pection \$7 A + SMRT Survey \$16 itional Services:-  ssy Car / Tpt Allowance \$1 Co-ordination \$1 epair Inspection \$2 Collect Excess Coordination \$	1st Bill	
Oriver/Owne Contact No: Damaged Por	Particulars :- er: etion: by (Engr-In-Charge):	1) AR : Accide 2) DA : Dama 3) TF : Towing 4) FT : Follow 5) FT : Follow For claiming 6) TR : Re-ins 7) N1 : Idae D 8) NTUC Add OD* *N5: Courte *N6: Repair *N7: Post R *N8: DV / C	ent Reporting (\$30); ge Assessment (\$100); INC (\$80) g Fee \$40/\$4 -Through Survey \$12 -Through Survey (Resurvey) \$3 g against INC Only (wef 10 Jan 2005) pection \$7 A + SMRT Survey \$16 itional Services:-  ssy Car / Tpt Allowance \$ Co-ordination \$1 content Excess Coordination \$2 Collect Excess Coordination \$2 CO (\$100 Excess Coordination \$2 CO (\$100 Excess Coordination \$3 CO (\$100	1st Bill	

## 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.
  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

ACCIDENT STATEMENT		
01/03/2019 15:43		
28/02/2019 18:00		
PIE TWDS CHANGI AFT LORNIE RD EXIT		
SINGAPORE		
DETAILS OF OWN VEHICLE		
SLQ4197H		
SUPREME LEASING & LIMOUSINE PTE LTD		
201710190R		
NOEMAIL		
OFFICE-99999999		
HONDA		
SHUTTLE		
COMMERCIAL USE		
NO		
THIRD PARTY		
PRIVATE HIRE		
TOKIO MARINE INSURANCE SINGAPORE LTD		
COMPREHENSIVE		
NO		
18-MI000894-R01		
LIM CHOON CHWEE		
S1813176E		
04/12/1967		
OUTDOOR		
27/04/2011		
7 YEARS AND 10 MONTHS		
MALE		
(LOCAL) +65-82352467		
NOEMAIL		

Address

BLK 257 ANG MO KIO AVE 4

#02-87

Postcode

560257

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

## General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

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)

4

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 2

NAME:

: UNKNOWN

GENDER:

: FEMALE

Passenger 3

NAME:

: UNKNOWN

GENDER:

: FEMALE

## **Details of Police Action**

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

PLS REFER TO THE ATTACHED STATEMENT.

## 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

SKV8635U

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Page 2 of 17

Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

# SINGAPORE ACCIDENT STATEMENT

Accident Date: 28/03/2019 Time: 1800 MV (hh:mm) 24 hr format
Location PIE try north Channel (hh:mm) 24 hr format
Location PIE towards Changi after Lonie Road exit
Vehicle Number SLG4197H
Insured Name Supreme leasing & limeurine Fee Ltd
INRU (HIN YOLD IN) (IA)
Make Honda Model Muttle hybrid
Are you claiming under your own insurance policy for repair to your vehicle?
( ) Yes If No,Pls select: ( / ) Third Party ( ) Reporting
Insurance Company TUKIO MAKINE
Type of Policy ( ) Comphensive ( ) Third Party Fire & Theft ( ) TP Only
Policy Number 18-M1000894 - RU1
Name of Driver Lim Chun Chwee ( )Same as Insured
NRIC/FIN S1813176E Contract Number 2005 2467
Date of Birth 04/12/1963 Contact Number 8235 2463
Driving Pass Data 2 - 10412
Driving Pass Date 27/04/2011 Occupation ( ) Indoor ( ) Outdoor
Cont. Visit
Fmail Address
Address of Driver BIX 25+ Ang mo Kio Ave 4 #U2-8+
Was driver ( 500257)
Was driver an employee of the Insured's Company? ( ) Yes ( ) No
If No, Relationship of the Driver with the Insured
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 ( ) Cl
Road Surface ( ) Dry ( ) Wet ( ) Others
Was any foreign vehicle involved in this it is
Was anybody injured in the accident?
If yes, injured detail
Was there any video captured by Car Camera? ( ) Yes ( ) No
Was the Accident reported to the Police?
DETAILS OF 3rd party Name / Nric
Ven B SKV0635()
Veh C
Veh D
Veh E
Veh F

i male + 2 famale passenger (uncrown)

## SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please raport <u>correctly</u> 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 repudiete 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
- 5. Any false reporting may be referred to the Police for investigation.
- 5. The report will be forwarded by the insurers of the GIA Records Management Contre established by the General Insurance Association of Singapore (G(A) for archiving and that copies of this report will for a fee be made available upon application by
- 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
- 8. Consent under the Personal Data Protection Act (POPA)

tunderstand, acknowledge, agree and consent that:

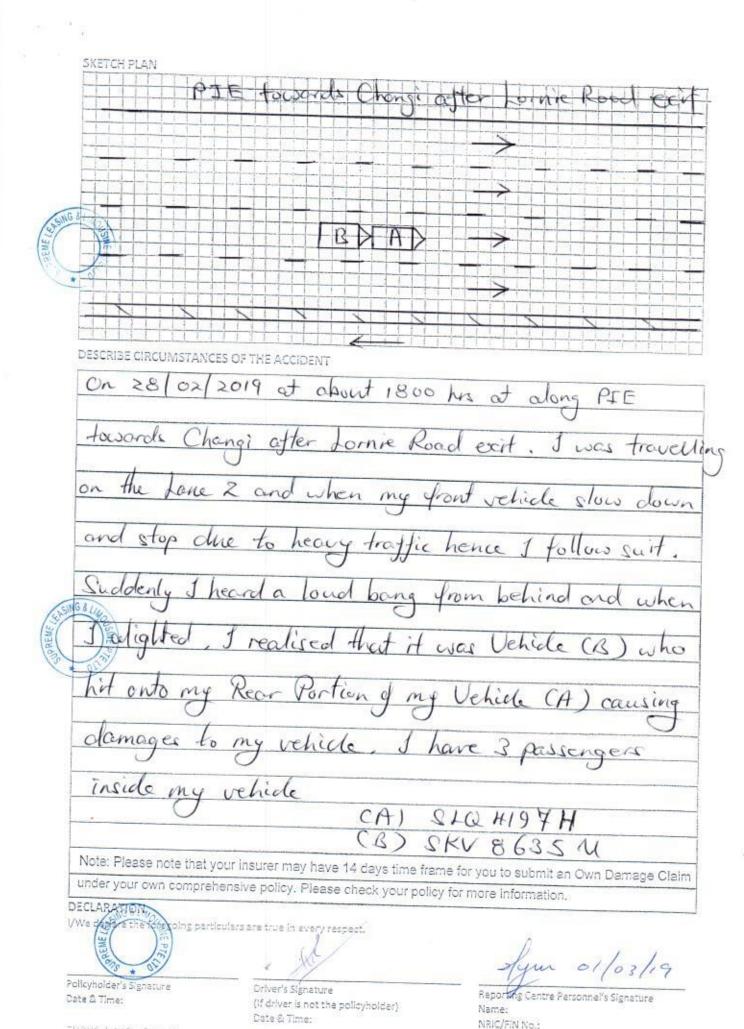
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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:
  - (1) 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
- (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) thy Personal Information may/can be disclosed by any of the insurers and/or GtA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singaporo, for one or more of the above Purposes.
- my personal information will also be collected and used to compile claims bistory for the purpose of freud detection, investigation and management in present and all future claims.
- ie) 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.

Date & Time:

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

Name: NRIC/FIN No.:

Reporting Centre Personnel's Signature



Charact Autoportuni 13

## REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$1813176E





lame

LIM CHOON CHWEE

Race CHINESE

Date of birth 5e 04-12-1967 M

01013176:

Country of birth

ORE

NRIC No. S1813176E



25-05-2011

Address
APT BLK 257 ANG MO KIO AVENUE 4
#02-87
SINGAPORE 560257



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

EFFECTIVE DATE

Of the driver; and other motor vehicles =< 2500kg

Ucence No: \$1813176E

DRIVEY SLQ4197H

Land Transport Authorit

PDVL/TDVL 33 888 88888 267135



VOCATIONAL LICENCE Licence No: \$1813176E Name: LIM CHOON CHWEE

Please visit www.ita.gov.sg to check the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request, if found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type

Description

Issue Date

13

PRIVATE HIRE CAR VL

21/06/2018



Tokio Marine Insurance Singapore Ltd.

(Company Reg No. 192300014M) (GST Reg No. M2 0000023 4) 20 McCallum Street #09-01 Takio Marine Centre Singapore 069046

1 (65) 6221 6111 F (65) 6221 4355 / (65) 6224 0895 E tmls@toklomarlne.com.sg ₩ www.toklomarlne.com

Amountariot the talks (Zame Crass)



## 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)

Policy No.: 18-MI000894-R01 (Private Motor Car)

 Index Mark and Registration Number of Vehicle

SLQ4197H

Chassis No.: GP71113831

2. Name of Policyholder

SUPREME LEASING & LIMOUSINE PTE LTD

3. Effective date of the Commencement of Insurance for the purposes of the Act

25/05/2018

4. Date of Expiry of Insurance

24/05/2019

5. Persons or Class of Persons entitled to drive\*

Any person who is driving on the Policyholder's order or with their permission.

Any other person who is driving on the hirer's order or with his/ their 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, 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.
- 6. Limitations as to use\*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the

The Policy does not cover;-

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled
- \* 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 provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance,

## IMPORTANT NOTICE

1

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd, within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Comprehensive Approved Workshop Plan

Insurance Plan: Limit for total loss or theft:

Prevailing Market Value

SGD 1,800

Policy Excess:

Excess - All Claims

SGD 100

Financial Interest:

Windscreen Excess SG PRIME CARS CREDIT PTE LTD

Tokio Marine Insurance Singapore Ltd.

Account: 2662DDA

Authorised Signature

User Name: Intermediaries from TM O

Printed 22/05/2018