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OD / TPC Reporting Only	I-Photo Uploaded			
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TP Parliculars: Veli No:	SJJ 1964.R . INC		1,	
Owner / Driver: (Tel:	· · · · · · · · · · · · · · · · · · ·	
Policy No: ()	Period: () Cover Type: (
Confirmed by : (· Datet.	Timer	2 00 100%	
Insured/Driver Liability: (%	7	0-20%; P: 21-79%. I	2; 80-100vej	
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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.
- 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.

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Date Of Report 01/03/2019 16:58
Date Of Accident 01/03/2019 13:45

Exact Location Of Accident GUILIN VIEW CONDO CARPARK A MSCP

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKT1881G

Insured/Policyholder

Name Of Registered Owner TOH SOON LEE LYVIN

NRIC No \$7931991J

Email Address LYVIN_TOH@YAHOO.COM.SG

 Mobile Phone No
 (LOCAL) +65-91779618

 Alternative Phone No
 OTHERS-91779618

Vehicle Particulars

Manufacturer MASERATI
Model GHIBLI

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 CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMPCSN1620471802

Cover Note Number

Driver

Name of Driver TOH SOON LEE LYVIN

 NRIC No
 \$7931991J

 Date Of Birth
 17/10/1979

 Occupation
 INDOOR

 Date Of Driving Pass
 23/03/1999

Driving Experience 19 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91779618

Fax Number

Contact Number OTHERS-91779618

EMail Address LYVIN TOH@YAHOO.COM.SG

Address

BLK 269 TOH GUAN ROAD #09-83

Postcode

600269

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

 $\mathcal{D}_{\mathcal{C}}^{(i)}$

Insurance Company of Driver's Own Vehicle

+

General Information of the Accident

Type Of Accident

COLLISION - HEAD ON COLLISION

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?

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)

10

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

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

ON 01/03/2019 @ 1348 HRS, I WAS DRIVING AND ENTERING MSCP CARPARK "A" OF GUILIN VIEW CONDO. WHEN I MADE A TURN UP THE 2ND LEVEL RAMP, MY CAR FRONT RIGHT COLLIDED WITH THE FRONT RIGHT OF ANOTHER RED CAR WHICH IN POSITIONING FOR DRIVING DOWN THE RAMP. THE IMPACT IS NOT THAT BIG, BUT THERE ARE DAMAGES TO BOTH CARS FRONT RIGHT. MY CAR BUMPER AND RIGHT HEADLIGHT BROKE. I FELT THAT THE CAR TURNING DOWN, POSITIONING MORE TOWARDS MY TURNING UP LANE INSTEAD OF KEEPING MORE LEFT TOWARDS HIS TURNING DOWN LANE. THAT'S ALL.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJJ1964R

Vehicle Make/Model/Colour

HONDA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

HONG ZHI HAO

NRIC/Passport Number

S9239675D 94561791

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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.

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.:

SKETCH PLAN	Gulla	VIFAN COM	100 G	ARPAR	IC A	mscp	
			M3	<i>→ ←</i>			
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DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

reful h	SUBTRACT	

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:

Perporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: 01 63 2	019)(DD/MM/YYYY). TIME: (1 48 pm)(HH:MM)
LOCATION: Guilin View	(crito corpadi A msc p
1. DETAILS OF VEHICLE	
a) VEHICLE NUMBER:	SHT 18816
b)INSURANCE COMPANY:_	
	MP(SN 1620471802
O/MINICE & MODEL:	ENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
f)TYPE:(SALOON / COUPE /	MPV /VAN / LORRY / LIGHTON ON THE A DESIGNAL
.g) VEHICLE CATEGORY: (PRIN	ATE / COMMERCIAL / MOTORCYCLE)
h)PURPOSE OF USING AT AC	CIDENT TIME: PELVIN B
I ARE YOU CLAIMING LINDS	R YOUR OWN INSURANCE (YES/NO)
IF NO. PLEASE STATE ITHIRD	PARTY CLAIM / REPORTING ONLY)
2. INSURED / POLICY HOLDER	ARTI CLAIM / REPORTING ONLY)
AINAME: TOH SWOU	WEE
b) NRIC/FIN/PASSPORT: ST	(MALE / FEMALE)
	CONTACT: TIFFTON
1	10h Guen Road # 09-83, 56002
CONTINUE TO 3.d IF DRIVER	ALSO DOLLOWING
the of passongs DRIVER TOU CANAL	ALSO POLICY HOLDER
Including dia) DINAME: TOH SOON L	EF ~
() DINRIC/FIN/PASSPORT:	(MALE / FEMALE)
C_) GIADDRESS:	CONTACT:
CINDDRESS:	
*dIDATE OF BIRTH, (11 ,)C	1014
d) DATE OF BIRTH: [1]	-/(DD/MM/YYYY)
e/OCCUPATION: (INDOOR / C	OUTDOOR)
DATE OF DRIVING PASS	1997
IF NO PELATIONSHIP OF THE	OF THE INSURED'S COMPANY? (YES / NO)
5 GIWEATHER CONDEIGNATION	HE DRIVER WITH INSURED:
5. a) WEATHER CONDITION: (CLE	AR / RAINING / OTHERS
b)ROAD SURFACE: (DRY / WEI	/OTHERS
6. WAS ANYBODY INJURED (YES	(NO)
7. a) REPORTED TO POLICE (YES /	NO) .
IF YES, PLEASE STATE WHICH	POLICE STATION:
o. THIRD PARTY VEHICLE	3 10/110
of passenger of VEHICLE NUMBER: 57	J 1969K MODEL: HUNDA
including driver) b) DRIVER'S NAME: Hong	ZIV Hao
O NRIC/FIN/PASSPORT: S	92 37675D CONTACT: 9456 171
9. THIRD PARTY VEHICLE	
to of passenger d) VEHICLE NUMBER:	MODEL:
nduding deliga (e) DRIVER'S NAME:	
including driver f) DRIVER'S NAME:	CONTACT:
()	- Control -
	(X*)

email = Lyvin_toh @ yakoo.iom.sg

EPUBLIC OF SINGAPORE SINGAPORE STATES OF STATE





Name

TOH SOON LEE, LYVIN (ZHUO SHUNLI, LYVIN)







Race

CHINESE

Date of birth

Sex

17-10-1979

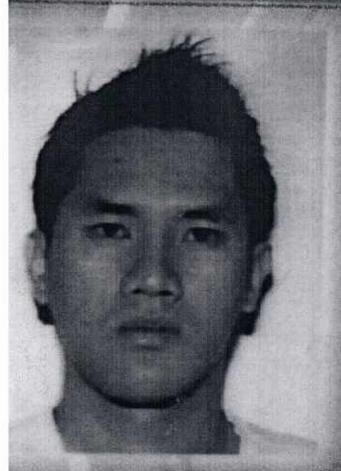
M

Country of birth

SINGAPORE



DRIVING LICENCE



Licence Number: S 7 9 3 1 9 9 1 J Name:

TOH SOON LEE, LYVIN (ZHUO SHUNLI, LYVIN)

Birth Date: 17 Oct 1979

Issue Date: 22 Mar 2003



THE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class 2B Motorcycles not exceeding 200 cc

Class 2A Motorcycles between 201 cc and 400 cc

Class 2 Motorcycles exceeding 400 cc

Motor cars and Motor Tractors the weight unladen does not exceed 2500 kg

12 Mar 2002 6 12 Aug 2003 23 Mar 1999

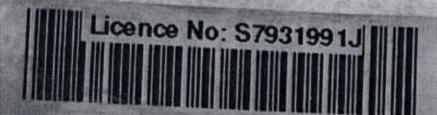
PASS DATE

08 Jan 2001

S7931991J

S/No. 9000009024

NP 428A





中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Co. Reg. No. 200208384E

MX1/B R SN AN0498A Cov. Type: C

MOTOR PRIVATE CAR

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 (Melaysia)

ORIGINAL

Engine No :M156c235264 CERTIFICATE No. DMPCSN1520471802 ChaNo: ZAMSS57C001097072 1 Index Mark and Registration 5KT1881G Number of Vehicle 2. Name of Policy Holder MR TOH SOON LEE LYVIN (ZHOU SHUNLI, LYVIN) Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment 13 April 2018 Named Drivers Ex Sect. I 558,000.00 Excess Sect. I (Outside Singapore)... 5\$16,000.00 4. Date of Expiry of insurance 12 April 2019

5. Persons or Classes of Persons entitled to drive" As per Named Driver(s) stated below.

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.

THE INSURED &

LOW SIEW FEN ONLY

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.

HIRE PURCHASE CO.: DB5 BANK LTD AS HP OWNER

* 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 (Motorsia), 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. LTD.

Issued By: NEO.& COMPANY INSURANCE AGENCY PTE LTD Authorised Officer

Authorised Signatory