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Net No: Trod 8H	E-mail (within Shrs, AIC 2hrs)		
D.O.A :2/2) 19-13:50	i-Motor Claim Form	1	
	i-Motor W/O (Within: OD 2)	nrs, TP 4hrs)	
OD : TP/ Reporting Only	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand	to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: (		Tel: Fax	:
TP Particulars: Veh No:	1157. 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	1,000 ( )/\$2,000 ( )		
General Remarks:-	ALL FOR THE STATE		
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		Suicily NO 13ter of reparter.	
( ) Total Loss Case : to e-mail Insu			<del></del>
Drive-In ( )/ Towed-In ( ); Invo	ice: YES( )/NO( );	Towing Co: (	)
Remarks: - (INC hotline: 6788 6616)	8 10 10 10 10 10 10 10 10 10 10 10 10 10	Date&Time Completed	Done by
	/ Courtesy Car ( )		2.14
1) Apply for Transport Allowance (	Courtesy car (		
	( )	1	
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## SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

EMail Address

- Please report <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.
- Information provided must be as <u>truthful and accurate</u> 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.

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	ACCIDENT STATEMENT	
Date Of Report	04/03/2019 13:46	
Date Of Accident	02/03/2019 13:50	
Exact Location Of Accident	JUNC SOUTH BRIDGE RD & UPP HOKIEN ST	
Country/State of Loss	SINGAPORE	
D	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJR5568H	
Insured/Policyholder		
Name Of Registered Owner	SEIT SHER LI @ ANDREA HOOI	
NRIC No	S7482406D	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-98898338	
Alternative Phone No	OFFICE-98898338	
Vehicle Particulars		
Manufacturer	VOLKSWAGEN	
Model	TOURAN 1.4 TSI 170HP	
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	PRIVATE CAR	
Insurance Company		
Name of Insurance Company	EQ INSURANCE COMPANY LTD	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	DMPPHQ18-004298	
Cover Note Number		
Driver		
Name of Driver	HOOI TUCK SUNG JOHN	
NRIC No	S7021418J	
Date Of Birth	27/06/1970	
Occupation	INDOOR	
Date Of Driving Pass	25/02/1992	
Driving Experience	27 YEARS AND 0 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-98898338	
Fax Number		
Contact Number	OFFICE-98898338	
	North	

NOEMAIL

Address

19 BUKIT TERESA CLOSE

Postcode

099789

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

## General Information of the Accident

Type Of Accident

COLLISION - CHANGE/CROSS LANE

Weather Conditions

CLEAR

Road Surface

DRY

## Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

NO 2

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?

YES

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

NO

Number of Passengers (Including Driver)

Passenger 1

NAME:

: SEIT SHER LI @ ANDREA HOOI

GENDER:

: FEMALE

Passenger 2

NAME:

: JOELLE HOOI KWONG YEE

GENDER:

: FEMALE

Passenger 3

NAME:

: JOSIAH HOOI KWONG TIEN

GENDER:

: MALE

## **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

REFER TO STATEMENT.

# Attachment(s)

YES

Are accident photos available for attachment? Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SMD2115P

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Page 2 of 22

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

## SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report socrettly the details of the accident to speed up the claims process.
- 2. This form must be completed by the Policyholder and/or the Authorised Drivet.
- Information provided must be as truthful and accurate as possible. Any wiful misrepresentation or with rolding of material facts may allow insurance companies to recudiate policy liability.
- The Issue and acceptance of this Form by incurance companies is not an admission of policy liability on the part of the insurance companies.
- 3. Any false recording may be referred to the Police for Investigation.
- The report will be forwarded by the insurers of the GIA Records Management Control established by the General insurance
  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made evaluable upon application by
  interested parties.
- 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.
- 5. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and enteent that:

- (t) 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:
  - 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 secident and/or my dalme;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the restling 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 any claims (collectively the "Purposes")
- (b) ell insurer(s) who have insured vehicle(s) involved in this eccident and the insurers' lawyers/law firms, may/are perretited to collect, use, dictions and/or process my Personal information for one or more of the above Perposes; and
- (ii) my Personal information may/ran be disclosed by any of the insurers and/or GIA to their third party service providers or agasts (including their lawyers/law firms), which may be sted outside of Singaporo, for one or more of the above Purposes.
- (a) my Personal information will also be collected and used to compile distins history for the purpose of freud detection, invastigation and management in present and all future delms.
- (e) the information so collected under (d) above may be shared / disclosed:

 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

W for complying with requirements ander any regulations, laws or court orders.

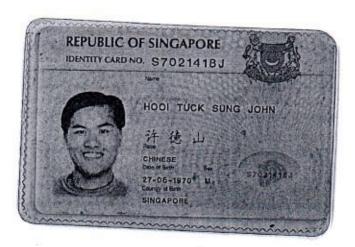
Folicyholeens librature Date & Time:

Ciriver's Signiture (If driver is not the policyholder) Date & Time: Réparting Contro Personnel's Signature

KRIC/FIN No.:

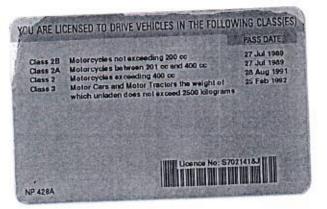
Date of Accident	02 03 2019 Accident Time: 1350 (24-HR-Format)	
Accident Place	: South Bridge Rd Turning into UDD Hokien St	
Vehicle Reg. No. (Car Plate No.)	: SJR 5568H	
Vehicle Make/Model	: VOLKSWAGEN TOURAN	
Insurance Company	ED Policy No. 00 4298	
Owner or Company Name /IC No.	: SEIT SHER LI S7482406D	
Owner or Company Contact No.	9869 8338 Owner's Hp Company Tel	
DRIVER'S Name / IC No.	: HOOI TUCK SUNG JOHN S7021418 J	
DRIVER'S Date Of Birth	: 27/06/1970 DRIVER'S License Pass Date 25/02/1992	
Relationship of Owner & Driver	:Spouse \ Parents \ Children \ Sibling \ Employee\ Others:	
DRIVER'S Address	: 19 BUKIT TERESA CLOSE S(099789)	
DRIVER'S Contact No./ Alt No.	:1) 9889 8338 2)	
DRIVER'S Occupation	(: INDOOR OUTDOOR (e.g. working inside or outside office)	
Email Address	: JOHN 4001 77@ 99400. com. 54	
Weather & Road Surface	CLEAR & DRY RAINING & WET \ AFTER RAIN & WET	
Reporting Type	: Reporting Only \ Claim Other Party Claim Own Insurance	
Number of Passengers (Including Di	river): 04	
Was there any video Captured by ca Exact purpose for which vehicle was	camera: YES (NO) s being used at the time of accident: Private use DVork purpose	
	arty Driver's Particular (if anv)	
Vehicle Reg. No: SMD 2115 P		
Vehicle Make\Model:		
Name Driver:		
IC No. Driver;		
Driver's Contact & Add:		





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N %,





EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg no. 1978-00490-N



#### CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP,189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

## PRIVATE CAR Comprehensive Classic

Certificate No.: DMPPHQ18-004298

Classic Plan - EQ authorized workshop only

Form: MX2 Excess:

1. Index Mark and Registration Number of Vehicles SJR5568H Insured&Named Driver Unnamed Driver

S\$500.00(Section 1 - Own Damage) S\$1,000.00(Section 1 - Own Damage)

YEIDR WindScreen Additional S\$3,000.00 S\$100.00

2. Name of Policyholder

SEIT SHER LI @ ANDREA HOOI

 Effective Date of the Commencement of Insurance for the purpose of the Act 29/06/2018

 Date of Expiry of Insurance 28/06/2019 EQ Insurance-MARS Motor Accident Help Center

6311 3211



5. Person 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 regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment 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 has not been cancelled at the time of accident loss or damage.
- 6. Limitation as to use\*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

- (a) use for hire or reward
- (b) use for racing,pace-making,reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) use for any purpose in connection with the Motor Trade

\*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.

IWE 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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase:

A000322/Neo & Company Insurance Agency Pte Ltd Date of Issue: 22/06/2018 16:09

Authorised Signatory EQ Insurance Company Limited

#### Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

A Member of Citystate