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88339 - C00001 SL: SERVICE SALES -	PC
Mr Chong Wee Lee	GST Reg.No:M28920628X
19 Seletar Green View	Inv.No # B&P 0 Page 1
	Inv.date. : 06/03/2019
	WIP No 57381
Singapore 805164	Veh.In/Out: 05/03/2019
	*Tel.No : Mobile: 90177852
	Reg.No 🕯 SLL1988M
Closed by : Derek Oh Siong Wee	Reg.date . 25/01/2017
Svc Consultant :	Mileage 0
Remarks : Mr Chong Wee Lee	Chassis No: YV1DZ4OLDH2096978
Op.No Description	Mech Qty Price Disc% Pkg Amount G
RH DOOR,RH PROTECTOR,ETC 802 TO TRANSFER REAR RH DOOR PARTS 280 TO CHECK WIRING INCLUDE RESETTING OF ALL ELECTRICAL MODULES SOUND DEADENING PAD DOOR GLASS RUN SEAL DOOR MOULDING CHROME DOOR SEAL ATTACH RHR	0 1000.00 0 1,000.00 S



162.10 S

88339 - C00001 _ SL: SERVICE SALES - PC Mr Chong Wee Lee GST Reg.No:M28920628X Inv.No. . : B&P 0 Page 2 19 Seletar Green View Inv.date. : 06/03/2019 WIP No. . : 57381 Veh.In/Out: 05/03/2019 Singapore 805164 *Tel.No. . # Mobile: 90177852 Reg.No. . # SLL1988M Reg.date. 25/01/2017 Closed by : Derek Oh Siong Wee Mileage . 0 Svc Consultant : Chassis No. YV1DZ40LDH2096978 Remarks : Mr Chong Wee Lee Mech Qty Price Disc% Pkg Amount G op., No Description 27.00 S BLIND RIVET D=4 8*8. 10.0 EA 2.70 125.80 S DOOR CHECK REAR \$80 1.0 EA 125.80 DOOR HINGE UPPER RHF 1.0 EA 162.10 162.10 S

1.0 EA 162.10

		Gross Total.	8,016.30
Labour Total Parts Total Package Total	3,300.00 4,716.30 0.00	Net GST @ 7.0% Total Paid	8,016.30 561.14 8,577.45 0.00
		Please Pay	8,577.45
GST: S=StdRated; O=OutOfScope;	Z=ZeroRated		

DOOR HINGE LOWER RHF

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for efiling.
- 2. Please report correctly the details of the accident to speed up the claims process.
- 3. 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 withholding of material facts may allow insurance companies to repudiate policy liability.
- 5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

Any talse reporting may be referred to the Traffic Police Department	irtment for investigation.
ACCIDENT STATEMENT	
Date and Time of Accident	Date: の丘' 03 19 Time: 09 10 互
Exact Location of Accident	Papular Buildry Hil Carpork
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLL 1988 m
INSURED / POLICYHOLDER (OWN VEHICLE)	
Name of Registered Owner (See Insurance Cert.)	Chong wee hee
Personal Identification - NRIC (Singaporean/PR)	thong wee hee
- FIN/Passport Number	
- Not Applicable	
VEHICLE PARTICULARS (OWN VEHICLE)	
Vehicle Make / Model	Manufacturer V0/V0 Model XC 60 75
Type of Vehicle*	Saloon MPV CRV Van Lorry
	Bus M/cycle Others,
Exact Purpose for which vehicle was being used at time of accident	Goual
Are you claiming under your own insurance policy for repair to your vehicle?	
Vehicle Category*	Private Commercial Motorcycle
INSURANCE COMPANY (OWN VEHICLE)	
Name of insurance Company *	Direct Asia
Type of Policy	Comphensive Third Party Fire & Theft TP Only
Fleet Policy	O Yes No
Policy Number	
Motor CI	
DRIVER	Same as Insured above
Name of Driver	Lee wei Piny
Personal Identification - NRIC (Singaporean/PR)	Lee Wei' Piny 57718391D
- FIN/Passport Number	
Date of Birth	06 dd/ 07 mm/ 1977/yy
Driving Date Pass	18 dd/ 67 mm/ 1978/yy
Year of Driving Experience	Year(s) Month(s)
Occupation	Indoor Outdoor
Gender	Male Female
Contact Number / Mobile Phone / Fax No.	90177864
	90177864 (90177822 Page 1

Address of Driver	19 Selector Given view
Address of Driver	19 Geletor Gween view Postcode (805164)
Email Address	No email
Was driver an employee of the Insured's Company?	Yes No
If No, Relationship of the Driver with the Insured	Eponse
Vehicle Registration Number of Driver's Own	O Yes No
Vehicle Registration Number of Driver's Own Vehicle (if applicable)	
Insurance Company of Driver's Own Vehicle (if applicable)	
GENERAL INFORMATION OF THE ACCIDENT	A.
Type of Collision (Eg. Chain collison, Head-On collision, Side	Gidle Gryine
Swipe, Front to Rear) Weather Conditions	Clear Raining Others
Road Surface	Dry Wet Others,
TOOMITE	O DI O WEL O GLIEFS.
OTHER INFORMATION	
Was any foreign vehicle involved in this accident?	Yes No
Was any body injured in the accident?	O Yes O No bee Kim Indow (M) O Yes O No Gabriel Chan (m)
Was any other vehicle or property damaged?	Tes No hee Kim Intuck (M)
Was there any video captured by Car Camera?	O Yes No Gabriel Chony (m)
Number of Passengers (Including Driver)	04
DETAILS OF POLICE ACTION	
Was the Accident reported to the Police?	Yes No (If Yes, please state which Police Station.)
Police Station Name	
Police Station Address	
Police Station Contact	Tel No. Fax No.
Was notice of intended Prosecution given?	Yes No (If Yes, against whom?)
DETAILS OF OTHER VEHICLE / PROPERTY 1	
Vehicle Registration Number	SM & 9567L
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
Contact Number	
A.d	
Address	
Name of Insurance Company	
Nature of Damage	
No. of Passenger (Including Driver)	
(Note - Please use page 6 if you need to add more vehicles.)	

SKETCH PLAN

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 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 Traffic Police Department for investigation.
- 6. This report will be forwarded by the insurers to the GIA Records Mangement Centre establised 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.
- 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' law yers/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.

Mar D.

- (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.

	ans	
Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date	Witnessed by Reporting Centre Personnel
	& Time	

Sketch Plan

Indicate driver move un
Without Checking

Only
Party
Party
Stationery

Me

I purked my car at Popular HQ building this morning
After I parked my car, I alighted and went to open
the back door for my mother to alight. In order
to a dea your Con many to alicabet for carried
to make way for my mother to alight, tas carport I mired towards the back of my car. Suddenly, I
1 month waters the nach of my constitution of
heard something dropped on to the floor and saw the
other party's car's handle stuck with my car back dos
The other purty has moved his vehicle without checking
his blind spots, hence resulting in this collision.
If I have been negrer to the back cardow, I
could have been injured by the dow knot that flew
out when the other party's car mued on.
our when the other party of car this

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

or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

Witnessed by Reporting Centre Personnel

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
Date Of Report	05/03/2019 19:44
Date Of Accident	05/03/2019 09:05
Exact Location Of Accident	POPULAR HQ BUILDING CARPARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLL1988M
Insured/Policyholder	
Name Of Registered Owner	CHONG WEE LEE
NRIC No	S7510608D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90177864
Alternative Phone No	OTHERS-90177852
Vehicle Particulars	
Manufacturer	VOLVO
Model	XC60-2.0 T5 (A)
Exact Purpose for which vehicle was being used at time of accident	SOCIAL
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 DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number

Cover Note Number

Driver

Name of Driver **LEE WEI PING** NRIC No S7718391D Date Of Birth 06/07/1977 Occupation **INDOOR Date Of Driving Pass** 18/09/1998

Driving Experience 20 YEARS AND 5 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-90177864

Fax Number

Contact Number

EMail Address NOEMAIL Address

19 SELETAR GREEN VIEW

Postcode

805164

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

SIDE SWIPE

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:

: BEH SOO KENG

GENDER:

: FEMALE

Passenger 2

NAME:

LEE KIM HOCK

GENDER:

: MALE

Passenger 3

NAME:

: GABRIEL CHONG

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 ATTACH

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

SMF9567L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Page 2 of 30



Contact us at

Hotline: (65) 6532 2888

E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. : MT/00570622

Type of Coverage / Driver Plan Car Comprehensive (Flexible Plan)

1) Vehicle Registration No. : SLL1988M

Chassis No. YV1DZ40LDH2096978

2) Name of Policy Holder : Chong, Wee Lee

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act 25/01/2019 00:00

4) Date/Time of Expiry of Insurance 24/01/2020 23:59

5) Persons or Classes of Persons Entitled to Drive

(a) Any other person who is driving on the Policyholder's permission.

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use*

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.

*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured : Market Value

Your Excess

 Own Damage Excess
 : S\$ 800.00 (before any applicable GST)

 YIED Excess
 : S\$ 2,500.00 (before any applicable GST)

 Windscreen Excess
 : S\$ 100.00 (before any applicable GST)

Choice of workshop : DirectAsia approved workshops

Finance company / Hire Purchase

Main driver : Lee, Wei Ping

Named driver : None

Important Note: This policy covers any authorised drivers. If you authorise a Young or Inexperienced Driver (YIED) then please note the increased excess above. YIED refers to any driver who is below the age of 30 or has held a driving license for less than 2 years.

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 Com pensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 09/12/2018

Edip Okur

Chief Underwriting Officer

Direct Asia Insurance (Singapore) Pte. Ltd.

IDENTITY CARD NO. S7510608D REPUBLIC OF SINGAPORE



CHONG WEE LEE (ZHANG WEILI)

35-04-1975



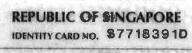


1

NRIC NO. S7510608D

Date of issue 08-08-2006

SINGAPORE 805164 19 SELETAR GREEN







LEE WEI PING (LI HUIBIN)

李慈斌

CHINESE Date of Birth 06-07-1977

06-07-1977 Country of Birth SINGAPORE 1 (10 m)





