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TP Insurer:	Ass't Report by Pax		hymer/Wksp	1		
Proforred Wksp / INC Assign Wksp / QW: (		THE PERSONNEL COMME	Tol:	Fax:		)
TP Particulars: Veh No: SK	C 22626	INC(	)/Non-INC( )			
Owner / Driver: (	3 0-1-0		Tel:		)	
Policy No: ( ) Peri	od: (	) (	Cover Type: (	19101	)	
Confirmed by : (		itet.	Times		)	
Insured/Driver Liability: ( %) [N	ote-Est. Status (WO):	N: 0-20%	; P: 21-79%. P: 1	30-100%]		
	Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is the Owner, which	NO( )				
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1) Apply for Transport Allowance ( )/C	ourtesy Car ( )					
2) QC Check / Post Repair Inspection	( ·)				-,	
3) Upload Resurvey Photo [Repair Cost>\$3	000] ()				<u> </u>	
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Driver/Owner:	3)	TF: Towing Fe	marh Survey	\$120		
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#### SINGAPORE ACCIDENT STATEMENT

# IMPORTANT NOTICE

Fax Number Contact Number

EMail Address

- 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.

- 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	13/03/2019 18:08	
Date Of Accident	09/03/2019 22:00	
Exact Location Of Accident	PIE BEFORE BKE EXIT	
Country/State of Loss	SINGAPORE	
<b>《沙斯·西斯·斯斯·斯斯·斯斯</b>	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKM9525U	
Insured/Policyholder		
Name Of Registered Owner	KEE HUA JOO	
NRIC No	S0225309G	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-92376964	
Alternative Phone No	OTHERS-92376964	
Vehicle Particulars		
Manufacturer	ТОУОТА	
Model	COROLLA ALTIS-1,6 (A)	
Exact Purpose for which vehicle was being used at time of accident		
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	DMPCSN3024771801	
Cover Note Number		
Driver		
Name of Driver	KEE HAN SHENG, KRISTEN	
NRIC No	S8846507E	
Date Of Birth	23/11/1988	
Occupation	OUTDOOR	
Date Of Driving Pass	22/06/2009	
Driving Experience	9 YEARS AND 8 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-92376964	
	ALL CONTRACTOR INCLUDES CONTRACTOR AND A	

OTHERS-92376964

NOEMAIL

Address

BLK 163 YUNG PING ROAD

#15-86

Postcode

610163

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

79

Insurance Company of Driver's Own Vehicle

ૼ

General Information of the Accident

Type Of Accident

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

ambulance?

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

involved in the accident

1

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO YES

Was any other material or property damaged?

was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 2

Number of Passengers (Including Driver)

Passenger 1

NAME:

: PASSENGER

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

PLEASE REFER TO SKETCH PLAN

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

SKS8262C

Vehicle Make/Model/Colour

Details Of Properties Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

GBG1379R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number

SKW7158G

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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)
  - (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 malling 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
- 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.
- 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:

Name:

NRIC/FIN No.:

# PIE BEFORK BKK EXIT

图图图图图

A: 3Km95254

B: SKS 82626

C: GBG1379R

D: SKW71586

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

	FINE ACCIDENT	
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CLARATION		150
e declare the foregoing particulars		
y	are true in every respect.	
	12/02/2019	
yholder's Signature	- 1 1210817001	
& Time:	Driver's Signature  (If driver's senature   Reporting Centre Personnel's Signature	1
V	(" diverys not the policyholder) Namer	Hong
40,44,94	Date & Time: NRIC/FIN No.: LOGA WITH	101

Send/Fax to:	SINGADORE ACC	Submitted CIDENT STATEMENT			
		IFORMATION			
Date of Accident:	1 07/03/19	Time of Accident:	22:00		
Exact Location:	PIK				
V					
		OWN VEHICLE			
Vehicle Registration No.	SILM 95251				
Name of Registered Owner:	Kee Hua J		· · · · · · · · · · · · · · · · · · ·		
NRIC / FIN / Passport no:	5022530				
Vehicle Make:	Toyota	Vehicle Model:	Altis		
Type of Claim:	a topotting only	ord Party			
Vehicle Category:		note Use			
Name of Insurance Co:		na tarping _			
Type of Policy:	Third Party, Fire &	Theft			
Policy Number:					
	n e e e e e e e e e e e e e e e e e e e	RIVER	DESCRIPTION OF THE PARTY OF THE		
	Ker Han Sh	College Service and an experimental property of the College Service Se	Rame as ov		
Name of Driver:	58846509E	Date of Birth:	23/11/1988		
NRIC / FIN / Passport no:	500 1530 110	Driving Pass Date:	23/11/(10)		
Occupation:	9237 6964	The state of the s	Comple		
Contact Number:		Gender: y Pay Road # 15-86	3610167		
Address: Relationship with Owner:	Other: San	y 114 KO22 # 15 - 06	361016		
Type of Collision: Weather Condition:	Clear	Front to Rear			
Road Surface:	Dry				
Was anybody injured?	No	Police Report Made?	No		
No. of passenger onboard (Ir	ncluding driver):	2 male			
	DETAILS OF	OTHER VEHICLE			
	Vehicle 1	Vehicle 2	Vehicle 3		
Vehicle Registration No:	245 8262C	GBG 1379R	SKW71586		
Vehicle Make / Model:	20020				
Name of Driver:					
NRIC / FIN / Passport no:					
Contact Number:	4 0000 ASSESSED AS				
Name of Insurance Co:					
美工程 计图片温度器	DETAILS	OF WITNESS			
Name:		Contact Info:			
HERVERSONS FOR THOUSAND POLICE	DETAILS OF	INJURED PERSON	THE PART OF THE		
	Person 1	Person 2	Person 3		
Name / in which vehicle?:	I elsoil i	TOTOTIL			
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Deluge Ductions Library that the h	nformation given in this report are tr	ue and accurate to the best of my collection	on and I bear full responsibility		



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8846507E





KEE HAN SHENG, KRISTEN



紀 汉

Race CHINESE Date of birth 23-11-1988

39345507E

Country of birth SINGAPORE

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

EFFECTIVE DATE

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

22 Jun 2009

Licence No:S8846507E

NRIC No. S8846507E

24-11-2003

APT BLK 163 YUNG PING ROAD #15-86 SINGAPORE 610163

NP 428A

THIS PASSPORT IS VALID FOR ALL COUNTRIES EXCEPT THE FOLLOWING:





# PASSPORT REPUBLIC OF SINGAPORE

PA Name

Type Country Code Passport No PA SGP E4731973L



KEE HUA JOO

Sex Nationality M SINGAPORE CITIZEN
Date of birth Place of birth 13 FEB 1954 Date of Issue

17 JUL 2014
Modifications
SEE PAGE 2
National ID No S0225309G

SINGAPORE Date of expiry 17 APR 2020 Authority Authority MINISTRY OF HOME AFFAIRS

PASGPKEE<<HUA<J00<<<<<<<<< E4731973L9SGP5402137M2004172S0225309G<<<<32



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Co. Reg. No. 200208384E

MX1F R SN AN0621A Cov.Type: C

MOTOR PRIVATE CAR

CERTIFICATE OF INSURANCE

otor 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)

**ORIGINAL** 

CERTIFICATE No.

DMPCSN3024771801

Engine No :1ZRY033832 Chano: MR053REH104001793

 Index Mark and Registration Number of Vehicle

4. Date of Expiry of Insurance

SKM9525U

AUTOSAFE

Name of Policy Holder

KEE HUA JOO

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

28 April 2018

Named Drivers Ex Sect. I ...... S\$500.00 Additional Ex Other than Named Drivers:

27 April 2019

Ex Sect. I - Age <= 25...... \$\$3,000.00 Ex Sect. I - Age >= 26...... 5\$500.00

\* Age as at date of accident

5. Persons 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 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.

#### 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.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : TOKYO CENTURY LEASING (S) PTE LTD

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.

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:

Authorised Officer

Authorised Signatory