

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In <u>15/03/19</u>	Job description	Date & Time Completed	Done by
Ref No <u>NAT/MSJ19004703/13</u>	SAS e-filing		
Veh No <u>5J59155J</u>	E-mail (w/within 3hrs, AIC 2hrs)		
DOA <u>27/02/19</u> <u>0935</u>	i-Motor Claim Form		
OD TP <u>Reporting Only</u>	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: (M GARAGE) Tel: Fax:)

TP Particulars:	Veh No: <u>5HA3085K</u>	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%; F: 80-100%]	
Year of Registration: ()	Warranty: YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co. ()

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

<u>NA1901964</u>	Invoice Preparation Checklist	Ant (\$) 1st Bill	Ant (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF : Towing Fee \$40/\$45		
Damaged Portion:	4) FT : Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT : Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
Cat 1:	6) TR : Re-inspection \$75		
Cat 2 / 3:	7) N1 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OH*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11) : TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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 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. 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.

ACCIDENT STATEMENT	
Date Of Report	15/03/2019 11:09
Date Of Accident	27/02/2019 09:25
Exact Location Of Accident	NEIL RD B4 BUKIT PASOH RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJS9155J
Insured/Policyholder	
Name Of Registered Owner	SUPREME LEASING & LIMOUSINE PTE LTD
Co Reg No	53287737C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-99999999
Vehicle Particulars	
Manufacturer	TOYOTA
Model	VIOS
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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 HIRE
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	18-MH001493-R02
Cover Note Number	
Driver	
Name of Driver	LIAM MENG TECK,BENEDICT@IBRAHIM LIAM
NRIC No	S1576429E
Date Of Birth	28/01/1963
Occupation	OUTDOOR
Date Of Driving Pass	23/08/1982
Driving Experience	36 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91592517
Fax Number	
Contact Number	
E Mail Address	NOEMAIL

Address	BLK 156 RIVERVALE CRESCENT #04-150
Postcode	540156
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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 ambulance?	NO
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)	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

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	SHA3085K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Record's 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 lodging 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) 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.

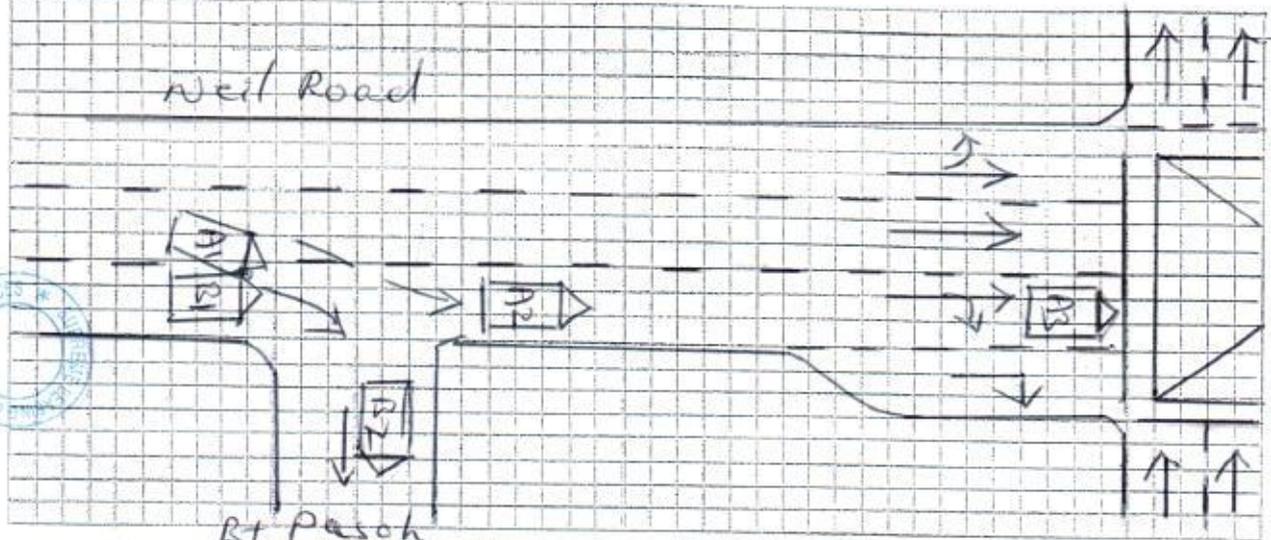


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 27/02/2019 at about 0924 hrs at along Neil Road before Bikit Pasok. I was travelling on the centre lane and had checked that my Right lane was cleared before I change my lane to the Right. Suddenly ^{Right lane} Vehicle (B) appeared at the extreme and making a Right turn into Bt Pasok and I stopped at the 'RED' traffic light at the junction of Cantonment Road. As there was no impact as such I had not make any reporting.

(A) SJS 9155 J
(B) SHA 3085 K

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

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:

Reporting Centre Personnel's Signature
Name: slym 15/03/19
NRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

Accident Date: 27/02/2019	Time: 0924h	(hh:mm) 24 hr format
Location: Neil Road before Bt Pasok Road.		
Vehicle Number: SJS 9155 J		
Insured Name: MPM& LEASING & LIMOUSINE SERVICES		
NRIC/FIN: 53287737C	Contact Number	
Make: Toyota	Model: vios	
Are you claiming under your own insurance policy for repair to your vehicle?		
() Yes If No, Pls select: () Third Party (/) Reporting		
Insurance Company: TOKIO MARINE		
Type of Policy (/) Comprehensive () Third Party Fire & Theft () TP Only		
Policy Number: 18-MH001493-R02		
Name of Driver: LIAM MENG TEH, BENEDICT () Same as Insured		
NRIC/FIN: S1576429E	Contact Number: 9159 2517	
Date of Birth: 27/01/1963		
Driving Pass Date: 23/08/1982		
Occupation () Indoor (/) Outdoor		
Gender (/) Male () Female		
Email Address (/) NO EMAIL		
Address of Driver: B1K 156 Rivervale Crescent #04-150 S(540156)		
Was driver an employee of the Insured's Company? () Yes (/) No		
If No, Relationship of the Driver with the Insured: HUSBY		
() 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 (/) Clear () Raining () Others		
Road Surface (/) Dry () Wet () Others		
Was any foreign vehicle involved in this accident? () Yes (/) No		
Was anybody injured in the accident? () Yes (/) No		
If yes, injured detail		
Was there any video captured by Car Camera? () Yes (/) No		
Was the Accident reported to the Police? () Yes (/) No If yes attach police report		
DETAILS OF 3 rd party Name / Nric Contact		
Veh B	SNA 3085 K	
Veh C		
Veh D		
Veh E		
Veh F		

1 person including driver

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1576429E



Jular
S159153L



Name

LIAM MENG TECK, BENEDICT
@IBRAHIM LIAM

林明德

Race

CHINESE

Date of birth

26-01-1963

Sex

M

S1576429E

Country/Place of birth

SINGAPORE



5326322



NRIC No. S1576429E



Date of issue

10-07-2014

Address

APT BLK 156 RIVERVALE CRESCENT
#04-150
SINGAPORE 540156

SJS9155 L

driver

REPUBLIC OF SINGAPORE



License Number **S1576429E**
Name
LIAM MENG TECK, BENEDICT

Birth Date: 28 Jan 1963
Issue Date: 07 Dec 2012

002129021C



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

	EFFECTIVE DATE
Class 3 Motor Cars= \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	23 Aug 1982

Licence No: S1576429E



SJS9155L
driver

Land Transport Authority



PDVL/TDVL
33 499 80006
263377



VOCATIONAL LICENCE
Licence No : S1576429E
Name : LIAM MENG TECK, BENEDICT

Please visit www.lta.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	13/06/2018





TOKIO MARINE
INSURANCE GROUP
FORM MXI H

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-MH001493-R02 (Private Motor Car)

- | | | |
|--|--|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SJS9155J | Chassis No.: MR053HY9305118716 |
| 2. Name of Policyholder | SUPREME LEASING & LIMOUSINE SERVICES | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 03/10/2018 | |
| 4. Date of Expiry of Insurance | 14/10/2019 | |
| 5. Persons or Class of Persons entitled to drive* | Any person who is driving on the Policyholder's order or with their permission.
The hirer.
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 vehicle is hired.

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 vehicle.

* 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

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

Account: 2500DDA

Insurance Plan:	Third Party Cover Only
Policy Excess:	Excess-Third Party (Sect II) SGD 1,800

Tokio Marine Insurance Singapore Ltd.

Authorised Signature



**PRIVATE MOTOR CAR (FLEET) CLAIM
ACKNOWLEDGEMENT OF CLAIM NOTIFICATION**

28/02/2019

SUPREME LEASING & LIMOUSINE SERVICES
61 UBI AVENUE 2
#02-08 AUTOMOBILE MEGAMART
SINGAPORE 408898

Our Claim No : M1901218
Policy No : MH001493
Date of Loss : 27/02/2019
Your Ref :
Description of Loss : ACCIDENT INVOLVING SJS9155J & SHA3085K NEIL RD >
KAMPONG BAHRU RD NEAR TO BT. PASOH RD

Dear Sirs

Insured Vehicle No.: SJS9155J. Potential Claim from: SHA 3085 K

1. As you have not reported this accident, please proceed to do so at one of the Reporting Centres. All accidents need to be reported within 24 hrs.
2. Enclosed copies of the Third Party's GIA report, for your perusal.

Yours faithfully,

Tokio Marine Insurance Singapore Ltd.

This is a computer generated document. It requires no signature.

Liam meng Teck Benedict
Driver fault.

email - Best petrol & Diesel supply etc Ltd

Handler Dillen Senthilan



**SINGAPORE
POLICE FORCE**



T/20190227/2059

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No. T/20190227/2059

CONTINUATION OF REPORT

Driver			
Name	BAHARUDIN BIN MURAD	ID No.	[REDACTED]
Related Vehicle	SHA3085K (Car)	Contact No.	[REDACTED]
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 27/02/2019 at about 9:24am, I was driving, alone, in my taxi bearing the registration number: SHA3085K. I was driving along Neil Road towards Kampong Bahru Road, before Bukit Pasoh turn.

Suddenly, a Toyota Vios, White in colour, which was driving on the left lane beside me, switched to my lane, overtook me and just sped off. The driver did not stop the vehicle. Prior to this accident, there was no dispute whatsoever.

I was in a state of shocked thus I did not give chase or press my horn. I with caution drove over to the road shoulder and stopped there to make a check on my vehicle.

The damages, to my vehicle are scratches along the left side of my vehicle.

I have an in-vehicle camera installed my vehicle and it captured the vehicle that was involved with the said accident. The vehicle was bearing the registration number: SSJS9155J.

I was not injured during the accident.