ASS. REC. BY: MOICES	
J.	ASSIGNMENT SIQ 161K 1 /9
From: Date:	Veh No: Yr Regn: / / /
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
DD TP / WS / TP RES / OD RES / EVA / INV / MV	Truck Trailer or CA
To Inspect Vehicle No: SJQ161K	Make: Monde Shuttle Hybrid ac 1496
at Workshop m/s	Colour 3 kule A/C: Insured / Std / NI / NA
of the state of th	Sp.Reading /2034 T/Radio: Insured / Std / NI / NA
nsured: 57 9 89684	Eng/No:
A STATE OF THE STA	CINO: 6772001781.
Policy No.	Gen. Cond. Good / Fair / Poor / Burnt
Claims No.	Steering: Inorder / Jammed / Leaked / Burnt or
Sum Insured: Excess:	Brake: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	
Make of Veh:	18/11/11
(Policy Condition)	R:
Remark: The veh had commenced its N/S	O/S DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 9 mm R/Bal. mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 9 mm L/Bal. 9 mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. 24/3/18 D.O.I. 25/3/18
Lum Sum: 20 % 3 Val.: Yes or No	Survey held at
5.7380	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction L 1 A 4 4 4 9 6 4 9	
1 /	/
/4/19 2/5 # 1800 confind	with Alex.
((1))	ance the same of the Table Sale
Date/Time, File Pass to?	Days Of Repair:
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Fee:
1) : Final Report Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: Transportation:
Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: Transportation:
: Final Report Date/Time, File Return to? Add	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: Transportation:

FASTECT AUTO PTE LTD **BLK1 KAKI BUKIT AVE 6** #01-46,48,50 AUTOBAY SINGAPORE 417883 VEHICLE NO:SJQ 161K **PARTICULAR** QTY 1350 \$1,660.00 REAR BUMPER 1 PCS \$170.00 REAR BUMPER SIDE RETAINERS @\$85.00 2 PCS \$50.00 . REAR BUMPER CLIPS 1 SET \$220.00 X REAR BUMPER REINFORCEMENT 1 PCS \$691.00 X REAR END PANEL 1 PCS \$280.00 2005-REAR BUMPER REVERSE SENSOR 1 SET \$3,071.00 LABOUR CHARGES: \$50.00 20 TO CHECK WIRING \$80.00 50 TO DISMANTLE & REPLACING REVERSE SENSOR \$120.00 60 TO DISMANTE & REFIX SEAT, CUSHION UPHOLSTERY 11 \$50.00 × TO SPRAY RUST PROOFING \$800.00 400 LABOUR FOR PANEL BEATING & REPLACING PARTS \$800.00 400 TO PUTTY & SPRAY PAINTING \$4,971.00 TO

> LKK with Consultants hence notify the Repairer of the following:

- markers before other spray painting
- many damaged part(s) during resurvey
- s many art subject to confirmation
- Thus perly survey is on a "Without Prejudice" basis
- An investment of calloris) is allowed
- S. to I are law substitution in the mean resurveyed and is autifued to linear approval from Insurance Company

Acknowledged by Repairer

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Mobile Number

EMail Address

Fax Number Contact Number

Gender

- 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	25/03/2019 16:11
Date Of Accident	24/03/2019 16:00
Exact Location Of Accident	BEFORE TUAS CHECKPOINT TWRDS S'PORE
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJQ161K
'nsured/Policyholder	
Name Of Registered Owner	LIM YEW CHYE
NRIC No	S0495739C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96822528
Alternative Phone No	OTHERS-96822528
Vehicle Particulars	
Manufacturer	HONDA
Model	SHUTTLE HYBRID 1.5 AUTO
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5106955869
Cover Note Number	
Driver	
Name of Driver	LIM WEI JIE KELVIN
NRIC No	S0495739C
Date Of Birth	19/04/1984
Occupation	INDOOR
Date Of Driving Pass	08/08/2003

15 YEARS AND 7 MONTHS

(LOCAL) +65-96208185

OTHERS-96208185

MALE

NOEMAIL

Address BLK 269A PUNGGOL FIELD #12-177

Postcode 821269

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

-

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

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?

YES

Was any injured conveyed to hospital by

NO

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)

2

Passenger 1

NAME: LIEW YAN NI

GENDER:

: FEMALE

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 BELOW STATEMENT/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 SJQ8968Y

Vehicle Make/Model/Colour TOYOTA COROLLA ALTIS 1.6 AUTO

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 10

DETAILS OF INJURED PERSON 1

LIM WEI JIE KELVIN Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

SJQ161K YES

Was this injured conveyed to hospital by ambulance?

BLK 269A PUNGGOL FIELD #12-177

Address Postcode

659921

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.
- 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.
- 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.
- 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) 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 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:
 - 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.

2 5 MAR 2019

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: IDAC KAKI BUKIT(VAC) 23 KAKI BUKIT AVE 4

Reporting Ce**@inglapsonsel's 592% a**ture Name: Tel: 67416697

NRIC/FIN No.: Fax; 67492305 Email: vackb@singnet.com.sg

SKETCH PLAN			-	-		
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		ry respect.			2	5 MAR 2019
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declare the foregoing parti	culars are true in eve	ry respect.		Repo	DAC KA 23 KAK rting cesing	KI BUKIT(VAC) I BUKIT AVE 4
declare the foregoing parti	culars are true in eve	ry respect.		Repo	DAC KA 23 KAK 23 KAK rting centre	KI BUKIT(VAC)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	5739C
Vehicle No.:	SJQ161K
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Mar 2019
Vehicle Make:	HONDA
Vehicle Model:	SHUTTLE HYBRID 1.5 AUTO
Primary Colour:	Blue
Manufacturing Year:	2018
Engine No.:	LEB7102470
Chassis No.:	GP72001781
Maximum Power Output:	101.0 kW (135 bhp)
Open Market Value:	\$22,230.00
Original Registration Date:	15 Jan 2019
First Registration Date:	15 Jan 2019
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$13,122.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Jan 2029
PARF Rebate Amount: Intended COE Rebate Details	\$9,841.00
COE Expiry Date:	14 Jan 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$32,200.00
COE Rebate Amount:	\$31,568.00
Total Rebate Amount:	\$41,409.00

The information contained herein is correct as at 25 Mar 2019

OK

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date: 23.04.2019

China Taiping Insurance Singapore Pte Ltd 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SJQ 161K / SJQ 8968Y ON 24.03.2019

We are the authorized repair workshop for the owner of motor vehicle no: SJQ 161K , which was involved in the captioned accident with your insured vehicle no: SJQ 8968Y . The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1)	Cast of	Domair	(in alucia)	of CCT)
1)	COSLOI	керан	(inclusive	e of GST)

- 2) Loss of Rental
- 3) GIA Search Fee

S	2,106.00
\$	2.00
\$	180.00
S	1,926.00

We enclosed herewith the following documents to support the claims:

- a) Final Repair Invoice
- c) GIA Search Result
- e) GIA Report
- g) Insurance Certificate

- b) Car Rental Invoice / Agreement
- d) Letter of Authorisation, etc...
- f) I/C & Driving Licence
- h) Vehicle Registration Log Card

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,

Jason Tang (jason@fasteclfauto.com.sg)

For Fastech Auto Pte Ltd

TAX INVOICE

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

Tax Invoice: 20989

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn: Motor Claim Department

Date

:23.04.2019

Vehicle No SJQ 161K

Make/Model : HONDA SHUTTLE

Chassis/Eng# :

Accident Date : 24.03.2019

Claim No

Reference

:0319 -20989

Policy No

Amount

To proceed on lump sum repair

S\$

1800.00

E. & O. E.

Total: S\$ GST @ 7% : S\$

1800.00 126.00

Amount Due : SS

1926.00

for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay

Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: LIM YEW CHYE

Invoice : DCR-2019-03-32

Date: 26.03.2019

Agreement No: 20569 Payment Term: LOD

DESCR	IDTION	VI.
THE SUR		N

AMOUNT

Rental charges for vehicle : SGZ 6121A (0319-20989)

180.00

Rental Period from 25.03.2019

to

26.03.2019 .

E. & O. E.

Total \$

180.00

LINA PANG

for Dynamic Car Rental

Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 20569

ADDRESS NAME (SU495739C)			REG. No.	MAKE MODEL:		
			SG 261214	DIES	EL PETROL	E 1/4 1/2 3/4
			KM IN		26 03 2019	O 4 IZUN
			KM		DATE & TIME OF	UT_
			OUT		25.03.201°	(0 2 42 pm
			DRIVEN		1,000 ,000	
NAMED DRIVER LIM	Wei Jie Ke	lyin				
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE		HOURS	@SS	
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	1	DAYS	ess 180.00	\$ 180.00
ADD NAMED DRIVER				WEEKS	@S\$	
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	M	ONTHS	@S\$	
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	BY INITIALLING, R AGREES TO PAY A	DD FEE	SUB-TOTAL	# 180.00
MPORTANT NOTES:			FOR COLLISION DA WAIVER (C.D.W.)	MAGES		
This vehicle is scenced to carry 0 to refund will be given for vehicle to refund will be given for period	e returns early.		- Control of the state of the		TOTAL RENTAL	
	der section I & II in any accident p	lus loss of earnings while damaged vehicle	100		DELIVERY FEE	
ehicle return during office hour o	only.				COLLECTION FE	E
o Service on Public Holiday and XCESS:	Sunday		X			
Sec I - Used in Sipore Only :SGI Sec II - Used in Sipore Only :SGI			PER DAY PER V	VEEK	PER MONTH \$	Hast II
Sec I - Used Outside S'pore On! Sec II - Used Outside S'pore On	y:SG04000		BY INITIALLING, R	ENTER		15.017 - 3
Viscreen Excess In Sipore: SGO Viscreen Excess Outside Sipore			AGREES TO PAY AI	DD FEE		
DDITIONAL CONDITIONS:	w return we have		INSURANCE (P.A.I.)			
Geographical areas: Singapore Driver must be: a) 16 years old and above;	-a vvest masayssa.					
b) holding a valid relevant class	s of driving license.		X		1	
a) age 22 to 23 years old; b) age 66 to 70 years old;	s of S\$1,000 is applicable for any		PER DAY PER V	VEEK	PER MONTH \$	
c) with driving experience of 1 license.	year to less than 2 years in Sin	gapore on the relevant classes of driving	PREPAYMENT		TOTAL CHARGE	
Additional All Claims excess of a) is 18 years old to 21 years old b) is 71 years old and above an		ned/unnamed drivers who:	CHECK		DEPOSIT	
	is than 1 year on the relevant clas	ises of driving license.	CASH			
		all expensive and important items to be ponsible for any reporting of such losses.	J. San J.		NETT CHARGE	
Hirer is liable to pay first \$4000 is under repair.	under section (& II in any accident	plus loss of earning while damage vehicle	RECEIPT NO.		NETT CHARGE	
liter is responsible for Addit			AMOUNT DUE / REI	UND		
HAVE READ THE TERMS	GE / INJURY claims. AND CONDITIONS ON BO	OTH SIDES				
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	AMIC CAR RENTAL		A	DIA DESCRIPTION OF THE PERSON NAMED IN COLUMN	DRIVER'S SIGN	



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No:

GR-19-046119

Date of Request:

25/03/2019

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd 1 Kaki Bukit Avenue 6 #01-48 AutoBay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

Enquiry Date

25/03/2019

-quiry By

Tang Kok Wee, Allan

∀ehicle No.

SJQ8968Y

Accident Date

24/03/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJQ8968Y	China Taiping Insurance (Singapore) Pte. Ltd.	22/02/2018-28/05/2019	6389 6111

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

s is a computer generated document and requires no signature.



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-19-046119

Date of Request:

25/03/2019

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd 1 Kaki Bukit Avenue 6 #01-48 AutoBay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

Enquiry Date

25/03/2019

—quiry By

Tang Kok Wee, Allan

. ∠ Vehicle No.

SJQ8968Y

Accident Date

24/03/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque

	DATE : 15.03 2019
	to : china Taiping Insurance (Singapore) Pte 14d.
	RE : ACCIDENT INVOLVING VEHICLE NO. STO 1616 STO 8968Y
	ALONG Refore Trus Checkpoint Twds sipore. ON 24 03 2019
	of (NRIC No./ROC No.) S0495739 C of BIK 626 Hougang Avenue 8 # 12-168 Singapore 530626 owner of vehicle no. SJQ 161 K in consideration of M/s FASTECH AUTO PTE LTD repairing my/our vehicle SJQ 161 K at my/our instruction and hereby authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever amount settled/payable by the insurance Company and/or third party or to commence legal proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use, etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and all claimed and/or settled shall belong to them absolutely.
•	I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.
	Signature of Owner : Name of Owner :

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.
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- 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.

aforesaid.	STATE OF GRAPHER STATE OF THE CONTROL OF COMMUNICATION OF THE PROPERTY OF THE STATE OF THE PROPERTY OF THE PRO
	ACCIDENT STATEMENT
Date Of Report	25/03/2019 16:11
Date Of Accident	24/03/2019 16:00
Exact Location Of Accident	BEFORE TUAS CHECKPOINT TWRDS S'PORE
Country/State of Loss	SINGAPORE
1	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJQ161K
nsured/Policyholder	
Name Of Registered Owner	LIM YEW CHYE
NRIC No	S0495739C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96822528
Alternative Phone No	OTHERS-96822528
Vehicle Particulars	
Manufacturer	HONDA
Model	SHUTTLE HYBRID 1.5 AUTO
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5106955869
Cover Note Number	
Driver	
Name of Driver	LIM WEI JIE KELVIN

Name of Driver LIM WEI JIE KELVIN NRIC No. S0495739C Date Of Birth 19/04/1984 Occupation INDOOR Date Of Driving Pass 08/08/2003 Driving Experience 15 YEARS AND 7 MONTHS Gender MALE Mobile Number (LOCAL) +65-96208185 Fax Number

Contact Number OTHERS-96208185

EMail Address NOEMAIL

Address

BLK 269A PUNGGOL FIELD #12-177

Postcode

821269

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

-

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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
Was any body injured in the Accident?

YES

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)

2

Passenger 1

NAME:

: LIEW YAN NI

GENDER:

: FEMALE

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 BELOW STATEMENT/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

SJQ8968Y

Vehicle Make/Model/Colour

TOYOTA COROLLA ALTIS 1.6 AUTO

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 10

DETAILS OF INJURED PERSON 1

Name

LIM WEI JIE KELVIN

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SJQ161K

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

Address

BLK 269A PUNGGOL FIELD #12-177

Postcode

659921

SKETCH PLAN

IMPORTANT NOTICE

- 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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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.
- 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) 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 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:
 - 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.

2 5 MAR 2019

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: IDAC KAKI BUKIT (VAC)
23 KAKI BUKIT AVE 4
Reporting Centing Pagapane 1 5 10 3 ture

Name: Tel: 67416697 NRIC/FIN No.: Fax: 67492305 Email: vackb@singnet.com.sg

GIARMC ScetchPlanForm_V3

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Policyholder's Signature Date & Time:

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

SIAPMC SketchPlanForm_v3

2 5 MAR 2019

IDAC KAKI BUKIT (VAC)
23 KAKI BUKIT AVE 4

Reporting Certifications 415933
Reporting Certification 415933
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ann

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S0495739C



Name

LIM YEW CHYE



林 友 财 Race

Race

Date of Birth 22-06-1946

Country of Birth





NRCNo \$0495739C



13-07-1994 Blood Group Date of issue

APT BLK 626 HOUGANG AVENUE 8 SINGAPORE 1953

530626











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)

Certificate Number: 5106955869

Cover : drivo CLASSIC

: SJ0161K

Chassis Number

: GP72001781

2. Name of Policyholder

: LIM YEW CHYE

3. Effective Date of Insurance

: 15 Jan 2019

4. Expiry Date of Insurance

14 Jan 2020

5. Persons or Classes of Persons entitled to drive#

1. Index mark and Registration Number of Vehicle

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her 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#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)

: \$\$2,000

EXCESS (SECTION 2)

: S\$1,500

WINDSCREEN EXCESS

: S\$100

ADDITIONAL EXCESS

: N/A

UNNAMED DRIVER EXCESS

: PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP

: NO : YES

INSURE WITH COE

: YES

NCD PROTECTION

: NO

TRANSPORT ALLOWANCE **EXCESS WAIVER**

: NO

PRIMARY DRIVER

: LIM YEW CHYE

NAMED DRIVER (1)

: N/A

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: HONG LEONG FINANCE LIMITED

SUM INSURED

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: DICKSON INSURANCE AGENCY PTE. LTD. (00000573832)

Date of Issue

: 11 Jan 2019 13:21 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	5739C	
Vehicle No.:	SJQ161K	
Vehicle to be Exported:	Yes	
Intended Deregistration Date:	25 Mar 2019	
Vehicle Make:	HONDA	
Vehicle Model:	SHUTTLE HYBRID 1.5 AUTO	
Primary Colour:	Blue	
Manufacturing Year:	2018	
Engine No.:	LEB7102470	
Chassis No.:	GP72001781	
Maximum Power Output:	101.0 kW (135 bhp)	
Open Market Value;	\$22,230.00	
Original Registration Date:	15 Jan 2019	
First Registration Date:	15 Jan 2019	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$13,122.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	14 Jan 2029	
PARF Rebate Amount: Intended COE Rebate Details	\$9,841.00	
COE Expiry Date:	14 Jan 2029	
COE Category:	B - Car above 1600cc or 97kW (130bhp)	
COE Period(Years):	10	
QP Paid:	\$32,200.00	
COE Rebate Amount:	\$25,760.00	
Total Rebate Amount:		

The information contained herein is correct as at 25 Mar 2019

ОК