

NATIONAL Assessment Centre Services.

(ref 1 Jan 00)

MAN9039804

Date In: 26/03/2019 11:33	Job description	Date & Time Completed	Done by
Ref No: NBA/9M/1900534914	SAS e-filing		
Veh No: 2G 655 E	E-mail (e-filing sheet, AIC sheet)		
D.O.A: 24/03/2019 13:55	1-Motor Claim Form		
OID: TP- Reporting Only	1-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	1-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: WSP 1728

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: \$1,000 () / \$2,000 ()

() 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: ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()

MAN902203

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engi-In-Charge):

Additional Comments:

Date:

1) AR: Accident Reporting (\$30)

2) DA: Damage Assessment (\$100) INC (\$50)

3) TP: Towing Fee \$40/\$45

4) PT: Follow-Through Survey \$120

5) PT: Follow-Through Survey (Resurvey) \$35

6) TR: Re-inspection \$75

7) NI: Idao DA + SMRT Survey \$160

8) NTUC Additional Services:

9) NI: Idao Mobile

10) NI: Idao Mobile

11) NI: Idao Mobile

12) NI: Idao Mobile

13) NI: Idao Mobile

14) NI: Idao Mobile

15) NI: Idao Mobile

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Fee Charged

Fee Charged

Fee Charged

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Fee Charged

10-DEC-2018

10-DEC-2018

10-DEC-2018

10-DEC-2018

10-DEC-2018

10-DEC-2018

10-DEC-2018

10-DEC-2018 MON 08:09

FOR:

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	26/03/2019 10:34
Date Of Accident	24/03/2019 13:55
Exact Location Of Accident	ALONG ORCHARD ROAD BEFORE TURNING TO KILLINEY RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG6552E
Insured/Policyholder	
Name Of Registered Owner	QUALITY PTE LTD
Co Reg No	-
Email Address	KSTAN1107@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91876212
Alternative Phone No	OFFICE-91876212

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MJ001406-R00
Cover Note Number	

Driver

Name of Driver	TAN KWAI SENG
NRIC No	S1107953I
Date Of Birth	19/04/1955
Occupation	OUTDOOR
Date Of Driving Pass	16/11/1983
Driving Experience	35 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91876212
Fax Number	
Contact Number	OTHERS-91876212
Email Address	KSTAN1107@GMAIL.COM

Address BLK 153 MEI LING STREET
#10-28
Postcode 140153
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) 2
Passenger 1
NAME: : PASSENGER
GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES
If Yes, Please state which Police Station
Police Station Name QUEENSTOWN N.P.C
Police Station Address ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190324/2069

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Remarks/ Reasons: COULD NOT RETRIEVE
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBP1728
Vehicle Make/Model/Colour NOT ACCURATE
Details Of Properties
Vehicle Category MOTORCYCLE
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

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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) 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:

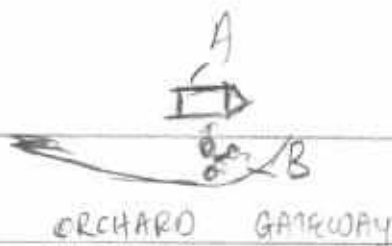
NRIC/FIN No.:

28/03/2018

SKETCH PLAN

ORCHARD ROAD

A) SLG 6552E
B) FBP 1728
NOT ACCURATE



KILLINAY ROAD

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

MS PRINCE TO POLICE REPORT
7/2019 0324/2069

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:
NRIC/FIN No.:

28/03/2019
Rashid Umar



SINGAPORE POLICE FORCE



T/20190324/2069

1 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20190324/2069

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/03/2019 15:19	Vide Report No.:	Station Diary No.: 46
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Informant's Particulars

Name of Informant: TAN KWAI SENG			Address: APT BLK 153 MEI LING STREET #10-28 SINGAPORE 140153		
ID Type / ID No.: NRIC NO / S1107953I			Contact No.: Home/Office: Mobile: 91876212		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 63	Date of Birth: 19/04/1955	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3,4 Date of Expiry:		

General Information of the Accident

General Information of the Accident:				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/03/2019 13:55	Type of Location: Straight Road
Location: Along Road 1 ORCHARD ROAD Along orchard road before turning into Killiney Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBP1728 (Not Accurate)	Motorcycle			Black		0
SLG6552E	Car	TOYOTA		Silver	Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

CONTINUATION OF REPORT

Driver			
Name	TAN KWAI SENG	ID No.	S1107953I
Related Vehicle	SLG6552E (Car)	Contact No.	91876212
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 24/03/2019, I was deployed as a grab driver for SLG6552E. At about 1355hrs, I was driving along Orchard Road at the 2nd lane, I then checked my rear it was clear, I signaled and slowly move to the right lane, it was when I heard a bang on my right rear passenger door. I stopped my car aside to make a check, the right passenger door was Slightly dented however it still can be open. The motorcycle that hit my vehicle did not stop and just drove off. The vehicle registration number of the said motorcycle is FBP 1728, however I am unsure of the last alphabet.

I would like to mention that no one is injured. I have a in car camera. My vehicle SLG6552E is a rental vehicle which belongs to Quality Pte Ltd..



**SINGAPORE
POLICE FORCE**



T/20190324/2069

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

3 of 3

Report No. T/20190324/2069

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: D / Sgt 2 SURAIYAH PARVEEN BINTE HABIB MUHAMAD	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 24/03/2019 15:19 <i>Ks</i>
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case:
Authentication Stamp NP168	

REPUBLIC OF SINGAPORE
CARD NO. S11079531



TAN KWAI SENG
CHINESE

65453300 64673300

TING MOTOR TRADING
THINK ONE MOTOR TRADING

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S11079531
Name TAN KWAI SENG

Birth Date 19 Apr 1955
Issue Date 18 Dec 2002

000034859G

Land Transport Authority

VOCATIONAL LICENCE
Licence No : S11079531
Name : TAN KWAI SENG

Please visit www.lta.gov.sg to check the status of this vocational licence

0854634

S11079531

APR 27 153 MEI LING STREET #10-28
SINGAPORE 140153

APR 11 11-04-2002

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class	Description	Issue Date
Class 2	Motor cars < 3500 kg with ≤ 7 passengers, exclusive of HIC	16 Nov 1983
Class 3	Motor cars > 3500 kg with ≤ 7 passengers, exclusive of HIC	11 May 2005
Class 4	Heavy motor cars and motor tractors > 2500 kg	

S / No.: 9000031703

Licence No: S11079531

NP 420

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	18/07/2018



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-MJ001406-R00 (Private Motor Car)

- | | | |
|--|-----------------|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SLG6552E | Chassis No.: JTDGG20W40J005612 |
| 2. Name of Policyholder | QUALITY PTE LTD | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 03/10/2018 | |
| 4. Date of Expiry of Insurance | 02/10/2019 | |

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: 2397DDA

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 2,000	
	Excess-Third Party (Sect II)	SGD 2,000	
	Windscreen Excess	SGD 100	
Financial Interest:	LAKE VIEW CREDIT PTE LTD		

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: KNAN19039304 Vehicle Registration No: SCF 6552 E

Name (as shown in NRIC): Tan Kuan Siah NRIC/FIN/Passport No: S11079537

(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate

Address: _____ Singapore ()

Contact (Tel): _____ Mobile No.: 9187612

Email Address: _____

Date of Accident: 24/03/2017 Time of Accident: 13:55

Place of Accident: Along Orchard Rd off Tanjong Pagar Rd to Kallang Rd

Insurance Company: Tokio Marine

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

① To change from Reporters To Third Party Claims



Policyholder / Driver's Signature
Date:

[Signature]

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