REF:	A16/
SS. REC. BY: MCTUS	ASSIGNMENT /
	/ S K / V \ T / Yr Regn:
rom: Date:	Type: M.Car / M.Cycle / Bus Van / Lorry / Taxi / Prime Mover /
stimated Cost:	Truck / Trailer or
DD (TP/WS/TP RES/OD RES/EVA/INV/MV	Make: NISSAN NV310 c.c 2488
To Inspect Vehicle No: (7 57 / 454	Colour A/C. Illisured of the
at Workshop m/s	Sp.Reading 77260 T/Radio: Insured / Std / NI / NA
of Olaszi	
Insured: SJV 9175/2	Eng/No: JNIMC2E2620007629
Policy No.	Gen. Cond. Good / Fair / Poor / Burnt
Claims No.	Steering: Inorder / Jammed / Leaked / Burnt or
Sum Insured: Excess:	All saled ( Burnt Of
(Client's Record)	050 4/8/200
Make of Veh:	19 cc KIF
	1) To one
(Policy Condition)	R:  O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC/ OHTSU / PIR / SUMI /
Remark: The veh had commenced its	
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear 7 mm
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. / mm K/Bal. / mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. mm
Est. Repairs: 2 days Res.: Yes or No	D.O.A. 26/3/19 D.O.I. 28/3/11
Lum Sum: 19 % 3 Val.: Yes or No	Survey held at
1 cm	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
	VA (125 a) (
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	7,24
pate / Time Action / Instruction  have his have been Ling 3  re/ (415 \$ 790.32 Confirm	1 of Plan
	0 474 77001.
19/419 \$ 140.56 Confine	
19/419 \$ 190.56 Confine	
19/4/19 \$ 190.5°C Confine	
19/4/19 \$ 190.5°C Confins	
19/919 \$ 190.5°C Confins	
19/419 \$ 190.5°C Confins	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
Date/Time, File Pass to?  T: Preli. Report  T: Final Report	Days Of Repair:
Date/Time, File Pass to?  1) Dete/Time, File Return to?  : Preli. Report : Final Report	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:
Date/Time, File Pass to?  : Preli. Report : Final Report	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:
Date/Time, File Pass to?  1) Dete/Time, File Return to?  : Preli. Report : Final Report	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  Stree:  Survey Fee:  Transportation:  Stree:  Survey Fee:  Transportation:  Stree:  Transportation:  Stree:  Survey Fee:  Transportation:  Stree:  Survey Fee:  Transportation:

		N	of Arthornel
FASTECT A	UTO PTE LTD		Llale
BLK1 KAKI I	BUKIT AVE 6		2013/18
#01-46,48,50	0 AUTOBAY		-4/2/11
SINGAPORI	E 417883	2	17 3790.32
VEHICLE NO:			day.
QTY	PARTICULAR NOTE ITEM		5
1 PCS	REAR BUMPER		\$681.30
1 PCS	REAR BUMPER SIDE HOLDER O/S		n → \$89.00 文
1 SET	REAR BUMPER CLIPS	197	Nu \$35.00
1 PCS	TAILLAMP O/S 20 9.80	102	\$ CA \$421.00 \$1,226.30
	LABOUR CHARGES:		
	TO CHECK WIRING		\$50.00 20
	TO DISMANTLE & REFIX REVERSE SENSOR		\$80.00 570
	LABOUR FOR PANEL BEATING & REPLACING PARTS		\$300.00 250
	TO PUTTY & SPRAY PAINTING		\$300.002 (2
	\$200,502.000 ft)		TO \$1,956.30

P-244.80 102 2-220:32 10h-470.00

LKK outs Consultants hance notify the Repairer of the following:

- To resurvey selected the spray painting
- To chipley dampaed part(s) during resurvey
- · Parts trices are subject to confirmation
- \* Third party survey is on a "Without Prejudice" basis
- No inegal modification(s) is allowed.
- Supplementary familial must be resurveyed and
   is subjected first opproval from Insurance Company

Acknowledged by Repairer

## 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

Date:

16.04.2019

AIG Asia Pacific Insurance Pte Ltd Chartis Building 78 Shenton Way #07-16 Singapore 079120

Attn: Motor Claim Department

Dear Sir/Madam,

# ACCIDENT INVOLVING VEHICLES: GBF 7254H / SJV 9175K ON 26.03.2019

We are the authorized repair workshop for the owner of motor vehicle no: GBF 7254H , which was involved in the captioned accident with your insured vehicle no: SJV 9175K . 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.

3)	GIA Search Fee	S	1,027.64
2)	Loss of Rental	S	2.00
1)	Cost of Repair (inclusive of GST)	S	180.00
	. C. Luius of GST)	S	845.64

We enclosed herewith the following documents to support the claims:

- a) Final Repair Invoice
- c) GIA Search Result
- e) GIA Report
- g) I/C & Driving Licence
- i) Vehicle Registration Log Card

- b) Car Rental Invoice / Agreement
- d) Letter of Authorisation, etc ...
- f) Police Report
- h) Insurance Certificate

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@fastechauto.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

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Tax Invoice: 20996

Date

:16.04.2019

Vehicle No Make/Model : NISSAN NV350

:GBF 7254H

Chassis/Eng#

Accident Date : 26.03.2019

Claim No

Reference

:0319 -20996

Policy No

Amount

S\$

790.32

To proceed on parts by parts repair inclusive of knocking ,spray painting labour charges and etc.

E. & O. E.

Total: S\$

790.32 55.32

GST @ 7% : S\$

Amount Due : SS

845.64

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: WHITE HORSE MARKETING

Invoice

: DCR-2019-03-30

Date: 29.03.2019

Agreement No: 20571 Payment Term: LOD

DESCRIPTION

AMOUNT

Rental charges for vehicle : SGZ 6121A ( 0319-20996 )

180.00

Rental Period from 28.03.2019 to

29.03.2019 .

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

#### NITAL TERMS AND CONDITIONS

No. 20571

REMIER'S/DRIVER'S SIGNATURE

Name with the M LI (TRAAM)		The state of the s		MODEL:				
ADDRESS		SG 261211	DIESE		E 1/4	1/2	3/4	
		KM IN		29 03 2019	01	201	M.	
			KM OUT		28 . 03 . 2019	O	11-13	sam
			KM		TIME USED			
			DRIVEN	_				
MAMED DRIVER YUNG	Sau Lina .							
BIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE		HOURS	@SS		-070	1000
\$2605 242 D -	DATE OF ISSUE	PLACE OF ISSUE	1	DAYS	ess 180 .00	#	180	.00
ADD NAMED DRIVER				WEEKS	@SS			
	DATE OF EXPIRY	PLACE OF ISSUE		MONTHS	Ø5\$			
DRIVING LICENCE NO	2000		BY INITIALLING, F	RENTER	SUB-TOTAL	H	180	00
PASSPORT NO DATE OF ISSUE PLACE OF ISSUE			AGREES TO PAY ADD FEE FOR COLLISION DAMAGES		300 10111	711	15000	
IMPORTANT NOTES:			WAIVER (C.D.W.)			-		
This vehicle is licenced to carry 04	returns early.				TOTAL RENTAL			
No refund will be given for period I Hirer is liable to pay first \$4000 unit	left in vehicle. der section I & II in any accident p	lus loss of earnings while damaged vehicle			DELIVERY FEE			
is under repair. Hirer is liable to pay all parking fer					COLLECTION FI	EE		
Vehicle return during office hour o No Service on Public Holiday and	nly. Sunday		X					
EXCESS:			PER DAY PER	WEEK	PER MONTH \$			
"Sec I - Used in S'pare Only SGE "Sec II - Used in S'pare Only SG "Sec I - Used Outside S'pare Only			*	Ya Nasa		-		
"Sec II - Used Outside S'pore On	ly :SGD4000 100		BY INITIALLING, AGREES TO PAY	ADD FEE				
Wiscreen Excess Outside Sipore	SGD200		FOR PERSONAL AN INSURANCE (P.A.					
ADDITIONAL CONDITIONS: Geographical areas: Singapore Driver must be:	& West Malaysia.							
a) 18 years old and above;      b) holding a valid relevant class	s of driving license.		X		SHIP COMMON TO			
Additional Own Damage Excess	ss of S\$1,000 is applicable for an	y named/unnamed drivers who:	PER DAY PER	WEEK	PER MONTH s			
a) age 22 to 23 years old. b) age 66 to 70 years old.	year to less than 2 years in Si	ngapore on the relevant classes of driving			TOTAL CHARG	_		
license.			PREPAYMENT		TOTAL CHARG			
a) in 18 years old to 21 years o			CHECK		DEPOSIT	_		
b) is 71 years old and above a c) with driving experience of le	iss than 1 year on the relevant ca	asses of driving license.	CASH					
<ul> <li>Upon returning the replacement removed away from this replacement</li> </ul>	ent vehicle, you must ensure the coment vehicle. We/I will not be r	at all expensive and important items to be esponsible for any reporting of such losses.	RECEIPT NO.		NETT CHARGE			
* Hirer is liable to pay first \$4000	under section I & II in any accide	ont plus loss of earning while damage vehicle						
is under repair.				A San Landson				
Hirer is responsible for Add	itional \$4,080.00 Excess		AMOUNT DUE /	REFUND		1.1		
to the THIRD PARTY DAM	AGE / INJURY claims.	BOTH SIDES						
OF THIS RENTAL AGREE	MENT AND AGREE THER	REOF.						
SIGNED BY THE PARTIES	HERETOON THE		DAY (	)F				
					GASE M	d		
				-	I	m		

DYNAMIC CAR RENTAL



#### 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

#### RECORDS MANAGEMENT CENTRE

#### Third Party Insurer Enquiry

Our Ref No:

GR-19-047961

Date of Request:

27/03/2019

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

27/03/2019

Enquiry By

Tang Kok Wee, Allan

TP Vehicle No.

SJV9175K

Accident Date

26/03/2019

quiry Result			- In the second
-	Insurer	Period of Insurance	Insurer Tel. No.
IP Vehicle No.	Insurer	00/00/00/10 04/00/2000	65-6419-3000
C N/D17EV	AIG Asia Pacific Insurance Pte, Ltd.	22/02/2019-21/02/2020	03-0418-3000

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.

This is a computer generated document and requires no signature.



# 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-19-047961

Date of Request:

27/03/2019

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** 

27/03/2019

Enquiry By

Tang Kok Wee, Allan

TP Vehicle No.

SJV9175K

Accident Date

26/03/2019

ESCRIPTION	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



for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date. Further, the settlement terms herein should not be used as an evidence to prejudice to the claimant's personal injuries claim and/or other uninsured losses claim arising of the subject matter in this action.

# RELEASE VOUCHER (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

wen. Fastech Auto Pte Utd
have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte. Ltd.
("name of surveyor") with respect to the amount claimed for for vehicle no. GBF 32SYH that was damaged pursuant to the accident which occurred vehicle no/s STY 9135K (location) involving
This is pursuant to the inspection conducted on(date) at "the workshop".
of vehicle no. (IF 1254) to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".
We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte. Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to
We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.
This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdication over any dispute arising out of the same.
Dated thisday of(month) 20(year)
TO TO TO THE STATE OF THE STATE
Signed by AIG appointed surveyor  Chopped & Signed by "the workshop"



# AUTHORIZATION TO ACT (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

1. White Horse Marketing	("the third party claimant"
of 111 North Bridge Road # 21-01	
owner ofGBF 7254H	(vehicle no.) hereby authorize
Fastech Auto Pte 2td	
("the workshop") to act for me with	respect to my claim for repair costs and/or
rental and/or loss of use ("claim") for	r my vehicle no that was
damaged pursuant to the accident w	hich occurred on 16 03 2019 (date) along
Simei Ave Twds Tampines Ave 5	(location)
involving vehicle no/s	
favour of the workshop.  I further acknowledge that any sett	aim with payment cheque/s being made in lement the workshop may reach on my without admission of liability basis insofar er vehicle/s is concerned.
Date thisday of _	(month) 20(year)
Styr & Styr	Con Sept 155 July 1
Signed by "the third party claimant"	Signed by "the workshop"

#### SINGAPORE ACCIDENT STATEMENT

#### 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 witholding 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.

- 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	28/03/2019 14:09
Date Of Accident	26/03/2019 18:20
Exact Location Of Accident	SIMEI AVE TWDS TAMPINES AVE 5
Country/State of Loss	SINGAPORE

	DETAILS OF OWN VEHICLE
--	------------------------

Vehicle Registration Number GBF7254H

Insured/Policyholder

Name Of Registered Owner

WHITE HORSE MARKETING

Co Reg No

Email Address

NOEMAIL

Mobile Phone No

(LOCAL) +65-93397863

Alternative Phone No

OFFICE-93397863

**Vehicle Particulars** 

Manufacturer

NISSAN

Model

NV350

Exact Purpose for which vehicle was being used at

time of accident

COMMERCIAL

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

19-MT001111-R01

Cover Note Number

#### Driver

 Name of Driver
 YUNG SAU LING

 NRIC No
 \$2605242D

 Date Of Birth
 12/09/1955

 Occupation
 OUTDOOR

 Date Of Driving Pass
 16/09/1991

Date Of Driving Pass

27 YEARS AND 6 MONTHS

Driving Experience Gender

FEMALE

Mobile Number

(LOCAL) +65-93397863

Fax Number

Contact Number

**EMail Address** 

NOEMAIL

Address

BLK 124 TAMPINES ST 11 #08-402

Postcode

521124

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

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?

YES

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)

Passenger 1

NAME:

: CHAN YUK KWAN

GENDER:

: MALE

**Details of Police Action** 

Was the accident reported to the police?

YES

Police Station Name

If Yes, Please state which Police Station

BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY:

SINGAPORE

Police Station Address Police Station Contact

TEL NO: 1800-2449999 - FAX NO: 62447258

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH DRIVER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJV9175K

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Page 2 of 16

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **DETAILS OF INJURED PERSON 1**

Name

YUNG SAU LING

Approximate Age

Injuries Sustain

HEADCHE, SHOULDER, NECK

Injured person in which vehicle?

GBF7254H

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

#### **DETAILS OF INJURED PERSON 2**

Name

CHAN YUK KWAN

Approximate Age

Injuries Sustain

HEADCHE, SHOULDER, NECK

Injured person in which vehicle?

GBF7254H

YES

Were seat belts worn? Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

#### Accident Sketch Plan

#### 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 'tawyers/law firms, the Adonestary 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;
  - (li) 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.

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

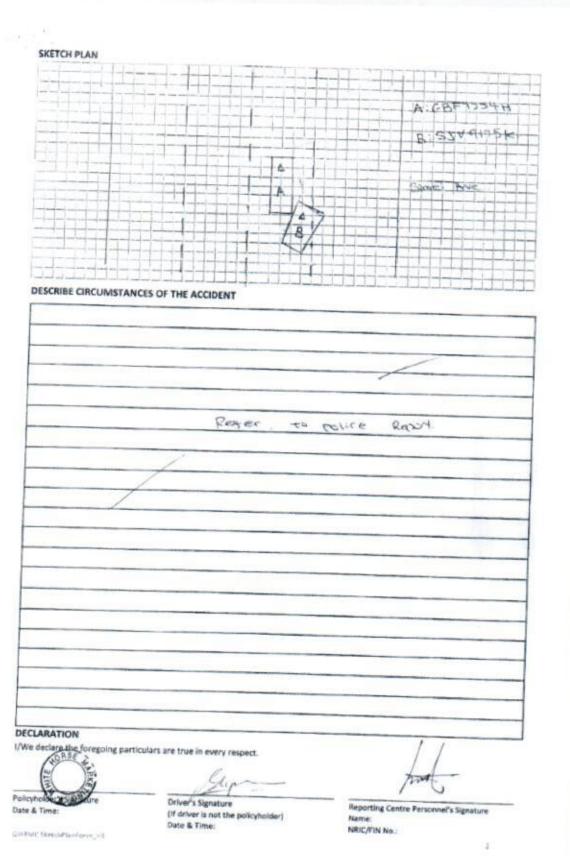
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GARRAC StationFlanForm\_VS

#### Accident Sketch Plan



#### POLICE REPORT





Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999 1 of 3 Report No. T/20190327/2158

REPORTO	F A TRAFFI	C ACCIDENT			
Date/Tim 27/03/20	e Report 1 19 19:05	Made	Vide Report No.: Station Diary N 95		
Informan	t's Partic	ulars			
	Informant		Address APT BLK 124 TAMPINES ST 521124	REET 11 #08-402 SINGAPORE	
ID Type / NRIC NO	ID No. / S26052	42D	Contact No.: Home/Office:	Mobile: 93397863	
Nationalit BRITISH	The state of the s	L OVERSEAS	Email:		
Sex: Female	Age: 63	Date of Birth: 12/09/1955	Type of Informant: Driver		
Race: Chinese	1		Language: Institution / School Nam English		
Occupation SELF EM	on: IPLOYED		Driving Licence Information: Class: 3	Date of Expiry	

Type of Accident:	Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 26/03/2019 18:20	Type of Location Straight Road
Location: Along Road 1 SIMEI AVENI Simal Avenue Weather:	JE towards Tampines A	Road Surface:		Road Speed Limit:
		Dry		
Clear		The second secon		
Clear Traffic Flow: One Way		Traffic Control: Traffic Light - Wo	LEGIT CO.	Traffic Volume: Heavy

Vehicle No	Туре	Make	Color	Condition	No of Passenge
GBF7254H	Van	NISSAN	Brown	Slightly Damaged	1
SJV9175K	Car	TOYOTA	Silver		0

Details of Person Involved	THE STATE OF THE S
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

#### POLICE REPORT





Police Station Of Origin Bedok North N.P.C 30 Bedok North Road SINGAPO

2 of 3 Report No. T/20190327/2158

30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

CONTINUATION OF REPORT

Name	YUNG SAU LING		ID No		\$2605242D	
	The state of the s					OEGOE-TELF
Related Vehicle	GBF7254H (Van)			Contact No.		93397863
Hospital/Clinic	CHUA MEDICAL CENTRE PTE LTD			Class Drivin Liceni Expir	g	Class: 3 Date of Expiry: NIL
Date Treatment			Date Disci		Maria Carlos	
		03	Degree of			
Passenger	<b>的是我的人。</b> 这个特定是是自己的	2000年	CLERK FIRM	<b>拉约</b> 加加	NAME OF STREET	并是我们是PF45公司PP
Name	CHAN YUK KWAN			ID No		S2605241F
Related Vehicle	GBF7254H (Van)			Contact No.		93397863
Hospital/Clinic	CHUA MEDICAL CENTRE PTE LTD			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	27/03/2019 Date Dis		Date Disch			
In of Once arous	ed Medical Leave   0	3	Degree of		Slight	

#### Brief Details.

On 26 March 2019 at about 6.24pm, I was travelling on the 2nd lane from the right of Simei Avenue towards Tampines Avenue 5 in my Nissan van (License Plate: GBF7254H). Suddenly, I heard some noise and felt a jerking motion from the right rear side of my vehicle. I realized that a silver car (License Plate: SJV9175K) had side swiped against the right side of my van. I sounded my horn but the driver drove off on the 1st lane without stopping. I only have the vehicle's license plate and not the driver's details. I am not sure of the driver's gender or race.

The right rear light was damaged and had paint transfer on the casing. The right rear bumper had some scratches.

There was no Traffic Police or Ambulance at scene. On 27 March 2019, both me and my husband went to the doctor's. I am suffering from headache and my husband is suffering from shoulder stiffness. Both of us are also unable to sleep. We were each given 3-day MC by the doctor.

#### POLICE REPORT





Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

3 of 3 Report No. T/20190327/2168

CONTINUATION OF REPORT

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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: G / Sr Staff Sgt MUHAMED SHAMIR S/OHAMID GHOUSE	Signature Of Informant.
Signature Of Interpreter: Not applicable	Date/Time: 27/03/2019 19:05
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case:
NP168	us









#### Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T (65) 6221 6111 F (65) 6221 4355 / (65) 6224 0895 E: tmis@takiomarine.com.sg W:www.tokiomarine.com

Amember of the



#### 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.: 19-MT001111-R01 (Comm Vehicle Carry Own Goods)

1. Index Mark and Registration Number

GBF7254H

Chassis No.: JN1MC2E26Z0007629

of Vehicle

2. Name of Policyholder

WHITE HORSE MARKETING

3. Effective date of the Commencement of Insurance for the purposes of the Act

20/02/2019

4. Date of Expiry of Insurance

19/02/2020

Persons or Class of Persons entitled to drive\*

Any person who is driving on the policyholder's order or with 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\*

- 1) Use in connection with the policyholder's business.
- 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business
- 3) Use for social domestic and pleasure purposes.

The policy does not cover-

- 1) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

« Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Fisks 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: 2009DDA

Insurance Plan:

Comprehensive Approved Workshop Plan

Limit for total loss or theft:

Prevailing Market Value

Own Damage Claims

SGD 750 SGD 100

Policy Excess: Financial Interest:

Windscreen Excess TAN CHONG CREDIT PTELTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

#### > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID: Vehicle Details	5800M
Vehicle No.:	GBF7254H
Vehicle to be Exported:	Yes
Intended Deregistration Date:	28 Mar 2019
Vehicle Make:	NISSAN
Vehicle Model:	NV350 PANEL VAN 2.5 5AT 5DR EURO V
Primary Colour:	Brown
Manufacturing Year:	2016
Engine No.:	YD25411905A
Chassis No.:	JN1MC2E26Z0007629
Maximum Power Output:	*
Open Market Value:	\$25,460.00
Original Registration Date:	20 Feb 2017
First Registration Date:	20 Feb 2017
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$1,273.00
PARF Eligibility:	Ne
PARF Eligibility Expiry Date:	No
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	\$0.00
COE Expiry Date:	19 Feb 2027
COE Category;	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$47,001.00
COE Rebate Amount:	\$37,121.00
Total Rebate Amount:	\$37,121.00

The information contained herein is correct as at 28 Mar 2019

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# > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	44" HONOLE-DOLLAND IN
Owner ID Type:	Business
Owner ID:	5800M
Vehicle Details	222227
Vehicle No.:	GBF7254H
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Mar 2019
Vehicle Make:	NISSAN
Vehicle Model:	NV350 PANEL VAN 2.5 5AT 5DR EURO V
Primary Colour:	Brown
Manufacturing Year:	2016
Engine No.:	YD25411905A
Chassis No.:	JN1MC2E26Z0007629
Maximum Power Output:	2
Open Market Value:	\$25,460.00
Original Registration Date:	20 Feb 2017
First Registration Date:	20 Feb 2017
Transfer Count:	0
Actual ARF Paid:	\$1,273.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	67.7
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	TOWN TOWN
COE Expiry Date:	19 Feb 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$47,001.00
COE Rebate Amount:	\$37,121.00
Total Rebate Amount:	\$37,121.00

The information contained herein is correct as at 28 Mar 2019

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