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### 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.

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 perties.
- 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	02/04/2019 16:03
Date Of Accident	17/03/2019 09:35
Exact Location Of Accident	BEDOK SOUTH AVE 1 TOWARDS NEW UPPER CHANGI RD
Country/State of Loss	SINGAPORE
<b>《古典》,《古典》,《古典》</b>	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGH8310C
Insured/Policyholder	
Name Of Registered Owner	TAN SEE LIN
NRIC No	S0061101H

Email Address NOEMAIL

 Mobile Phone No
 (LOCAL) +65-97331101

 Alternative Phone No
 OTHERS-97331101

Vehicle Particulars

Manufacturer TOYOTA

Model COROLLA ALTIS-1.6 (A)

Exact Purpose for which vehicle was being used at PRIVATE USE

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken REPORTING ONLY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 5071975020-03

Cover Note Number

Driver

Name of Driver LOW KAM SENG

 NRIC No
 S0027282E

 Date Of Birth
 05/05/1953

 Occupation
 INDOOR

 Date Of Driving Pass
 06/01/2015

Driving Experience 4 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97331101

Fax Number

Contact Number OTHERS-97331101

EMail Address NOEMAIL

Address

BLK 28 ALEXANDRA ROAD

#32-12

Postcode

158744

SPOUSE

Was driver an employee of the Insured's Company NO

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

NO COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

NO 2

Was any body injured in the Accident?

NO NO

NO

2

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NAME:

WIFE

Passenger 1

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

ON 18/03/2019 I RECEIVED A LETTER FROM NTUC SAYING THAT I HAVE BEEN INVOLVE IN AN ACCIDENT ON 17/03/2019 WHICH I REALLY DID NOT KNOW ABOUT ANY ACCIDENT THAT ALL

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

SHC3227H

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

### 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.
- 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.
- 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)

l 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.

Policyholder's Signature Date & Time: Driver Sanature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signat

Name:

NRIC/FIN No

Muknows Coursion

IBE CIRCUMSTANCES OF THE ACCIDENT	
RAFFIL W SIMFMAM)	
	/

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

Driver a stanature (If priver is not the policyholder)

Date & Time:

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Consider By/Date

2/2019		Claim Handling(	Claim Task )	
	NAC BURIT MERAH BUDATAN TANDAHAL ESSESSHBAT CENTRE SERVICE S BRAFIT MERAH) on DI Apr 2017 16:27	Phobas	Normal	Photos 3019-4-2
21	NAC_BURIT_MERAN_RIGHTAL HATIONAL HISTORIAN CENTRE SERVICE SERUHT MERANI) on 02 Apr 2019 16:27	Physics	Septemb	Section 2019-4-5
	NAC_BURIT_HEATH_BUDGPAC NATIONAL RESEESMENT CENTRE SERVICE IS (RURIT MERAH)) on DZ Apr 2019 (8:27	PRINTER	Normal	Plates 3019-4-2
	MAC_HURIT_MERAH_BEGG761 NATIONAL ASSESSMENT CENTRE SERVICE B_IRLINIT MERAH() on 02 Apr 2014 16:37	#HV/ball	Normal	Photos 2019-9-2
1	NAC_BURT_MERAH_BIDETAL NATIONAL MISSESSMENT LENTILE SERVICE 5 (BURT MERAH)) on IT2 Apr 2019 18:27	Protes	Normal	Profiles 20159-4-2
9	BAC_BURT MERAH GODD'S NATIONAL ADDRESSMENT CONTR. SERVICE \$ (BLWIT MERAH) on 02 Apr 2019 16:26	Montane	Northwal	P1000x 2919-4-2
2	NAC BURIT, MERAN BROBTH NATIONAL ASSESSMENT CENTRE SERVICE S IBJAIT MERANJI OR DZ ADT 1019 16-26	Physica	Numiral	Priotas 2018-4-3
3	NAC_BURTT_HERAM_BOOKING NATIONAL ASSESSMENT CENTRE SERVICE S (BURTT HERAM)) on 02 Set 2019 16-26	Francis	fermal	Phone 2019-4-2
	NAC_BURIT_MERAH_NUDEFIS: NATIGINAL ASSESSMENT CENTRIC SERVICE S (BLACT MERAH)) on 82 Apr 2019 14-26	Ottobus	Shome	Printus 2015-4-3
193	NAC BURIT MERAM (BD0676) NATIONAL ARRESSMENT CENTRE SERVICE 5 (BURIT MERAM)) on R2 Aur 2019 16 28	SAS	Agend	Sed 2010-4-2
1.00	HAC BORTT HERAY HODE NO NATIONAL ASSESSMENT CENTRE SERVICE S (BURTT HERAH)) on 97 Apr 2019 15.19	IMIGC/ Chiving License	Normal	heldC/ Driving License 2016-4-2

Finder Date

Display in New Window | Scar and solkrading





Traffic Police 10 Ubi Avenue 3 Singapore 408865 Tel +65 6547 0000 www.police.gov.sg

Date: 25 MAR 2019



RX111722625SG

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Our Ref: S0027282E

LOW KAM SENG BLK 28 ALEXANDRA VIEW UNIT 32-12 SINGAPORE 158744

նց**իլ**ընկինիկիկիկիկ

Dear Sir / Madam

# RESULT OF DIPS 1 RETRAINING COURSE AND SUSPENSION OF DRIVING LICENCE

We are pleased to inform you that you have passed your DIPS 1 retraining course on 22 Mar 2019. Your suspension period has been reduced from 12 weeks to 01 weeks.

- 2 Please surrender your driving licence to the Licensing Branch at Traffic Police on weekdays from 8.30am to 1.00pm and from 2.00pm to 5.00pm within 14 days from the date of this letter.
- 3 You are reminded that driving under suspension is a serious offence that carries a fine not exceeding \$5,000 or an imprisonment for a term of 12 months or both.

Yours faithfully

# HEAD TESTING AND LICENSING BRANCH THAFFIC POLICE

This is computer generated and does not require a signature.



Redde Oth Are! towards New Upp Charge Rd.

Our Ref: MT/CA/TP/059/1036423-001/CY/VU

18 Mar 2019

TAN SEE LIN 204 JALAN EUNOS #05-49 EUHABITAT SINGAPORE 419546 Ma Khim

Dear Policyholder

CLAIM NUMBER: MT/1036423-001

ACCIDENT INVOLVING SGH8310C / SHC3227H on 17 Mar 2019

0945A-@

IDE -

We would like to inform you that a claim for S\$1,206.48 has been made against your motor policy.

We need to respond to this claim within seven days. We would appreciate it if you could provide us:

- a. additional evidence, if any, such as accident photographs, video clips or witnesses' statement
- b. information on whether you are making a claim against the other party

We wish to remind you that under this motor insurance policy, you are required to report the accident, whether there is damage or not, within 24 hours or the next working day after the accident at any of our reporting centres. If you have not done so, please report this accident to us immediately. Otherwise, we regret to inform you that we may not be able to handle the claim on your behalf.

You need not respond to us if you have already reported the accident and do not have any further information.

We wish to remind you not to admit liability, make offer or payment without informing us and getting our approval. If you are making a claim against another party or have instructed your workshop or lawyers to act on your behalf, please update us on the developments. This is important as any liability undertaken by you may have serious implication on the third party claim against you, and may result in us not being able to handle the claim for you.

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at motor@income.com.sg.

Yours sincerely

Goh Peng Hong

Manager

Motor Insurance

## REPUBLIC OF SINGAPORE IDENTITY CARD NO. S0027282E





LOW KAM SENG



CHINESE

05-05-1953

SINGAPORE









**VOCATIONAL LICENCE** Licence No : S0027282E Name : LOW KAM SENG

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

5525552



21-08-2015

BLK 28 ALEXANDRA VIEW #32-12

SINGAPORE 158744

NRIC No: \$0027282E

Date: 12/04/2018

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 12

Description TAXI VL

Issue Date

11/10/2018





### Certificate of Insurance

Certificate Number: 5071975020-03	Cover : Third Part
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (	MALAYSIA)
ROAD TRANSPORT ACT, 1987 (MALAYSIA)	
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENS	SATION) RULES, 1960
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENS	ATION) ACT (CHAPTER 189)

1. Index mark and Registration Number of Vehicle

y, Fire & Theft

: SGH8310C

Chassis Number

: MR053ZEC107122456

2. Name of Policyholder

: TAN SEE LIN

3. Effective Date of Insurance

: 23 Jun 2018

4. Expiry Date of Insurance

: 22 Jun 2019

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/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 business or profession.

#### This Policy does not cover

(a) Use for hire or reward.

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

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

(d) 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)	: N/A
EXCESS (SECTION 2)	: N/A
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
PRIMARY DRIVER	: TAN SEE LIN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: LIEN CHONG ENTERPRISES PTE LTD
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

; HUANG GUOQING TERRY (00000573375)

Date of Issue

: 20 Jun 2018 18:38 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive