NATIONAL Appessment Centre	Services, put 1 Jan	ios. MUAIGOGIE	3
Dute In: 1/A(200) 16:96	Jeb description	Dute &Time Complete	d Dono by
er No NBA/LIP (9006 (9) 14	SAS c-filling		
(ch No: SMA, U359 E	E-mail (wjole tim, Alc	2hrs)	*
DON: 10/00/2019 19:00	i-Motor Claim Fort		
Non- Mariant Man	I-Motor W/O (Within	OD 2hts, TP (hts):	
OD (TP) Reporting Only	i-Photo Uploaded		
	Assessment/Survey R	eport	
TP Insurer:		Hand to Owner/Whan	
roforrod Wkup / INC Assign Wksp / QW: (district the second sec	Toli	Faxt 1)
P Paintigulars: Veh No: Sq	F74852 .	MC(,)/Non-MC()	
Owner / Driver: (Telt	
	fod: () Cover Typo: ()
Confirmed by t (· Dat)
Insured/Driver Liability: (%) [Note-Est Status (WO):	N: 0-20%; P: 21-79%. P:	30-100%]
		10()	
Excess: (\$ ') Londing: \$1,0	00()/\$2,000() -	- Trans.
THE ASSESSMENT OF THE PROPERTY	是是自然的政策的	以印则以后以从从内内内 对	ZAME ALLES
) Walk-In Customer : Oustomers Info	rmation strictly Confiden	tial & Strictly NO rafer of repa	101,
) Total Loss Case : to e-mail Insur-	er URGENTLY.		
Drive-In ()/ Towed-In (); Invoice	e: YES() / NO(); Towing Co: (ALICE TO A STATE OF THE PARTY O
		White State of the	ENAMERICAND
Apply for Transport Allowance ()/	Courtesy Car ()		
2) QC Check / Post Repair Inspection	(·)		
) Uplosd Resurvey Photo [Repuir Cost> \$	3000] ()	<u> </u>	
			
Injury :			William -
Salatalijas (2000) patraus (2000) (224) vidas (2000)	SELECTION OF HER RANGES OF THE	•	
			PENTALON KYANGO)
UM902621			A STANCES
NA1902671		TRI Assident Juporting (530)1	ING (350)
NH19026 11	机构设置的数据的数据的数据 (1)	OAt Demara Amanmant (\$100)	240243 . ING (290)
MH19026 11	3): 5):	OA! Demage Assument (\$100); CH: Towing Pre PT: Follow-Through Survey (Resurvey	240243 240243 1120 2018 JUNESES
MH19026 II	(1) (1) (1) (1) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	OA: Demage Assument (\$100); CHITOwing Pre PT; Follow-Through Survey PT; Follow-Through Survey (Resurvey Parsialming assingt INCOmity (wof 10)	ING (350) \$40/\$45 \$1120 \$300 Jin 2000) \$755
MH19026 11 introduction of the control of the cont	(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	OA! Demage Asserment (\$100); CHITOwing Fee PT: Follow-Through Survey PT: Follow-Through Survey (Resurvey PT: Follow-Through Survey (Resurvey PT: Follow-Through Survey PT: Follow-Through Survey PT: Re-jaspeotlon NI: I day DA + SMRT Survey	ING (350) \$40/545 \$120 \$300 Jin 2000) \$755
MH19026 II tultificity control entitle in the control No:	(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	OA: Demage Asserment (\$100); CHITOWing Pre PT: Follow-Three th Survey PT: Follow-Three th Survey (Resurvey PT: Follow-Three th Survey (Resurvey PT: Follow-Three th Survey PT: Re-juspeedon NI: Ides DA + SMRT Survey NTUC Additional Services:	TNG (350) \$40/345 \$120) \$300 Jin 2000) 375
hunificate contributes of the control of the contro	(a) (b) (c) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	OA! Demage Asserment (\$100); CHITOWING PRO PT: Follow-Through Survey PT: Follow-Through Survey (Resurvey PT: Follow-Through Survey (Resurvey PT: Follow-Through Survey PT: Re-juspenden NI: Idau DA + SMRT Survey PTUC Additional Services: ON!	TNG (350) 540/345 \$120) \$300 Jin 2000) 375 1, 3160
MH19026 Italinians conficulty and river/Owner: ontact No: arriaged Portion:	(2) (2) (3) (4) (5) (5) (6) (7) (6) (7) (8) (8) (8) (8) (8) (8) (8) (8) (8) (8	OA! Demage Assertment (\$100); CH Towing Pre PT Follow-Through Survey (Resurvey) PT Follow-Through Survey (Resurvey) PT Follow-Through Survey (Resurvey) PT Follow-Through Survey (Resurvey) PT Re-jaspeoulon N1 Idae DA + SMRT Survey NTUC Additional Services:- OD! N5: Countely CH 7 TPT Attown the N6: Espair Co-ordination	TNG (350) 540/345 \$120) \$300 Jin 2000) 375 7, 3160 20 \$10 +00 0 +0 0 1
MAI 1902671 Tentilities and legit in the second of the second on the se	(2) (2) (3) (4) (5) (5) (6) (7) (6) (7) (8) (8) (8) (8) (8) (8) (8) (8) (8) (8	OA! Demage Assessment (\$100); CHITOWING PAP PT Follow-Threegh Survey PT Follow-Threegh Survey (Resurvey PT Follow-Threegh Survey (Resurvey PT Follow-Threegh Survey PT Re-juspeedon NI Idea DA + SMRT Survey NTUC Additional Services: ON! NS: Cauticity DIFT Tot Attowance NS: Cauticity DIFT Tot Attowance NS: Regain Co-addination (\$100); NS: Foat Bendt Juspeedon NS: Foat Bendt Juspeedon Coordination	TNG (\$50) \$107545 \$120 \$300 Jin 2000) \$775 7, \$160 20 \$100 \$20 \$20 \$100 \$
C Checked by (Engr-In-Charge):	4) (1) (2) (3) (3) (4) (4) (5) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	OA! Demage Assertment (\$100); CHITOWING PRE PT Follow-Threegh Survey PT Follow-Threegh Survey (Resurvey PT Follow-Threegh Survey (Resurvey PT Follow-Threegh Survey PT Follow-Threegh Survey PT Re-juspeedon N1 Idae DA + SMRT Survey NTUC Additional Services:- ON! * NS; Courlely CHITTETAtions now NS; Courlely CHITTETATION * NS; Courlely CHITTETATION * NS; Courlely CHITTETATION * NS; PALLECTER Department * NS; DV / Collect Uxcess Congding do * TP MII TP (Noin NO) * Allight NO.	ING (350) \$107543 \$120 \$300 Jin 2000) \$775 7. \$160 \$10 \$10 \$10 \$10 \$10 \$10 \$10

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.
- 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.

aforesaid	ent to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	11/04/2019 16:46		
Date Of Accident	10/04/2019 19:00		
Exact Location Of Accident	TOWARDS TERMINAL 3 ARRIVAL HALL		
Country/State of Loss	SINGAPORE		
D	ETAILS OF OWN VEHICLE		
Vehicle Registration Number	SMA4359E		
Insured/Policyholder			
Name Of Registered Owner	CHEW JUAN NGOH JANET		
NRIC No	S1323108G		
Email Address	HANCARREPAIRS@GMAIL.COM		
Mobile Phone No	(LOCAL) +65-90264698		
Alternative Phone No	OTHERS-90264698		
Vehicle Particulars			
Manufacturer	HONDA		
Model	FIT		
Exact Purpose for which vehicle was being used at	WORKING PURPOSES		

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken

THIRD PARTY PRIVATE CAR

Vehicle Category

Insurance Company

Name of Insurance Company

LIBERTY INSURANCE PTE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

SD18V07031/VPC/R00

Cover Note Number

Driver

Name of Driver CHEW JUAN NGOH JANET

NRIC No S1323108G Date Of Birth 23/09/1958 Occupation OUTDOOR Date Of Driving Pass 25/10/1985

Driving Experience 33 YEARS AND 5 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-90264698

Fax Number

Contact Number OTHERS-90264698

EMail Address HANCARREPAIRS@GMAIL.COM

BLK 452 JURONG WEST STREET 42 Address

#08-160

Postcode 2264

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

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 CLEAR

Weather Conditions Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle) involved in the accident

2

Was any body injured in the Accident? NO.

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO 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

SGF7485Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

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

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.

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.

T	was travelling	staight +	6 T3 as	rival hall		
L	suddenly ve	hide B.	cut into	my lane	1	
	hit onto my	cas.				
			_			

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 Bignature

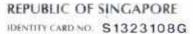
Name:

NRIC/FIN No.:

PERSONAL PARTICULARS

Date of Accident: 10 / 4 /2019	Time of Accident:	6 : 59 (24Hrs)
Vehicle No: SMA 4359 E	Vehicle Make/Model:	Handa Fit-
Exact Location of Accident:	d T3 arrival	hall.
Owner's Name/NRIC: Chew Juan	n Nlgah Janet	I C No: 51323108 G-
Driver's Name/NRIC: Chew Juan	Ngoh Janet	IC No. 513231086.
Driver's Contact: 90264698 -	Insurance Co & Pol	licy No: Liberty Ins. SD18407031/VPG
Driver's Email Address: hancas re		
	0	s/Others specify:
What do you wish to claim (Please circl 1) Own Insurance 2) Other Vehicle (Th	e one only) e one you want to claim ag	painst) 3) Reporting (For Recording Purposes)
Exact Purpose for which the vehicle wa	as being used at time of	accident? (Please circle one only)
Weather Condition & Road Conditions	?	
Clear & Dry / Raining & Wet / After-Ra	in & Wet / Drizzling & V	Vet
Occupation Indoor Outdoor		
Any Injuries? (MC of 3 Days or more, p	police report is required	<u>)</u>
	e station?	
The Other Party (Vehicle B) Details		
Driver's Name/IC:		Vehicle No: SGF 7485Z.
Insurance Company:		Driver's Contact:
(If more than 2 vehicles involved, ple	ase indicate the other p	arty vehicle numbers below)
Other Vehicle (Vehicle C) :		
Independent Witness (If Any):		Contact:
Preferred Workshop (If Any):		Contact:
* If no proper document are produced	IDAC should not file the	e report.

* Information will be discarded after one week.







CHEW JUAN NGOH JANET

刷月碱

CHINESE

23-09-1958

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Discussion Number S1323108G

CHEW JUAN NGOH JANET

Birth Date: 23 Sep 1958 have Date: 05 Sep 2003



2524065

\$1323108G



and the Second

11-11-1994

APT BLK 452 JURONG WEST STREET 42 #08-160 SINGAPORE 2264

NP 428A

TUO ARE LICENSEU TO DRIVE VEHICLES IN THE FULLOWING CLASSIES

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

25 Oct 1988

Licence No: S1323108G



Certificate of Insurance

www.libertyinsurance.com.sq

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)

Name of Policyholder:

CHEW JUAN NGOH JANET

Date of Issue: 10 Jul 2018

Effective Date of Commencement: 07 Jun 2018 00 00

Registration No.:

Chassis No.:

SMA4359E

GK31316435

Certificate No.:

SD18V07031/ VPC / R00

Date of Expiry:

06 Jun 2019 23:59

Type of Certificate:

MX1

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 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

Limitations as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

A) Use for hire or reward.

B) Use for racing, pace-making, reliability trials 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 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.

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).

> For and on behalf of LIBERTY INSURANCE PTE LTD

Approved Insurers

For Information Only:

Coverage(s)

Comprehensive, Unlimited Windscreen, NCD Protection

Sum Insured

MARKET VALUE AT THE TIME OF LOSS

Excess:

Section I - Named Drivers S\$500, Section I - Unnamed Drivers S\$1000, Young, Elderly & Inexperienced S\$3000, Windscreen Excess S\$100

Name of Finance Company:

DBS BANK LTD

Name of Producer:

CAR TIMES INSURANCE AGENCY PTE LTD (A1200-2)