

(waf 1 Jan'05)

MMAL9052973

(C) ~~(S)~~ Reporting Only

Chapman to

TP Insurer:

Confirmed by : (

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 repair

() 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

Date/Time: 2/24/2015 12:40:15 PM

Stimulus Particulars

Driver/Owner:

Contact No. _____

Abstracted in

Damaged Portion: _____

OC Checked by (Engr-[n-CAUSE]):

QC. Checked by (Bing-Lin Chen, etc.)

Auditors' Comments

2.1.1.1. Calculus

213

1) AR: Accident Reporting (330)
2) DA: Damage Assessment (5100)

2) DATE: 01/01/2000	340/341
3) TP: Towing Fee	\$120

4) FT: Follow-Through Survey	
5) FT: Follow-Through Survey (Resurvey)	\$30

6) TR: Re-formation

7) NI: ICAU DA + SMRT Survey	\$16
------------------------------	------

8) NTUC Additional Services: _____
On: _____

*NS: Courtesy Call/Trip Allowance		
*NS: Travel Coordination	2009020	\$1

• 2017: Post Repair Inspection

TP (NU) : TP (Non INC) = 0.1411

9) NIT: Idao Mobile	Free Charged
Invoice dated	

Invoice dated	Fee charged
---------------	-------------

C-DEC-2018 MON 06:09

120122 81711740544

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	22/04/2019 16:21
Date Of Accident	21/04/2019 15:45
Exact Location Of Accident	CROSS JUNCTION OF FLOWER ROAD/KOVAN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA7150G
Insured/Policyholder	
Name Of Registered Owner	KWEK CHOON ENG AGNES
NRIC No	S1752135G
Email Address	AGNESKWEK77@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97887618
Alternative Phone No	OTHERS-97887618

Vehicle Particulars

Manufacturer	HONDA
Model	HRV
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI19V02458/VPC/R03
Cover Note Number	

Driver

Name of Driver	KWEK CHOON ENG AGNES
NRIC No	S1752135G
Date Of Birth	01/08/1966
Occupation	INDOOR
Date Of Driving Pass	22/12/1987
Driving Experience	31 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97887618
Fax Number	
Contact Number	OTHERS-97887618
EMail Address	AGNESKWEK77@GMAIL.COM

Address	31C LOWLAND ROAD
Postcode	547426
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	COLLISION - CROSS JUNCTION
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)	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	SKT6158D
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ONG HUI MIN GEORGINA
NRIC/Passport Number	S7827011Z
Contact Number	98239220
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.
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. 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

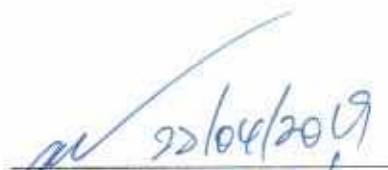
Date & Time:

22 April 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

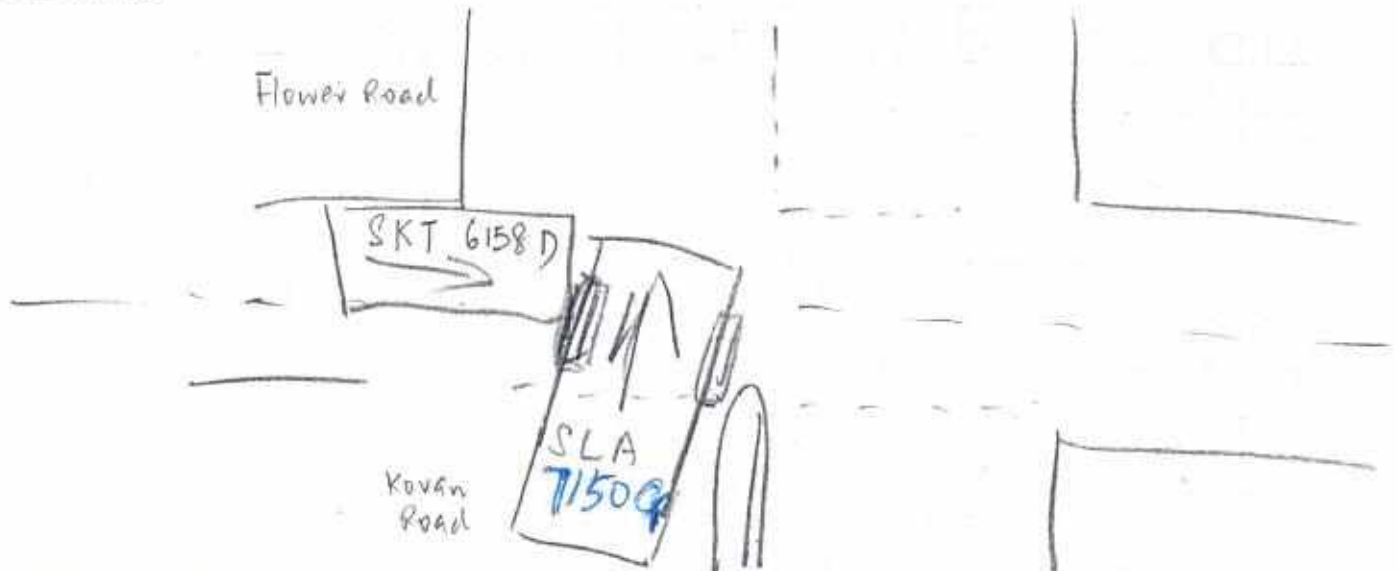
Name:

NRIC/FIN No.:

22/04/2019

Roshan Vithanage

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I stop at the cross road of Kovan Road. Checked for traffic, there was no car from Flower Road or Kovan road. I proceeded to go to Kovan road. Then vehicle SKT 6138D at a high speed, knock me at the left side of my car.

DECLARATION

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

Policyholder's Signature

Date & Time:

22 April 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

22/04/2019
Reshi Winters

Ms Chan

ACCIDENT STATEMENT

ACCIDENT DATE: 21/04/2019 (DD/MM/YYYY), TIME: 15:45 (HH:MM)

LOCATION: Cross junction of Flower and Koran Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLA 7150G
b) INSURANCE COMPANY: LIBERTY
c) POLICY NUMBER: _____
d) POLICY TYPE: COMPREHENSIVE THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: HONDA HR-V
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: PRIVATE / COMMERCIAL / MOTORCYCLE
h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE THIRD PARTY CLAIM / REPORTING ONLY

2. INSURED / POLICY HOLDER

- A) NAME: LWEK CHOON ENG AGNES (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S1752135G CONTACT: 97887618
c) ADDRESS: 31

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* d) DATE OF BIRTH: 01/08/1966 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) DATE OF DRIVING PASS: 31/11/1987

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: CLEAR / RAINING / OTHERS
b) ROAD SURFACE: DRY / WET / OTHERS

6. WAS ANYBODY INJURED (YES/NO)

7. a) REPORTED TO POLICE (YES/NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKT6158D MODEL: HONDA
b) DRIVER'S NAME: ONG HUI MIN GEORGINA
c) NRIC/FIN/PASSPORT: S7827011Z CONTACT: 98239220

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = agneslwek77@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1752135G



KWEK CHOON ENG AGNES

郭俊英

Race

CHINESE

Date of Birth

01-08-1966

Country of Birth

SINGAPORE

Sex

F

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S1752135G

Minor

KWEK CHOON ENG AGNES

Valid Date: 01 Aug 1966

Issue Date: 03 Feb 2004



NRIC No. S1752135G



Valid Date

01-09-1995

Date of Issue

01-09-1995

191 BUKIT TIMAH ROAD #01-01
SINGAPORE 589630

NRIC No. S1752135G

Date: 02/07/2006 (R)

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

VALID DATE

Class 2B	Motorcycles not exceeding 200 cc	11 May 1966
Class 2A	Motorcycles between 201 cc and 400 cc	21 Jul 1967
Class 2	Motorcycles exceeding 400 cc	21 Jul 1967
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 3500 kilograms	22 Dec 1967



NP 426A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1752135G



Name

KWEK CHOON ENG AGNES

郭俊英

Race

CHINESE

Date of birth

01-06-1966

Sex

F

Country/Place of birth

SINGAPORE



5833906



NRIC No. S1752135G



Date of issue

29-11-2017

31C LOWLAND ROAD
SINGAPORE 547428

NRIC No. S1752135G

Date: 17/12/2018

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: KWEK CHOON ENG AGNES	Certificate No.: SI19V02458/ VPC / R03
Date of Issue: 27 Feb 2019	Effective Date of Commencement: 14 Mar 2019 00:00
Registration No.: SLA7150G	Date of Expiry: 13 Mar 2020 23:59
Chassis No.: MRHRU1830FP000837	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
Sum Insured:	MARKET VALUE AT THE TIME OF LOSS
Excess:	Section I S\$600, Additional Excess for Young & Inexperienced Drivers S\$3000, Windscreen Excess S\$100
Name of Finance Company:	OVERSEA-CHINESE BANKING CORPORATION LTD
Name of Producer:	KAH MOTOR COMPANY SDN BERHAD (A1572-7)

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: MA119051973 Vehicle Registration No: SLA 7150C
Name (as shown in NRIC): KWAK CHUAN EAT AGAHS NRIC/FIN/Passport No: S1752135 G
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address: _____ Singapore ()
Contact (Tel): _____ Mobile No.: 9788.7618
Email Address: _____
Date of Accident: 24/06/2019 Time of Accident: 15:45
Place of Accident: Cross Junction of Flower Road / Kovan Road
Insurance Company: LIBERTY

(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:

to transfer from T/P to OWN DAMAGE CLAIMS

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Padi Muthu
NRIC/FIN No.:
Date: 24/06/2019