NATIONAL Assessment Centre	Services	wer i Janoej			
Date In: 06/05/19	Date & Time Completed	Done	by		
Res No. NA/CTI19007895/13	SAS e-filing				
Vch No 54B 9991L	E-mail (within 8	thrs, AIC 2hrs)			State Day
DOA 05/05/19 0730	n Form			VAR CONTRACTOR	
	i-Motor W/O	(Within: OD 2hrs	TP 4hrs)		(Serve)
OD (1P)' Peporting Only	i-Photo Uplo:	aded			5350 100
TP Insurer:	Assessment/Su	rvey Report			
	Ass't Report by	Y Fax / Hand to	Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW; (			Tel: Fa	ax:	
TP Particulars: Veh No:	SLF3523.P	, INC (	)/Non-INC()		
Owner / Driver: (			Tel:	)	
	iod: (	)	Cover Type: (	)	
Confirmed by : (		Date:	Time:	)	
			0%; P: 21-79%. F: 80-1	00%]	
Year of Registration: ( ) V Excess: (\$ ) Loading: \$1,00	Varranty: YES (		)		
General Remarks:-	00 ( )7 32,000		344		
THE CASE AND ADDRESS OF THE WARRANCE THROUGH SHOULD	1.00	SV - Garashagai	Anniel de la company de la	-1398	101192
( ) Walk-In Customer: Customer's infor		ifidential & Str	ictly NO rater of repairer.		
( ) Total Loss Case : to e-mail Insure	r URGENTLY.				
Drive-In ( ) / Towed-In ( ); Invoice	: YES ( ) / N	O();T	owing Co. (		)
Remarks:- (INC hotline: 6788 6616)			Date&Time Completed	Done	by
Apply for Transport Allowance ( )/C	ourtesy Car (	)			
2) QC Check / Post Repair Inspection	( )				
3) Upload Resurvey Photo [Repair Cost > \$3	000] (	)			
Injury:		TRE-DI-			
Date/Time Actions				10.000	
Date/Time Actions	Constant pro-			ACTIVE TO LOCAL	
			1		
***	<del></del>				
NA 1903370		Invoice Pre	paration Checklist	Anit (S)	Amt (\$)
		1) AR : Accident	ACTOR TO BE SEED OF THE SECOND	1st Bill	Add Bill
laimant's Particulars :-		2) DA: Damage	Assessment (\$100); INC (\$8		
Priver/Owner:		3) TF : Towing F 4) FT : Follow-T		\$120	
ontact No:		5) FT : Follow-T	hrough Survey (Resurvey) gainst INC Only (wef 10 Jan 2005	\$30	
Pamaged Portion:		6) TR : Re-inspe	tion	\$75	
3	\$	7) N1 : Idac DA 8) NTUC Addition		\$160	
C Checked by (Engr-In-Charge):		OD*		65	
		*N5: Courtesy *N6: Repair C	Car / Tpt Allowance	\$10	
uditors' Comments :-		*N7: Post Rep	nir Inspection	\$25	
at 1:			lect Excess Coordination (Non INC) against INC	\$5 \$20	
	10 45 - 14 Try (00 Tr 125 - 77) 15	9) N12: Idae Mo	bile	30	
at 2/3:	Invoice dated Fee Charged Invoice dated Fee Charged				

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Fax Number Contact Number

**EMail Address** 

- 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.
- 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

	ACCIDENT STATEMENT		
Date Of Report	06/05/2019 12:36		
Date Of Accident	05/05/2019 07:30		
Exact Location Of Accident	BLK 38 BEDOK SOUTH RD CARPARK DRIVEWAY		
Country/State of Loss	SINGAPORE		
D	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SGB9991L		
Insured/Policyholder			
Name Of Registered Owner	TAN KAR HWEE(CHEN JIAHUI)		
NRIC No	S8105636F		
Email Address	DAVIDTAN 81@YAHOO.COM		
Mobile Phone No	(LOCAL) +65-84669969		
Alternative Phone No	OTHERS-84669969		
Vehicle Particulars			
Manufacturer	MERCEDES-BENZ		
Model	C180		
Exact Purpose for which vehicle was being used at time of accident	t PRIVATE USE		
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	PRIVATE CAR		
Insurance Company			
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	DMPCSN3091291803		
Cover Note Number			
Driver			
Name of Driver	TAN KAR HWEE(CHEN JIAHUI)		
NRIC No	S8105636F		
Date Of Birth	19/02/1981		
Occupation	INDOOR		
Date Of Driving Pass	19/02/2002		
Driving Experience	17 YEARS AND 2 MONTHS		
Gender	MALE		
Mobile Number	(LOCAL) +65-84669969		

OTHERS-84669969

DAVIDTAN\_81@YAHOO.COM

Address BLK 522A TAMPINES CENTRAL 7

#08-01 521522

West discussion and the beautiful Comment NO

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

Postcode

.

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 NO

Was any injured conveyed to hospital by ambulance?

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

PLS REFER TO THE ATTACHED STATEMENT.

## 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

SLF3523P

Vehicle Make/Model/Colour

HONDA VEZEL

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

SNG HUNG MENG

NRIC/Passport Number

S0147407C

Contact Number

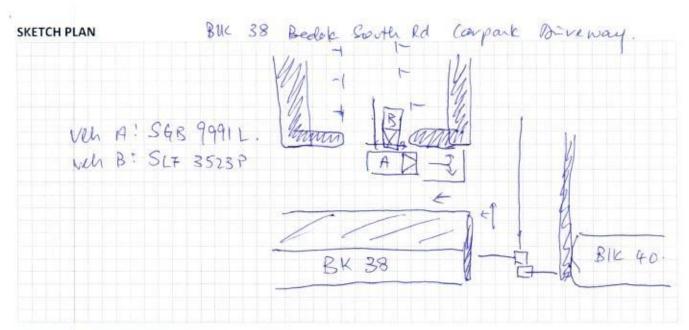
Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I wan diving straight along Carpark Oliveway of BIK 38  Bedolc South Rd when suddenly I felt an impact from the  left hand portion of my vehicle. After the accident, I alighted  to see that vehicle B had failed to stop at the stop line and collided into the left hand portion of my vehicle.  Hence I wan involved in an accident of 2 vehicles.  Veh A: SGB 9991 L  Veh B: SLT 35-73P.	PESCHIPE CHICOMSTANCES OF THE ACCIDENT
Bedole South Rd when suddenly I felt an impact from the left hand portion of my vehicle. After the accident, I alighted to see that rehicle B had failed to stop at the stop line and collided into the left hand portion of my rehicle. Hence I was involved in an accident of 2 vehicles.  Veh A: SGB 9991 L	I was diving straight along Carpark divinay of BIK 38
left hand portion of my valuable. After the accident, I alighted to see that valuable B had failed to stop at the stop line and collided auto the left hand portion of my valuable. Hence I was involved in an accident of 2 valuables.  Veh A: SGB 9991 L	Bedole South Rd when suddenly I felt an impact from the
to see that rehicle B had failed to stop at the stop line and collided into the left hand portion of my rehicle.  Hence I was involved in an accident of 2 vehicles.  Veh A: SGB 9991 L	left hand portion of my valvicle. After the accident I alighted
and collided into the left hand portion of my relicle.  Hence I was involved in an accident of 2 vehicles.  Veh A: SGB 9991 L	
Hence I was involved in an accident of 2 vehicles.  Veh A: SGB 9991 L	
VIL A: 548 9991 L	
	VLL A: 568 9991 L

## 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

06/05/19

Name:

NRIC/FIN No.:

## 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.
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- 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' 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:

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

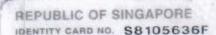
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date of Accident	: 5   5   9. Accident Time: 0730 ltrl. (24-HR-Format)			
Accident Place	: Bik 38 Bedolc South Rd Carpork Diveway.			
Vehicle. No. (Car Plate No.)	: SGB 9991 L Make/Model: WEVC C180.			
Insurace Company	: China Taiping. Policy No: DMPCEN 309 129180			
Owner or Company Name /IC No.	: Tan Kar Hwee (\$81056367)			
Owner or Company Contact No.	: 84669969 Owner's HpCompany Tel			
DRIVER'S Name / IC No.	: as above.			
DRIVER'S Date Of Birth	: 19-7eb-1981 DRIVER'S License Pass Date 19-7eb-2002			
Relationship of Owner & Driver	; Spouse \ Parents \ Children \ Sibling \ Employee\ Others: OW ver			
DRIVER'S Address	: BIK SZZA Tampines Central 7 = 08-015(52/522)			
DRIVER'S Contact No./ Alt No. :1) 8466 9969 2)				
DRIVER'S Occupation	(INDOOR OUTDOOR (e.g. working inside or outside office)			
Email Address	: davidtan _ 81@ yahoo com sales@mia.com.sg			
Weather & Road Surface CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET				
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance				
Number of Passengers (Including Driver): 01-Diver				
Was there any video Captured by ca Exact purpose for which vehicle wa Any Injury (If YES, Pls state):	s being used at the time of accident Private use Work purpose			
Other 1	Party Driver's Particular (if any)			
Vehicle, No: SLF 3523				
Vehicle Make Model: Honda	Vezel- Vehicle Make Model:			
Name Driver: Sng Hung Meng So 147407C . Name Driver:				
IC No. Driver/Contact:	IC No. Driver/Contact:			

<sup>\*</sup> NEW - Passenger's name & gender:





read

TAN KAR HWEE (CHEN JIAHUI)

陈加辉

CHINESE

Date of birth Sex 19-02-1981 M Grantry of birth SINGAPORE

38105638

## REPUBLIC OF SINGAPORE DRIVING LICENCE



Manne Santa Santa

TAN KAR HWEE (CHEN JIAHUI)

Birth Date: 19 Feb 1981 Indian Date: 18 Jan 2005



Owner



NRIC No. 581056361

07-04-2011

APT BLK 522A TAMPINES CENTRAL 7 #08-01 SINGAPORE 521522

NRIC No: \$8105636F

Date: 14/01/2015

70468

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

Class 3 Motor cars = 2000 kg with == 7 passengers, exclusive of the driver, and motor tractors/vehicles == 2500 kg.

Class 4 Heavy motor cars and motor tractors > 2500 kg.

19 Earl Town

N.S.

S / No. 9000177490

NP 428A





## 中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Co. Reg. No. 200208384E

MX1E R SN AN0144A Cov. Type: C

MOTOR PRIVATE CAR

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, 1967 (Malaysia)
Motor Vehicles (Third-Davis, Risks) R. Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

**ORIGINAL** 

CERT	IFICA'	TE No.

DMPCSN3091291803

Engine No :27191031333446 Chano: WDD2040452A448460

1. Index Mark and Registration

Number of Vehicle

SGB9991L

AUTOSAFE

2. Name of Policy Holder

TAN KAR HWEE (CHEN JIAHUI)

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

25 November 2018 Named Drivers Ex Sect. I .......... 5\$500.00

Additional Ex Other than Named Drivers: Ex Sect. I - Age <= 25...... 5\$3,000.00

4. Date of Explry of Insurance

24 November 2019 Ex Sect. I - Age >= 26...... 5\$500.00

\* Age as at date of accident

EX ON WINDSCREEN ................ 5\$100.00

- 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 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:"

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Dwn Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: KENSO LEASING PTE LTD AS HP OWNER

\* 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).

Please see

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: .....LIAN.HDNG

Authoris Officer

Authorised Signatory