

NATIONAL Assessment Centre Services.

[ver 1 Jan 05]

NAI9058960

Date In: 07/05/2019 15:12	Job description	Date & Time Con
Ref No: NAI9058960	SAS e-filing	
Veh No: GZ8947D	E-mail (Adjust 3hrs, AIC 2hrs)	
D.O.A: 06/05/2019 15:30	I-Motor Claim Form	
OID: TP Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)	
	I-Photo Uploaded	
	Assessment/Survey Report	
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp	

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Ych No: PRH 6606 Y	INC () / Non-INC ()
Owner / Driver: (Tel:	
Policy No: (Period: (Cover Type: (
Confirmed by: (Date:	Time:
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 ()	

General Remarks:	
() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repeler.	
() Total Loss Case: to e-mail Insurer URGENTLY.	
Drive-In () / Towed-In ()	Invoice: YES () / NO () ; Towing Co: ()
Remarks:	
1) Apply for Transport Allowance () / Courtesy Car ()	
2) QC Check / Post Repair Inspection ()	
3) Upload Resurvey Photo [Repair Cost > \$3000] ()	

Injury:	
Date of Birth:	
Address:	
Phone:	
Mobile:	
Work:	
Home:	
Other:	

NAI903271	
Driver/Owner:	
Contact No:	
Damaged Portion:	
QC Checked by (Engr-In-Charge):	
Additional Comments:	
Sal: 1:	
2 / 3:	

1) AR: Accident Reporting (330);	
2) DA: Damage Assessment (\$100); INC (\$40)	
3) TP: Towing Fee	\$40/\$43
4) FT: Follow-Through Survey	\$120
5) FT: Follow-Through Survey (Resurvey)	\$30
For claiming against INC Only (ver 10 Jan 2005)	
6) TR: Re-inspection	\$75
7) NI: Idao DA + SMRT Survey	\$160
8) NTUC Additional Services:-	
ON:	\$5
*NG: Courtesy Car / Tpr Allowance	\$10
*NG: Repair Coordination	\$25
*NG: Post Repair Inspection	\$5
*NG: DV / Collect Excess Coordination	\$25
TP (NI): TP (Non INC)	\$30
9) NI: Idao Mobile	
Invoice dated	Fee Charged
Invoice dated	Fee Charged

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	07/05/2019 15:12
Date Of Accident	06/05/2019 15:30
Exact Location Of Accident	AYE TOWARDS TUAS
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GZ3947D
Insured/Policyholder	
Name Of Registered Owner	BSL ENTERPRISE
Co Reg No	53247858D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92705777
Alternative Phone No	OFFICE-92705777
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MS003482
Cover Note Number	
Driver	
Name of Driver	YEW ENG SIONG ALEX (YOU YONGXIONG ALEX)
NRIC No	S7521920B
Date Of Birth	19/07/1975
Occupation	INDOOR
Date Of Driving Pass	25/08/1997
Driving Experience	21 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92705777
Fax Number	
Contact Number	OTHERS-92705777
Email Address	NOEMAIL

Address	BLK 457 SEGAR ROAD #03-133
Postcode	670457
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	COLLISION - HEAD TO REAR
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)	2
Passenger 1	NAME: : JANTHIDA DINDAENWANA GENDER: : MALE

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	FBH6606Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

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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**.
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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.

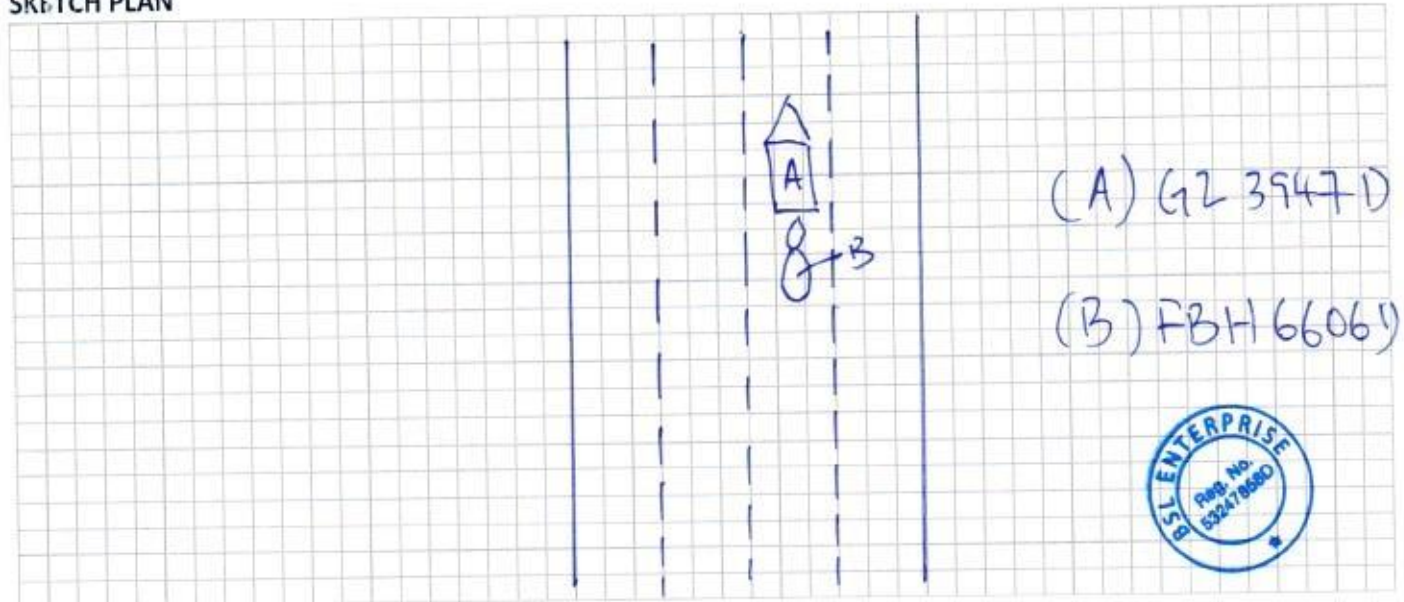


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling on AYE towards TUMS on lane 3 of 4 lanes.

Weather was clear, traffic was moderate. The vehicle in front of me slowed down and stopped. I followed suit and stop my vehicle. After a few second, I felt an impact from the rear. I alighted and realised vehicle B could not stop in time and collided onto my vehicle.

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
Name:
NRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 6/5/2019	TIME: 1530 Hrs	(hh:mm) 24 hrs Format
LOCATION: AYE TOWARDS TUDS		
VEHICLE NUMBER: 67 3947D		
INSURED NAME: BSI Enterprise		
NRIC / FIN: 53247858D	CONTACT: 92705777	
MAKE: Toyota	MODEL: Hiace Manual	
Are you claiming under your own insurance policy for repair to your vehicle?		
() Yes, If No, Pls Select : () Third Party () Reporting Only		
INSURANCE COMPANY: Tokio		
TYPE OF POLICY () COMPREHENSIVE () THIRD PARTY () TPFT		
POLICY NUMBER:		
NAME DRIVER: Tew Eng Seng Alex (You Yonsiang Alex) () SAME AS INSURED		
NRIC / FIN: S7521920B	CONTACT: 92705777	
DATE OF BIRTH: 19-07-1975		
DRIVING PASS DATE: 25-08-1997		
OCCUPATION: () INDOOR () OUTDOOR		
GENDER: () MALE () FEMALE		
EMAIL ADDRESS: () NO EMAIL		
ADDRESS OF DRIVER:		
Number Of Passenger Include Driver: 2		
(1) Janthida Dindaenwara - male		
Was driver an employee of the Insured's Company? () YES () NO		
If No, Relationship Of The Driver With The Insured		
() Owner () Spouse () Friend () Relative () Children () Sibling () Others		
Does The Driver Own Any Other Vehicle? : () YES () NO		
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:		
Insurance Company Of Driver's Own Vehicle		
Weather Conditions: () Clear () Raining () Drizzling () Others		
Road Surface : () Dry () Wet () Others		
Was Any Foreign Vehicle Involved In This Accident? () YES () NO		
Was Anybody Injured In The Accident? () YES () NO		
If YES, Injured details :		
Convey By Ambulance: () YES () NO		
Was There Any Video Capture By Car Camera? () YES () NO		
Was There Accident Reported To The Police? () YES () NO If Yes Attach Police Report		
Police Report Number (if any)		
Details Of 3rd Party	Name / NRIC	Contact
Veh B: 8BH 66064	(Nric)	
Veh C:		
Veh D:		
Veh E:		
Veh F:		
Veh G:		

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

Class 2B	Motorcycles not exceeding 200 cc
Class 2A	Motorcycles between 201 cc and 400 cc
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

07 Jan 1992
01 Nov 1993
25 Aug 1997

NP 428A



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7521920B**
Name:

YEW ENG SIONG ALEX
(YOU YONGXIONG ALEX)

Birth Date: **19 Jul 1975**

Issue Date: **23 Apr 2004**



00000050030981

NRIC No. (Colour)
S7521920B/ PINK

CHINESE

Country Of Birth
SINGAPORE

19/07/1975

Service Status
REGULAR

Blood Group
O (+)


Sex
M


Military Rank Status
WOSE

Address
**ADDRESS: APT BLK 457 SEGAR ROAD #03-133
SINGAPORE 670457**

DATE: 27.06.2014

S7521920B






**SINGAPORE ARMED FORCES
IDENTITY CARD**

Name
YEW ENG SIONG ALEX

NRIC No
S7521920B



This card is the property of the Singapore Armed Forces. Any person finding this card is requested to forward it without delay to Central Manpower Base or any Police Station.

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: tms@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

Certificate of Insurance

FORM MZ300

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.: MS003482 (Commercial Vehicle)

- | | | |
|--|---|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | GZ3947D | Chassis No.: JTFHS02P100041218 |
| 2. Name of Policyholder | BSL ENTERPRISE | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 23/03/2019 (00:00:00) | |
| 4. Date of Expiry of Insurance | 22/03/2020 | |
| 5. 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 Risks 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 No: 2324DDA

Insurance Plan:	Third Party Fire & Theft
Limit for total loss or theft:	Prevailing Market Value
Financial interest:	GF MOTOR TRADING ENTERPRISE

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: 7858D

Vehicle Details

Vehicle No.: GZ3947D

Vehicle to be Exported: No

Intended Deregistration Date: 31 May 2019

Vehicle Make: TOYOTA

Vehicle Model: HIACE MANUAL

Primary Colour: White

Manufacturing Year: 2006

Engine No.: 2KD1430219

Chassis No.: JTFHS02P100041218

Maximum Power Output: -

Open Market Value: \$23,810.00

Original Registration Date: 23 Mar 2006

First Registration Date: 23 Mar 2006

Transfer Count: 1

Actual ARF Paid: \$1,191.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 22 Mar 2021

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 5

PQP Paid: \$22,724.00

COE Rebate Amount: \$8,222.00

Total Rebate Amount: \$8,222.00

Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 07 May 2019