

NATIONAL Assessment Centre Services

Date In: 08/05/19	Job description	Date & Time Completed	Done by
Ref No: NA/TM219008072/13	SAS e-filing		
Veh No: SLA2848K	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 08/05/19 0715	i-Motor Claim Form		
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (RYDER	Tel:	Fax:
TP Particulars:	Veh No: JLT6928	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%; F: 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 repairer.
- () Total Loss Case: to e-mail Insurer URGENTLY.
- Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co. ()

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury:

Date/Time	Actions

NA-903392

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist

- | | Ant (\$)
1st Bill | Ant (\$)
Add Bill |
|---|----------------------|----------------------|
| 1) AR: Accident Reporting (\$30); | | |
| 2) DA: Damage Assessment (\$100); INC (\$80) | | |
| 3) TF: Towing Fee \$40/\$45 | | |
| 4) FT: Follow-Through Survey \$120 | | |
| 5) RT: Follow-Through Survey (Resurvey) \$30 | | |
| For claiming against INC Only (wef 10 Jan 2005) | | |
| 6) TR: Re-inspection \$75 | | |
| 7) N1: Idac DA + SMRT Survey \$160 | | |
| 8) NTUC Additional Services:- | | |
| ON* | | |
| *N5: Courtesy Car / Tpt Allowance \$5 | | |
| *N6: Repair Co-ordination \$10 | | |
| *N7: Post Repair Inspection \$25 | | |
| *N8: DV / Collect Excess Coordination \$5 | | |
| TP (N11): TP (Non INC) against INC \$20 | | |
| 9) N12: Idac Mobile 30 | | |

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	08/05/2019 10:26
Date Of Accident	08/05/2019 07:15
Exact Location Of Accident	BKE(PIE)NEAR BUKIT PANJANG EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA2848K
Insured/Policyholder	
Name Of Registered Owner	MR TAN CHOON HUNG
NRIC No	S7245667Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97412523
Alternative Phone No	OFFICE-87201919

Vehicle Particulars

Manufacturer	BMW
Model	523i
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	19-MU003706-R02
Cover Note Number	

Driver

Name of Driver	JOANNE WONG MEI FONG
NRIC No	S7215653F
Date Of Birth	14/05/1972
Occupation	OUTDOOR
Date Of Driving Pass	03/06/2002
Driving Experience	16 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97412523
Fax Number	(LOCAL) +65-87201919
Contact Number	
Email Address	NOEMAIL

Address	BLK 529 CHOA CHU KANG ST 51 #07-335
Postcode	680529
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JJT6928 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	4
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: : TIAN SHIPEI VALETIA GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 ANG MO KIO AVE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4849999 - FAX NO: 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: F/20190508/7026

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	JJT6928
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SME6453G
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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLU7030P
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

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:


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

 08/05/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG BKE (PIE) NEAR BUKIT PANJANG EXIT. VEHICLE AHEAD SLOWED DOWN AND I FOLLOWED SUIT. MOMENT LATER VEH B REAR-ENDED 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
POLICE FORCE**



F/20190508/7026

1 of 3

POLICE REPORT (NP299)

Report No. F/20190508/7026

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No:1800-2180000

Date/Time Report Made 08/05/2019 14:05	Vide Report No.	Station Diary No.		
Name Of Informant JOANNE WONG MEI FONG	Address APT BLK 529 CHOA CHU KANG STREET 51 #07-335 SINGAPORE 680529			
ID Type / ID No. NRIC NO / S7215653F	Contact No. Home/Office:	Mobile: 97412523		
Nationality SINGAPORE CITIZEN	Email Address joanne Wongmf@msn.com			
Occupation Working proprietor (restaurant and other catering services)	Sex Female	Age 46	Date of Birth 14/05/1972	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 07/05/2019 07:00 - 07/05/2019 07:15	Location Of Incident BKE(PIE) near bukit panjang exit			

Brief details.

Vehicle in front of me slowed down and I followed suit. Moments later, the rear of my car was knocked by JJT 6928. There was a passenger in my vehicle. It was a 4 car collision with mine being the first vehicle in front. Involved vehicles in sequence as follows:

SLK 2848 K (My vehicle - 1st)

JJT 6928 (2nd)

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 08/05/2019 14:05
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



F/20190508/7026

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190508/7026

SME 6453G (3rd)

SLU 7030 P (last)

Witness: Chan Er Choon Tel: 91461458

Subjects Involved

Victim

Person Name	JOANNE WONG MEI FONG		
ID Type	NRIC NO	ID No	S7215653F
Gender	Female	Age	46
Race	Chinese	Language	English
Occupation	Working proprietor (restaurant and other catering services)	Address Type	
Address	APT BLK 529 CHOA CHU KANG STREET 51 #07-335 SINGAPORE 680529	Mobile No	97412523
Is Informant A Victim?	Yes		

Person Name	Tian Shiwei Valetia		
ID Type	NRIC NO	ID No	S8408461A
Gender	Female	Age	35
Race	Chinese	Language	English
Occupation	Chef	Address	632 choa chu kang north 6 #06-205 SINGAPORE 680632

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

08/05/2019 14:05

Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



F/20190508/7026

3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190508/7026

Mobile No	96266436	Relation To Informant	Sister in law
Person Name			
JOANNE WONG MEI FONG (Informant)			

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:


08/05/2019 14:05

Classification Of Case:

Accident Reporting Draft

VEHICLE NO: SLA2848K

MODEL: B.M.W. 523I

DATE OF ACCIDENT	8/5/19		
TIME OF ACCIDENT	0715HRS	HRS	AM/PM
LOCATION OF ACCIDENT	BKE (PIE) NEAR BUKIT PANJANG EXIT		
EXACT PURPOSE USE DURING ACCIDENT			
NAME OF OWNER	TAN CHOON HUNG		
CONTACT NO.	97412523,87201919		
NRIC	S7245667Z		
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY 3P		
INSURANCE CO.	TOKIO MARINE		
TYPE OF COVERAGE	COMPREHENSIVE/ THIRD PARTY/ THIRD PARTY FIRE & THEFT		
POLICY NO.			
NAME OF DRIVER	JOANNE WONG MEI FONG AS ABOVE / IF NO:		
NRIC	S7215653F	ANY PASSENGER: 1	
DATE OF BIRTH			
OCCUPATION	<u>OUTDOOR</u> / INDOOR <i>F: Tian Shipai, Valet/ia</i>		
DATE OF DRIVING PASS			
GENDER	MALE / FEMALE		
CONTACT NO.	97412523,87201919	OFFICE:	HOME:
ADDRESS	APT BLK 529 CHOA CHU KANG STREET 51 #07-335		
DRIVER HAVE ANY OWN VEHICLE	NO/ IF YES: REG NO.		
RELATIONSHIP	EMPLOYEE/ IF NO:		
WEATHER CONDITION	CLEAR / RAINY/ OTHER: RAINY		
ROAD SURFACE	DRY / WET/ OTHER: WET		
ANY INJURIES	NO / IF YES:		
CONTACT NO.			
POLICE REPORT	NO / IF YES:		
VIDEO RECORDING	NO / YES		
VEHICLE B NO.	JJT6928	ANY PASSENGER:	
NAME			
CONTACT NO.			
VEHICLE C NO.	SME6453G	ANY PASSENGER:	
VEHICLE D NO.	SLU7030P	ANY PASSENGER:	
VEHICLE E NO.		ANY PASSENGER:	
VEHICLE F NO.		ANY PASSENGER:	
ANY WITNESS			
WITNESS CONTACT NO.			
PARTICULAR WORKSHOP	<div style="text-align: center;">  <p>Ryder Auto Pte Ltd</p> <p>2 Kaki Bukit Ave 2, #02-19 @ Kaki Bukit Auto Hub, Singapore 417921</p> <p>Email: ryderautoworkshop@gmail.com Tel: 67418277 Fax: 67468277</p> </div>		
MOBILE NO.			
CONTACT PERSON			
FAX NO.			

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7215653F



Name
JOANNE WONG MEI FONG

Race
CHINESE

Date of Birth
14-05-1972

Sex
F

Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S7215653F

Name
JOANNE WONG MEI FONG

Birth Date 14 May 1972

Issue Date 26 May 2003

000513614C

3.272338



NRIC No. S7215653F



Valid until 03-12-2002

APT BLK 529 CHOA CHU KANG STREET 51 #07-335
SINGAPORE 680529

NRIC No. S7215653F Date 03-01-2007 No. 5684646

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class	Motor Cars and which unladen	Pass Date
Class 3	Motor Cars and which unladen	03 Jun 2002

Factors the weight of 1 exceed 2500 kilograms

Licence No: S7215653F

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

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

FORM MX1

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, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: 19-MU003706-R02 (Private Motor Car)

1. **Index Mark and Registration Number of Vehicle** SLA2848K **Chassis No.:** WBAFP32000C545860
2. **Name of Policyholder** MR TAN CHOON HUNG
3. **Effective date of the Commencement of Insurance for the purposes of the Act** 27/03/2019
4. **Date of Expiry of Insurance** 26/03/2020
5. **Persons or Class 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.

6. Limitations as to use*

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

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or 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.

* 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: 1360DDA

Insurance Plan:	Comprehensive Approved Workshop Plan
Limit for total loss or theft:	Prevailing Market Value
Policy Excess:	Own Damage Claims SGD 1,000
	Windscreen Excess SGD 100
Financial Interest:	HIN LUNG AUTO PTE LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature