NATIONAL Assessment Co	ntre Services	fixed to Javinet			
Date In 16/05/19	Job description		Date & Time Completed	De	one by
Ref No NA/INC/9008734/					
Veh No GB 49106 J	E-mail (within	Nive MC three		T	
DOA 20/06/19 16			m7/1040845-	1002	
		O (Within: OD 2h		-	
OD TP (Reporting Only)	i-Photo Uple		1		n nam u
TPL	Assessment/S				
TP Insurer:	Ass't Report	y Fax / Hand	to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW:	(Tel:	Fax:)
TP Particulars: Veh No:	Ym80940	INC ()/Non-INC()		
Owner / Driver: (222		Tel:)	Senting and the sent
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by : (Date:	Time:)	
The second secon	%) [Note-Est. Status (WO): N: 0-2	20%; P: 21-79%. F: 80-	-100%]	
Year of Registration: () Warranty: YES ()/NO()		
Excess: (\$) Loading:	\$1,000 () / \$2,000)()			
General Remarks:-			Association of an		
() Walk-In Customer's		onfidential & S	trictly NO refer of repairer		
() Total Loss Case : to e-mail In	surer URGENTLY.				
Drive-In ()/Towed-In (); Inv	voice: YES () /]	NO();	Towing Co. (5900)
Remarks:- (INC horline: 6788 661	6)		Date&Time Completed	D.	one by
) / Courtesy Car ()			
2) QC Check / Post Repair Inspection	()			
3) Upload Resurvey Photo [Repair Cost	>\$3000] ()			
Injury :					
		W. C. C. C. S.			
Date/Time Actions					
	-17/				
		- 1156		THE COURT PAGE	
		1.000.0000		Ant ((\$) Amt (\$)
NA1903	650	Gradus assess	eparation Checklist	lst B	ill Add Bill
laimant's Particulars :-		1) AR : Accider 2) DA : Damage	nt Reporting (\$30); e Assessment (\$100); INC (\$80)	
river/Owner:		3) TF : Towing		\$40/\$45 \$120	
ontact No:			Through Survey Through Survey (Resurvey)	\$30	
		For claiming 6) TR : Re-insp	against INC Only (wef 10 Jan 20	05) \$75	
amaged Portion:		THE RESERVE OF THE PARTY OF THE	+ SMRT Survey	\$160	
	•	8) NTUC Addit	tional Services		
C Checked by (Engr-In-Charge):	12	*N5: Courtes	sy Car / Tpt Allowance	\$5	
uditors' Comments :-		THE RESERVE AND ADDRESS OF THE PARTY OF THE	Co-ordination pair Inspection	\$10	
		*N8: DV / C	ollect Excess Coordination	\$5	
<u>t. 1:</u>		9) N12: idae M	P (Non INC) against INC obile	\$20 30]	
1.2/3:		Invoice dated	Fee Charge	Marie 2	Minist and
4.274		Invoice dated	Fee Charge		

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 <u>truthful and accurate</u> 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.
- 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 aforesaid.

And Switcher,	
	ACCIDENT STATEMENT
Date Of Report	16/05/2019 16:42
Date Of Accident	20/06/2018 16:50
Exact Location Of Accident	TANNJONG KATONG RD SOUTH
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	GBG9106J
Insured/Policyholder	
Name Of Registered Owner	PUNGGOL EAST CAR RENTAL
Co Reg No	53338281E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91188555
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096357911-01
Cover Note Number	
Driver	
Name of Driver	TAN MENG YOUNG, CHARLES (CHEN MINGYANG)
NRIC No	S8804151H
Date Of Birth	04/02/1988
Occupation	OUTDOOR
Date Of Driving Pass	31/07/2008
Driving Experience	9 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86886381
Fax Number	
Contact Number	

BLK 105B EDGEFIELD PLAINS Address

#14-11

Postcode 822105

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER(COMPANY)

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 Weather Conditions DRIZZLING Road Surface WET

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 1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

PUNGGOL N.P.C

Police Station Address

ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY:

SINGAPORE

Police Station Contact Was notice of intended Prosecution given? TEL NO: - FAX NO:

If Yes, against whom?

NO

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180705/2163

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

Vehicle Make/Model/Colour

YM8094C

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

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.
- 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.
- 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:
 - (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.:

	TANGONG KATONG RD SOUTH
	7474
	A BALL MAN
GBG 9106I - YM8094C -	The same of the sa
	A RE
YM8094C -	
DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT
Pls rep. 1	to the police report: 7/20180705/
7	e via poste i qui i viocisi i,

Policyholder's S

Date & Time:

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



1 of 3

Report No. T/20180705/2163

Police Station Of Origin:

Punggol N.P.C 21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

ACC A TRAFFIC ACC	DENT
REPORT OF A TRAFFIC ACCI	DENI

Date/Time Report Made: 05/07/2018 20:51		lade:	Vide Report No.:	Station Diary No.: 86
Informa	nt's Particu	ulars	The state of the s	
	Informant: NG YOUNG	G, CHARLES	Address: APT BLK 105B EDGEFIELD PLAINS #14-11 SINGAPO 822105	
	/ ID No.: D / S88041	51H	Contact No.: Home/Office: Mobile: 86886381	
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Male	Age:	Date of Birth: 04/02/1988	Type of Informant:	
Race: Chinese			Language:	Institution / School Name:
Occupation:		AGER	Driving Licence Information: Class: 2B.2A.2.3	Date of Expiry:

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 20/06/2018 16:50	Type of Location Straight Road	
Weather:	ATONG ROAD SOUT	Road Surface:	F	Road Speed Limit:	
Drizzling Traffic Flow: One Way		Traffic Control:	Т	Traffic Volume: Light	
		Traffic Light - Wo	rking L	ight	

Details of V	ehicle Invol	lved		140000000000000000000000000000000000000		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBG9106J	Truck			a us d Taro	No Damage	1
YM8094C	Truck			pursuant to Sec	78 None an Damage	0

Siti Reheiyah Kasmani (MX)

Traffic Police 1 0 MAY 2019 Date:





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 2 of 3 Report No. T/20180705/2163

CONTINUATION OF REPORT

Brief Details.

On 20/06/2018 at about 1650hrs, I was driving along Tanjong Katong Road South on my company truck bearing registration plate GBG9106J. Subsequently I came to a stop before a truck bearing YM8094L who was stopped behind a cement truck. I then drove to the right side, thinking of bypassing YM8094L. However suddenly YM8094L drove out and the right side of his vehicle collided upon my left side mirror.

I then followed the truck and later came to a stop behind it. I switch on my hazard light and walked out of my truck, thinking of talking to the driver of YM8094L about his dangerous driving. However, YM8094L quickly drove off.

I did not take down the driver's particulars and only know the person's plate number. I do not have a incar camera installed inside my truck.

On 04/07/2018, I received a letter from Traffic Police reference TP/IP/67777/2018 and was informed to lodge a traffic incident report.

I would like to mentioned that after checking my left side mirror after the incident, I did not see any visible scratches as such I did not perform further actions against YM8094L.

Certified True Copy pursuant to Sec. 78 of the Evidence Act, Cap 97.

Siti Rohsiyah Kasmoni (M

Traffic Police

ate: 1 0 MAY 2019





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

3 of 3 Report No. T/20180705/2163

CONTINUATION OF REPORT

Sketch Plan

NP168

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: F /	Signature Of Informant:		
Sgt 2 WANG SHILING, ELVIN	Certified True Copy pursuant to Sec. 78 of the Evidence Act, Cap 97.		
Signature Of Interpreter: Not applicable	Date/Time: 05/07/2018 20:51 Siti Rohaiyah Kasmahi (MX) Traffic Polica		
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No.: 65476430	Classification Of Case: 1 0 MAY 2019		
Authentication Stamp			

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8804151H





TAN MENG YOUNG, CHARLES (CHEN MINGYANG)

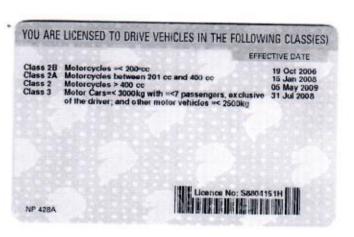
陳 明

CHINESE

04-02-1988 SINGAPORE







eBaoTech GeneralClaim Hello, NAC_PAYA_UBI_800601 Change Language Change Password Log Out My Desktop **Policy Query** Notice of Loss Policy No. Date of Accident 20/06/2018 16:50 Vehicle No.(For Motor) GBG9106) Certificate Number Search Policyholder Name Certificate Policyholder NRIC Select Policy No. Vehicle Insured Commence Product Cover Type Expiry Date Number No. Object Date PUNGGOL EAST CAR RENTAL 5096357911-53338281E Comprehensive GBG91063 GBG91063 13/12/2017 12/12/2018 **GFT** 01 Continue

Claim Handling Accident MT/1040845

SST Registration No. SST Status Verified SST Status Verified from No to Ves Status	Accident MT/1040845						
Publication Number Publica	Policy No.	5096357911-01	Vehicle No.	GBG91063		GST Regi	stration N
Moduce Code	Certificate No.						
Miles Mile	Policyholder Name	PUNGGOL EAST CAR RENTAL				Policyhol	der NRIC
Special Ramania	Product Code	FLEET INSURANCE	Cover Type	Comprehensive		Loading	
Second Remark	Contact No.(Mobile)	NA	Contact No.(Office)			Contact N	No.(Home)
MCD Protection No	Email Address		Special Remark				
## Accident Details ### Accident Report Within 24 hirs Yes	KFK	« No Yes	TCA	No Yes		eCode Re	eason
Accident Date	NCD Protection	No	NCD Entitlement(%)	0		Private H	lire
Date of Accident 20/09/2018							
Date of Accident	Report Date	18/04/2019 17:35	Accident Report Within 24 hrs	Yes		Accident	Type
Reporting Genere Accident Location ALONG TANJONIG KATONIG ROAD SOUTH ** Excess Outlander Surgespare OB Excess Outlander Singapore OB Excess Outlander Singapore OB Excess Outlander Singapore TP Excess ** ST Registration Date ** Reporting For Registration Date ST Registration Date ST Registration Date ST Registration Date ST Registration Ris OST Registration Date ST Registration Ris OST Registration Date ST Registration Ris OST Registration Rise	Date of Accident	20/06/2018	Time of Accident hh:mm	00:00			
Active to Lacison ALOYS TAKADONG KATONG RAD SOUTH ** Excess** One damage Excess One damage Excess 1,590.00 Outside Singapore DE Excess Unramed Driver Excess 1,590.00 Outside Singapore TP Excess ** Excent Excess ** SST Regularation Date OST Regularation Date OST Regularation Date OST Regularation No to 19 km Modification Instory ** Policyholder Mailing Address ** Policyholder Mailing Address ** SINGADE \$22.222 Address 2 Related Policy Number ** Singapore address ** SINGADE \$23.623 Address 3 Address 7/pe ** Singapore address ** Driver DOB Driver Nace Une No. Driver Nace Contact No.(Info) Co	Reporting Centre		Orange Force				STEEL STREET
Own damage Excess 2,000.00 Additional Excess Unhammed Driver Excess Unhammed Driver Excess 1,500.00 Outside Singapore OD Excess Third Party Exces 1,500.00 Outside Singapore TP Excess Third Party Excess 1,500.00 Outside Singapore Objects	Accident Location	ALONG TANJONG KATONG ROAD SOUTH				10.81100000	
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Third Part Secrets 1,500.00 Outside Singapore TP Excess Report Secret Sec						Windscre	en excess
## GST Registered No GST Registeration Date GST Registeration Date GST Registeration Date GST Registeration No GST Registeration Date GST Status Verified No to Ves ### Policyholder Mailling Address	Third Party Excess	1.500.00					
GST Registration Date GST Status Verified GST Status Ver		2,000.00	outside singapore in Excess				
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GST Status Verried Feat Code GST Status Verried Feat Code GST Status Verried Feat Code GST Status Verried GST Status Verried Feat Code GST Status	- Day and the second of the se	1000		GET P	stration Date		
Modification History Policyholder Mailing Address Address 1 BUK 663C e12-232 Address 2 PUNGGOL DRIVE Address 3 Address 3 Address 4 SINGAPORE 823663 Address 7pe Singapore address Post Code Unramed driver Name Oniver Age Unramed driver Name Address 7pe Power Age Contact No, (Mobile) Address 1 Address 7pe Foreign address Post Code Unramed Code Post Code Unramed Code Driver Name Unramed Griver License Contact No, (Mobile) Address 7pe Foreign address Post Code Post Code Unramed Code Ves = No Driver Vehicle No. Driver Vehicle No. Driver Insurer Code Ves = No Driver Vehicle No. Driver Insurer Code Ves = No Driver Vehicle No. Driver Insurer Code Version Contact No, (Mobile) Code Version Repairer Claim Description Preferred Version Repairer Version Claim Description Preferred Workshop, Name unknown Version Repairer Point AK letter Print AK letter		,,,,		A2774 B.0374			Vac
Address 1 BLK 663C #12-232 Address 2 PUNGCOL DRIVE Address 3 Address 4 SINCAPORE #23663 Address Type Singapore address 9 Post Code Unit No. ### #2 Driver Info ### #2 Driver Name ### #2 Driver Name ### #2 Driver Name ### #2 Driver Name ### Post Code Policy Number 3087587603-01 ### #2 Driver Name ##	Modification History	18/04/2019 17:36:59 System	m changed GST Status Verified from No		72,1112		165
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Unit No. 12-232 Related Policy Number 5087587803-01 Driver Name							
Driver Info Driver Name Contact No. (Office) Contact No. (Office) Address 1 Address 2 Address 3 Address 3 Address 3 Address 4 Address Type Foreign address Driver Insurer Contact No. (Mobile) Colaim Observer Name Driver Vehicle No. Driver Vehicle No. Driver Vehicle No. Driver Name Drive			***************************************		i.	Post Code	e
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Does he own a Singapore Registered car? Yes No Driver Vehicle No. Driver Insurer Care Registered car? Modification History Claim 002 OD-MX New Name Pub.			Address Type	Foreign address		Post Code	
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Claim 1002 OD-MX New Contact No.(Mobile) Email Address Claim Description Claim Pyee Segging 106 / YM8094C ON 20 Jun 2018 Claim Description Claim Description Claim Pyee Segging 106 / YM8094C ON 20 Jun 2018 Claim Description Claim Pyee Segging 106 / YM8094C ON 20 Jun 2018 Claim Pyee Preferred Workshop, Name unknown V GIA report Received V Received V Received V Received Date Report Taken By Print AK letter		Yes • No	Driver Vehicle No.			Driver Ins	surer Com
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Print AK letter Received Rec	Workshop	Preference Not at reuit					
Date Registered 17/05/2019 10:03 Close Date Report Taken By ROSLINDA Workshop Repairer Print AK letter	Finalisation Live	Repair Preferred Workshop, Na		*		Claim	
Print AK letter	Date Registered	0.555550			17/05/2019 10:03	Close	
	Report Taken By				ROSLINDA		3
Save Submit	Print AK letter						
Save Submit		F)					
				Save Submit			

Video List

Uploaded By/Date

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