

NATIONAL Assessment Centre Services.

[wef 1 Jan 05] MVA 119064210

| | | | |
|---------------------------|--|-----------------------|---------|
| Date In: 17/01/19 - 15:23 | Job description | Date & Time Completed | Done by |
| Ref No: NA/1702/402881424 | SAS e-filing | | |
| Veh No: 51515 A | E-mail (within 3hrs, AIC 2hrs) | | |
| D.O.A: 16/1/19 - 16:30 | 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: (| Tel: | Fax: |
| TP Particulars: | Veh No: JHMG9938 | 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 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 1902704 | Invoice Preparation Checklist | Am't (\$) Est Bill | Am't (\$) Add Bill |
| Claimant's Particulars:- | 1) AR: Accident Reporting (\$30); | | |
| Driver/Owner: | 2) DA: Damage Assessment (\$100); INC (\$80) | | |
| Contact No: | 3) TF: Towing Fee \$40/\$45 | | |
| Damaged Portion: | 4) FT: Follow-Through Survey \$120 | | |
| QC Checked by (Engr-In-Charge): | 5) RT: Follow-Through Survey (Resurvey) \$30 | | |
| Auditors' Comments:- | 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 | 17/05/2019 15:23 |
| Date Of Accident | 16/05/2019 16:30 |
| Exact Location Of Accident | JUNC ADMIRALTY RD & MARSILING LANE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | S1515A |
| Insured/Policyholder | |
| Name Of Registered Owner | MDM KOH POH CHOO |
| NRIC No | S6918786B |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-82331133 |
| Alternative Phone No | OFFICE-82331133 |

Vehicle Particulars

| | |
|--|-----------------------------------|
| Manufacturer | NISSAN |
| Model | QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR |
| 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 | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | DMPCSN1740141801 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | AARON CHENG JIN RONG |
| NRIC No | S9916512Z |
| Date Of Birth | 25/05/1999 |
| Occupation | INDOOR |
| Date Of Driving Pass | 31/05/2018 |
| Driving Experience | 0 YEAR AND 11 MONTH |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-96263778 |
| Fax Number | |
| Contact Number | OFFICE-96263778 |
| Email Address | NOEMAIL |

| | |
|---|---------------------------------------|
| Address | BLK 712 PASIR RIS STREET 72 #03-51 |
| Postcode | 510712 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | CHILDREN |
| 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? | |
| 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: : KOH POH CHOO GENDER: : FEMALE |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | BEDOK SOUTH NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 20 CHAI CHEE DRIVE , POSTCODE: 469045 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-2448999 - FAX NO: 62446558 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO POLICE REPORT- T/20190517/2089.

Attachment(s)

| | |
|---|-------------------------|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | YES |
| Remarks/ Reasons: | VIDEO FOOTAGE TOO LARGE |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|---------------|
| Vehicle Registration Number | JNM9938 |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | PANG TEE FONG |
| NRIC/Passport Number | 349053187 |

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: ;

GENDER: ;

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:

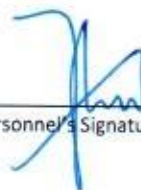
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:



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

SKETCH PLAN

Admissibility Rd

A: SISISA
B: JNM9938

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/20190517/2089.

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



T/20190517/2089

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

1 of 4

Report No. T/20190517/2089

REPORT OF A TRAFFIC ACCIDENT

| | | | | |
|--|------------|---|------------------------------|--------------------------|
| Date/Time Report Made: 17/05/2019 14:43 | | Vide Report No.: | | Station Diary No.: 28 |
| Informant's Particulars | | | | |
| Name of Informant: AARON CHENG JIN RONG | | Address: APT BLK 712 PASIR RIS STREET 72 #03-51 SINGAPORE 510712 | | |
| ID Type / ID No.: NRIC NO / S9916512Z | | Contact No.: Home/Office: Mobile: 96263778 | | |
| Nationality: SINGAPORE CITIZEN | | Email: | | |
| Sex: Male | Age: 19 | Date of Birth: 25/05/1999 | Type of Informant: Driver | |
| Race: Chinese | | Language: English | Institution / School Name: | |
| Occupation: UNEMPLOYED | | Driving Licence Information: Class: 3A Date of Expiry: | | |

General Information of the Accident

| | | | | |
|---|-------------------------------|--------------------|--|---------------------------------|
| Type of Accident: | Non-Injury Foreign Vehicle | Drink Drive: No | Date/Time of Accident: 16/05/2019 16:30 | Type of Location: X-Junction |
| Location: Junction of Road 1 and Road 2 ADMIRALTY ROAD MARSILING LANE Along Rd 1 towards Woodlands at junction of Rd 2. | | | | |
| Weather: Clear | Road Surface: Dry | | Road Speed Limit: | |
| Traffic Flow: | Traffic Control: | | Traffic Volume: Moderate | |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | Anyone conveyed by ambulance: No | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|---------|--------|---------|-------|-------------------|-----------------|
| JNM9938 | Pick-Up | | | | Slightly Damaged | 1 |
| S1515A | Car | NISSAN | Qashqai | Grey | Seriously Damaged | 1 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|---|-------------------|------------|-------------|
| S1515A | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. | DMPCSN17401418 01 | 05/06/2018 | 04/06/2019 |



SINGAPORE POLICE FORCE



T/20190517/2089

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Report No. T/20190517/2089

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

CONTINUATION OF REPORT

| Details of Person Involved | | | |
|-----------------------------------|----------------------|--|-----------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | Pang Tee Fong | ID No. | F0236031N |
| Related Vehicle | JNM9938 (Pick-Up) | Contact No. | 96626530 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | AARON CHENG JIN RONG | ID No. | S9916512Z |
| Related Vehicle | S1515A (Car) | Contact No. | 96263778 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3A Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Passenger | | | |
| Name | Koh Poh Choo | ID No. | S6918786B |
| Related Vehicle | S1515A (Car) | Contact No. | 82331133 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 16/05/2019 at around 1630hrs, I was driving my car along Admiralty Road heading towards Woodlands at the centre lane. As I was approaching the traffic light junction of Marsiling Lane, the traffic light was showing 'Amber' and turning to 'Red'. My son applied the brakes and stopped at the junction.

Suddenly, I felt an impact to the rear of my car. I came out and realized that a Malaysian registered vehicle had knocked onto the rear of my car. I and my passenger (Mother) alighted and exchange particulars with the foreign vehicle driver. After exchanging, both of us drove off. No one is injured.



**SINGAPORE
POLICE FORCE**



T/20190517/2089

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

3 of 4

Report No. T/20190517/2089

CONTINUATION OF REPORT

My car sustained damaged to the rear of the car but the car was still able to be driven. No police or ambulance came to scene. No other party was involved.



**SINGAPORE
POLICE FORCE**



T/20190517/2089

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

4 of 4

Report No. T/20190517/2089

CONTINUATION OF REPORT

Sketch Plan

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:

G /

Sr Staff Sgt AHMAD RIDZWAN BIN MD YAT

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

17/05/2019 14:43

Officer In Charge Of Case:

TP / AEIT /

SSI 2 YEO GEAK ENG CECILIA

Contact No.: 65476404

Classification Of Case:



SINGAPORE
POLICE FORCE

SIGNATURE

Authentication Stamp

NP168



T/20190517/2092

1 of 3

Report No. T/20190517/2092

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No 0

Report Number T/20190517/2092

Vide Report Number T/20190517/2089

Date/Time of Report Made 17/05/2019 14:51

Place Report Lodged Traffic Police

Type of Informant Driver

Name of Informant Aaron Cheng Jin Rong

ID Type / ID No. NRIC NO / S9916512Z

Home/Office 0

Mobile 96263778

Email

Type of Accident Non-Injury / Foreign Vehicle

Drink Drive No

Anyone conveyed by ambulance No

Date/Time of Accident 16/05/2019 16:30

| Details of Vehicle Involved | | | | | | |
|-----------------------------|---------|------|-------|-------|-------------------|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| JNM9938 | Pick-Up | | | | Slightly Damaged | 1 |
| S1515A | Car | | | | Seriously Damaged | 1 |



T/20190517/2092

2 of 3

Report No. T/20190517/2092

Continuation of CSF For NP168

Brief Facts.

I have lodged a Traffic Accident report T/20190517/2089.

I would like to add on that my car have an in-car camera and there is a recording capturing the accident.



T/20190517/2092

3 of 3

Report No. T/20190517/2092

Continuation of CSF For NP168

Sketch Plan

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.

| | |
|---------------------------|-------------------------------------|
| Case Sensitivity | No |
| Officer-In-Charge of Case | TP / AEIT / YEO GEAK ENG CECILIA |
| Classification of Case | 1) NON-INJURY / FOREIGN VEHICLE |

| | |
|---|---------------------------|
|  | SINGAPORE POLICE FORCE |
|  | |
| SIGNATURE | |

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9916512Z



Name
AARON CHENG JIN RONG

莊 錦 融

Race
CHINESE

Date of birth
25-05-1999

Country/Place of birth
SINGAPORE

Sex
M



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence No. S9916512Z

AARON CHENG JIN RONG

Birth Date: 25 May 1999

Issue Date: 31 May 2018




5371148



NRIC No. S9916512Z



Date of issue
16-10-2014

Address
APT BLK 712 PASIR RIS STREET 72
#03-51
SINGAPORE 510712

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

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight \leq 2500kg 31 May 2018

NP 428A



Licence No: S9916512Z

MOTOR PRIVATE CAR

CERTIFICATE OF INSURANCEMotor 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)

ORIGINAL

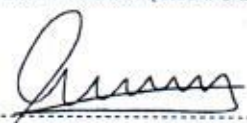
| | | |
|--|---|---|
| CERTIFICATE No. | DMPCSN1740141801 | Engine No :HRA2424042A Chano:SJNFEAJ11U1953966 |
| 1. Index Mark and Registration Number of Vehicle | S1515A | AUTOSAFE ===== |
| 2. Name of Policy Holder | MDM KOH POH CHOO | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment | 05 June 2018 | Named Drivers Ex Sect. I S\$900.00 Additional Ex other than Named Drivers: Ex Sect. I - Age <= 25..... S\$3,000.00 Ex Sect. I - Age >= 26..... S\$500.00 * Age as at date of accident EX ON WINDSCREEN S\$100.00 |
| 4. Date of Expiry of Insurance | 04 June 2019 | |
| 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\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised workshops for each Policy Year. HIRE PURCHASE CO. : HL BANK 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 reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: CHUA SUAT LAY SALLY
Authorised Officer
Authorised Signatory