

NY 119064729.-01

NA1903644		Invoice Information Checklist	Am (S)	Payable (S)
Client's Particulars			Bill	Add Bill
Driver/Owner:		1) AR: Accident Reporting (\$30);	32.00	
Contact No:		2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:		3) TP: Towing Fee \$40/\$45		
OC Checked by (Engr-In-Charge):		4) FT: Follow-Through Survey \$120		
		5) LT: Follow-Through Survey (Resurvey) \$30		
		For retaining status UNC Only (ver 10 Jan 2003)		
		6) TR: Re-Inspection \$75		
		7) NI: Idao DA + SMRT Survey \$160		
		8) NTUC Additional Services:		
		ON*		
		*N5: Courtesy Car / Tpt Allowance \$3		
		*N6: Repair Co-ordination \$10		
		*N7: Post Repair Inspection \$25		
		*N8: DV / Collect Excess Coordination \$3		
		TP (N11): TP (N11 INC) against INC \$20		
		9) N12: Idao Mobile \$0		
		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	18/05/2019 14:45
Date Of Accident	17/05/2019 12:50
Exact Location Of Accident	53 UBI AVE 3 TURNING TO MAIN ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GX7370B
Insured/Policyholder	
Name Of Registered Owner	SINGAPORE CROCODILE (1968) PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67413822
Vehicle Particulars	
Manufacturer	TOYOTA
Model	LITEACE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	B 29045747 MKC
Cover Note Number	-
Driver	
Name of Driver	LIM TAO SOON
NRIC No	S1116650D
Date Of Birth	11/04/1955
Occupation	OUTDOOR
Date Of Driving Pass	29/07/1981
Driving Experience	37 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	+65-96759298
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 12 HOLLAND AVE #08-53
Postcode	272012
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 - MAJOR/MINOR RD
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)	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

I WAS EXITING FROM THE 53 UBI AVE 3, I STOP AT THE STOP LINE TO CHECK ON THE UBI AVE 3 TRAFFIC CLEAR BEFORE TURNING RIGHT INTO UBI AVE 3, THE TRAFFIC ON MY RIGHT AT THE MAIN ROAD HAD STOP DUE TO TRAFFIC LIGHT INFRONT, I FOUND A SPACE FOR ME TO INCHED OUT TO THE MAIN ROAD FOR TURNING RIGHT. WHILE INCHED OUT MY VEH, SUDDENLY A TAXI COME FROM THE RIGHT AND OVERTAKE THE QUEUE TO THE OPPOSITE DIRECTION LANE AGAINST THE TRAFFIC FLOW, AS THE RESULT, MY VEH HIT ONTO THE TAXI LEFT HAND SIDE.

#### 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	SHD1107D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	GOH KENG SIANG
NRIC/Passport Number	S1184381F
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.
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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.



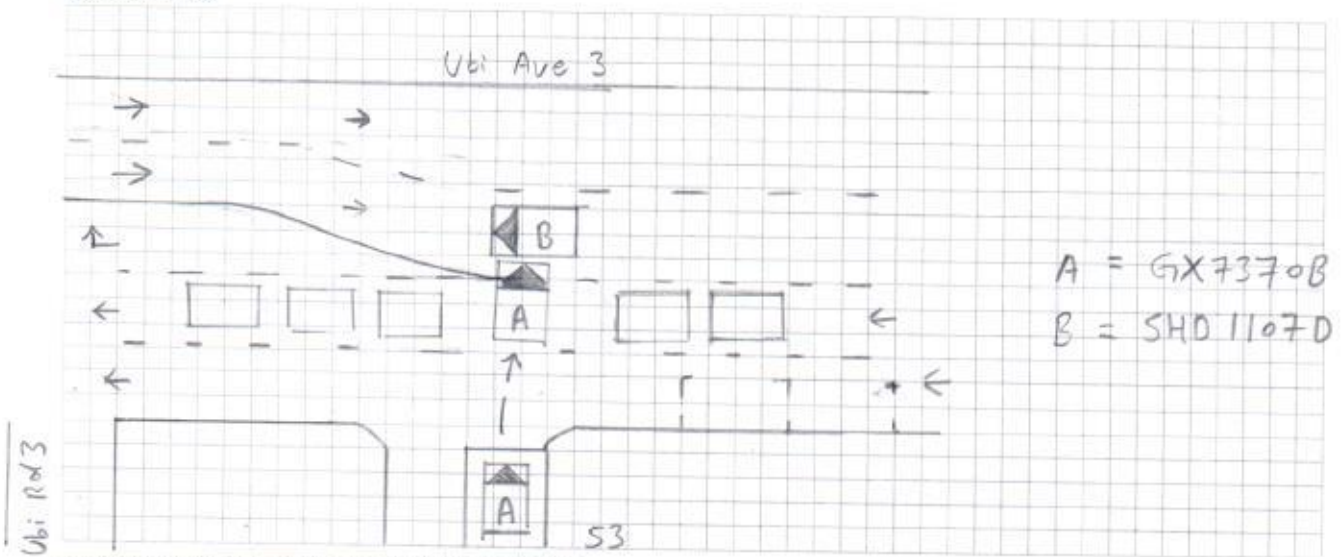
Policyholder's Signature  
Date & Time:

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

18/05/2019

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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to statement

## 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:

18/05/2019

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



**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MNA119064729 Vehicle Registration No: GX7370B  
Name(as shown in NRIC) : SINGAPORE CROCODILE (1968) PTE LTD (Company) NRIC/FIN/Passport No : \_\_\_\_\_  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore( )  
Contact (Tel) : \_\_\_\_\_ Mobile No.: 96759298  
Email Address : \_\_\_\_\_  
Date of Accident : 17/05/2019 Time of Accident : 12:50  
Place of Accident : 53 UBI AVE 3 TURNING TO MAIN ROAD  
Insurance Company: MSIG Insurance

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

amend add in scene photo

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_


\_\_\_\_\_


\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

  
Policyholder / Driver's Signature  
Date: 18/05/2019

  
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date: 18/5/19

**REPUBLIC OF SINGAPORE DRIVING LICENCE**


 Licence Number: **S1116650D**  
 Name: **LIM TAO SOON**  
 Birth Date: **11 Apr 1955**  
 Issue Date: **13 Mar 2004**

001160085G

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S1116650D**


 Name: **LIM TAO SOON**  
 林道存  
 Race: **CHINESE**  
 Date of Birth: **11-04-1955** Sex: **M**  
 Country of Birth: **SINGAPORE**

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

		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	29 Jul 1981
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	27 Aug 1987

NP 428A

Licence No: **S1116650D**

2751488


 NRIC No: **S1116650D**


 Blood Group: **O+** Date of issue: **09-12-1995**

Address:  
**APT BLK 12 HOLLAND AVENUE**  
**#08-53**  
**SINGAPORE 272012**



**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6827 7800  
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.Z.300

Goods Carrying Vehicle - Sch I

COMMERCIAL VEHICLE

Third Party Fire & Theft

Certificate No. B 29045747 MKC

1. Index Mark and Registration Number of Vehicle

GX7370B

2. Name of Policyholder

Singapore Crocodile (1968) Pte Ltd

3. Effective Date of the Commencement of Insurance for the purposes of the Act

01/03/2019

4. Date of Expiry of Insurance

29/02/2020

5. Persons or Classes of Persons entitled to drive\*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or 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 in connection with the Policyholder's business.

Use for the carriage of passengers (other than for hire or reward) in

connection with the Policyholder's business.

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.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

  
for Chief Executive Officer