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TP Particulars:			Tol:	Fax:)
Owner / Driver: (Veh No:	3P5770U.	INC()/Non-INC()	
Policy No: (Tel:	************)
Confirmed by : () Period) Cover Type: ()
Insured/Driver Liability:	(9/) DI	Dat	*)
Year of Registration: (N: 0-20%; P: 21-79%.	F: 80-100%]	
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3) Upload Resurvey Photo	NA 19037	64 Invo	ce Preparation Checklis Accident Reporting (\$30); Damage Assessment (\$100); Towing Fee Follow-Through Survey Follow-Through Survey (Resurve) laiming against JNC Only (wef 10) Re-inspection Idae DA + SMRT Survey C Additional Services; Courtesy Car / Tpt Allowance Repair Co-ordination	INC (\$80) \$40/\$45 \$120) \$30 Jan 2005) \$75 \$160	. # ## T

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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.

- 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	22/05/2019 17:52
Date Of Accident	21/05/2019 08:45
Exact Location Of Accident	JUNC OF JALAN BUKIT MERAH RD AND HENDERSON RD
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKK4888R
Insured/Policyholder	
Name Of Registered Owner	TAN KENG TAT, EDWIN (CHEN QINGDA, EDWIN)
NRIC No	S7911991A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90281808
Alternative Phone No	OTHERS-90281808
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	VANGUARD 2.4S A
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 HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098331719-01
Cover Note Number	
Driver	
Name of Driver	TAN KENG TAT, EDWIN (CHEN QINGDA, EDWIN)
NRIC No	S7911991A
Date Of Birth	14/04/1979
Occupation	OUTDOOR
Date Of Driving Pass	27/11/2003
Driving Experience	15 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90281808
Fax Number	104.4.000 (1970-1970-1970) 1970-1970-1970-1970 1970-1970-1970-1970-1970-1970-1970-1970-
Contact Number	OTHERS-90281808

NOEMAIL

BLK 232 LORONG 8 TOA PAYOH Address

#09-244

310232

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Postcode

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE 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

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)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: NIL

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190522/2128

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

REVERT

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Make/Model/Colour

FBP5770U

Details Of Properties

Vehicle Category

MOTORCYCLE

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.
- 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 .:

SKETCH PLAN	95,	
A-SKK4888R		App (a)
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DECLARATION		100
I/We declare the foregoing particulars are	true in every respect.	1
1.11	/14	1 2-1-12-10
100 Cs	4166	1- 22 5 12019
Policyholder's Signature D	river's Signature	Reporting Centre Personnel's Signature

Date & Time:

(If driver is not the policyholder)

Date & Time:

Name:

NRIC/FIN No.:





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20190522/2128

REPORT OF A TRAFFIC ACCIDENT

	ne Report N)19 17:28	Made:	Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars		THE STATE OF THE S
	Informant: NG TAT, E		Address: APT BLK 232 LORONG 8 TO EIGHT SINGAPORE 310232	OA PAYOH #09-244 TOA PAYOH
	/ ID No.: D / S791199	91A	Contact No.: Home/Office:	Mobile: 90281808
National SINGAP	ity: ORE CITIZ	ΈN	Email:	
Sex: Male	Age:	Date of Birth: 14/04/1979	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupat OTHERS			Driving Licence Information: Class: 3	Date of Expiry:

General Infor	mation of the Accide	nt	antuik esia.	E/Out	2.40
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time o Accident: 21/05/2019		Type of Location:
Location: Junction of Re JALAN BUKIT HENDERSON					
Weather: Clear		Road Surface:		Roa	ad Speed Limit:
Traffic Flow:		Traffic Control:			iffic Volume:
Type of Collis	ion:	·		Any	yone conveyed by bulance:

Details of V	ehicle Involve	d	AND DESIGNATION	State of the State of	THE SHIP NEW	- SW and Table 2017
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBP5770U	Motorcycle					0
SKK4888R	Car	TOYOTA	VANGUARD 2.4S A	White	Slightly Damaged	1

Details of V	ehicle Insurance	Man Charles Law Law	THE SECTION SECTION	30 C A C C C
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKK4888R	NTUC Income Insurance Co-Operative Limited	5098331719-01	26/02/2019	25/02/2020





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20190522/2128

CONTINUATION OF REPORT

Details of Perso	on Involved			ALCO LIVE	-	
Any Pedestrian I	nvolved: No			_		
No. of Pedestrian			Lise of Do	dootrio	. 0	
Driver		Lating 1	Use of Pe	uestna	Cross	sing: NA
Name	TAN KENG TAT, E	DWIN	MANAGEMENT OF THE PARTY OF THE	ID No).	S7911991A
Related Vehicle	SKK4888R (Car)			Conta	act No.	90281808
Hospital/Clinic	NIL			Class Drivin Licen	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		_	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

ON THE ABOVE MENTIONED DATE AND LOCATION,

I WAS FETCHING A PASSNGER AND WAS DRIVING ALONG JALAN BUKIT MERAH AND I WAS PREPARING TO DO A U-TURN INTO THE OTHER SIDE OF JALAN BUKIT MERAH AT THE TRAFFIC JUNCTION WITH HENDERSON ROAD. AS I WAS WAITING FOR THE TRAFFIC LIGHT TO TURN GREEN, A MOTORBIKE CAME RATHER CLOSE TO THE FRONT OF MY CAR AND WAS PREPARING TO DO A RIGHT TURN, AND I HEARD A SCRATCHING SOUND. THE MOTORCYCLIST THEN WAVED APOLOGETICALLY. AS I WAS FETCHING A PASSENGER, I WAS UNABLE TO GET OUT OF THE CAR TO ACCESS THE DAMAGES DONE OR EXCHANGE CONTACT INFORMATION WITH THE RIDER IMMEDIATELY. WE THEN WENT OUR SEPERATE WAYS. AFTER MY PASSENGER ALIGHTED, I WENT DOWN TO CHECK ON MY CAR AND FOUND THAT THERE WERE SCRATCHES ON THE FRONT LEFT SIDE OF MY CAR, SOME DENTS WERE ALSO PRESENT.

THAT IS ALL





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20190522/2128

CONTINUATION OF REPORT

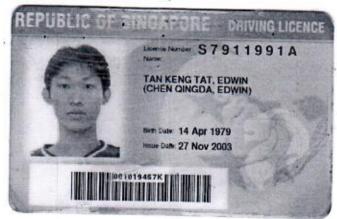
Sketch Plan

Informant is not able to provide sketch plan

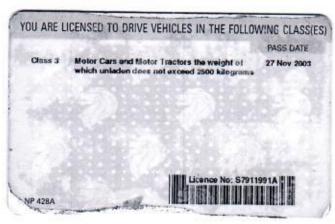
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: TP / LEE CHEN EN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 22/05/2019 17:28
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case: SINGAPORE PULICE FORCE
Authentication Stamp	Signature:









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 21/05/2019 08:45 Vehicle No.(For Motor) SKK4888R Certificate Number Search Certificate Policyholder Name Policyholder NRIC Vehicle No. Select Policy No. Insured Object Commence Date Product Cover Type Expiry Date Number TAN KENG TAT, EDWIN (CHEN QINGDA, EDWIN) 5098331719drivo CLASSIC S7911991A GPC SKK4888R SKK4888R 26/02/2019 25/02/2020 01 Continue

Policy Information

Policyholder S7911991A Policyholder TAN KENG TAT, EDWIN (CHEN Q NRIC Policy No. 5098331719-01 Name Certificate No. Address BLK 232 #09-244 LORONG 8 TOA PAYOH TOA PAYOH EIGHT SINGAPORE 310232 Product PRIVATE CAR INSURANCE Group Plan Name Policy Flag Policy Effective issue 12/02/2019 26/02/2019 00:00 Expiry Date 25/02/2020 23:59 Date Date Third Own Windscreen Party 1500 damage 2000 100 Excess Excess Excess Additional OS 0 Excess Premium Outside Outside Singapore 2000 Singapore OD 1500 TP Excess Excess Agent CAR INNS INSURANCE AGENCY Agent Tel, 64587787 GST Flag Coinsurance No Flag Open Policy Info Certificate Info

Policyholder Mailing Address

Address 1	BLK 232 #09-244	Address 2	LORONG 8 TOA PAYOH	Address 3	TOA PAYOH EIGHT
Address 4	SINGAPORE 310232	Address Type	Singapore address	Post Code	310232
Unit No.	09-244	Related Policy Number	5098331719-01		

Insured Object: SKK4888R

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
	18/03/2019 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 18 Mar 2019, the following policy details are amended as follows: HIRE PURCHASE COMPANY: N/A CHASSIS NUMBER: ACA335156016 ENGINE NUMBER: 2AZ2935715 VEHICLE REGISTRATION NUMBER: SKK4888R ORIGINAL REGISTRATION DATE: 13 Fe 2008

Continue Cancel

Claim Handling Accident MT/1045658

Vehicle No. Cover Type Contact No.(Office) Special Remark TCA NCD Entitlement(%) Accident Report Within 24 hrs Time of Accident hh:mm Orange Force ERSON RD Additional Excess Outside Singapore OD Excess Outside Singapore TP Excess Address 2 Address Type Related Policy Number Driver Type Driver NRIC	GST Registr GST Status LORONG 8 TOA PAYO Singapore address 5098331719-01 Main Driver	Verified	GST Regis Policyhold Loading Contact Ni eCode eCode Rea Private Hir Accident T Country of ICM No. Windscree	er NRIC D.(Home Ison e ype Acciden
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Address Type Related Policy Number Driver Type Driver NRIC	Singapore address 5098331719-01	DH		
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Related Policy Number Driver Type Driver NRIC	5098331719-01		Post Code	
Driver Type Driver NRIC				
Driver NRIC	Main Driver			
Driver NRIC	Main Driver			
	S7911991A		Driver DOB	
Driver Age	40		Driving Exp	erience
Contact No.(Office)	0		Contact No	(Home)
Address 2	LORONG 8 TOA PAYO	ЭН	Address 3	
Address Type	Singapore address		Post Code	
Driver Vehicle No.			Driver Insu	er Com
Any injury?	U Yes ⋅ No			
		OD-MX	■ Insured	TAN KE
			Name Contact	IAN KE
	E	90281808	No. (Home)	
	r		OI	
	E	dwintankt.79@gmail.com	Number	SKK48E
	5	KK4888R / FBP5770U ON	N 21 May 2019	_
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5ef (666)	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on						
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7.23	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2019 10:17	Photos		Normal		Photos	
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