

: MMA119068682

NA1903954		(S)	(S)
Claimants Name:		1) ARI Accident Reporting (\$30);	\$0.00
Driver/Owner:		2) DA1 Damage Assessment (\$100); INC (\$80)	
Contact No:		3) TP1 Towing Fee \$40/\$45	
Damaged Portion:		4) PT1 Follow-Through Survey \$120	
		5) PT1 Follow-Through Survey (Re-survey) \$30	
		For claim against INC Only (w/c 10 Jan 2005)	
		6) TR1 Re-inspection \$75	
		7) N11 Idco DA + SMRT Survey \$160	
		8) NTUC Additional Services:	
		ON:	
		*N5: Courtesy Car / Tpt Allowance \$5	
		*N6: Repair Coordination \$10	
		*N7: Post Repair Inspection \$25	
		*N8: DV / Collect Excess Coordination \$5	
		TP (N11) : TP (Nyn INC) against INC \$20	
		9) N12: Idco Mobile \$0	
QC Checked by (Bgr-In-Charge):		Invoice dated	Fee Charged
Auditors Comments:		Invoice dated	Fee Charged
Sgt. J.			
2/3			

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	27/05/2019 16:14
Date Of Accident	26/05/2019 16:15
Exact Location Of Accident	EUNOS AVE 3 INFRT UNIT 115 TWDS EUNOS RD 8
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT1357S
Insured/Policyholder	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83802233

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE
Exact Purpose for which vehicle was being used at time of accident	WORK
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994387
Cover Note Number	-

Driver

Name of Driver	LEE LIK CHUNG
NRIC No	S1828470G
Date Of Birth	06/11/1967
Occupation	OUTDOOR
Date Of Driving Pass	13/09/1990
Driving Experience	28 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96368306
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 311B ANCHORVALE LANE #17-20
Postcode	542311
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	YES
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)	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

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDV5822Z
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 INJURED PERSON 1

Name	LEE LIK CHUNG
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLT1357S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

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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:

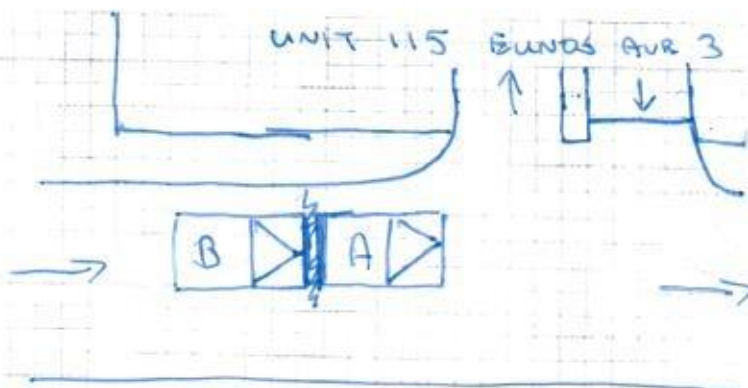


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

VEHICLE A
- SLT 13575

VEHICLE B
- SDV 5822 Z



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING ALONG EUNDS AVE 3 TOWARDING EUNDS RD 8 DIRECTION.

WHILE DRIVING STRAIGHT AHEAD, TURNED ON HAZARD LIGHT, INDICATING MY INTENTION TO STOP MY VEHICLE AS I AM GOING TO UNIT 115 TO PICK UP PASSENGERS. WHILE APPROACHING UNIT 115 AND STOPPED MY VEHICLE FOR PASSENGERS TO BOARD THE VEHICLE. SUDDENLY I FELT A GREAT IMPACT FROM THE REAR OF MY VEHICLE.

ALIGHTED FROM MY VEHICLE SLIGHTLY AFTER THE ACCIDENT. (AS THE IMPACT CAUSES ME NOT FEELING WELL.) AND REALIZED IT WAS A VEHICLE WITH LICENSE (SDV 5822 Z) THAT COLLIDED TO THE REAR OF MY VEHICLE.

THE WHOLE ACCIDENT FOOTAGE WAS CAPTURED BY MY IN-CAR CAMERA. (FRONT AND REAR VIEW)

VEHICLE A - SLT 13575

VEHICLE B - SDV 5822 Z

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)

Reporting Centre Personnel's Signature
Name:

Vehicle No.	SLT 13575	Model / Make	HONDA SHUTTLE HYBRID
Date of Accident	26/05/19		
Time of Accident	1615	HRS	
Location of Accident	BUNOS AVE 3	IN FRONT OF UNIT 115. TOWARD	
Exact purpose use during accident	WORKING HOUR, PICKING UP PASSENGER BUNOS RD 8 AT UNIT 115		
Name of Owner	TWINLAR LAGSING PTIE LTD		
Telephone No.	H/P: 9380 2233	Home :	Office :
NRIC	201533046C		
Address	2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT ANOMUS S(417921)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	AIG		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	999994387		
Name of Driver	As Above If No, LEE LUK CHUNG		
NRIC	518284706	Any Passengers :	NIL
Date of birth	06/11/1967		
Occupation	Outdoor	/ Indoor	
Driving License Pass Date	13 SEP 1990		
Gender	Male / Female		
Contact No.	H/P: 9636 8306	Home :	Office :
Address	BLK 311B ANCHORVALE LANE #17-20 S(542311)		
Driver have any own vehicle	No,	If yes, Reg No.	
Relationship	Employee,	If no, state KINMAL / LABSING	
Weather condition	Clear	Raining	Other
Road Surface	Dry	Wet	Other
Any Injuries	No,	If Yes, Who?	
Name And Contact No.	LEE LUK CHUNG		
Name And Contact No.			
Police Report	No,	If Yes, Where?	
Vehicle B No.	SDV 5822 Z	Any Passengers :	
Name of Driver		Contact No. :	
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E No.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	REAR.		
Camera Recorder	Yes / No	FRONT / REAR	
Email Address			
PARTICULAR WORKSHOP	N-51 AUTOMOTIVE PTE LTD		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	IAN		
FAX NO	6741 0510		
WORKSHOP Email ADDRESS	Sales @ n51.com.sg		

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S1828470G**
 Name: **LEE LIK CHUNG**
 Birth Date: **05 Nov 1967**
 Issue Date: **13 Oct 2003**

000914427K

REPUBLIC OF SINGAPORE


 IDENTITY CARD NO. **S1828470G**
 Name: **LEE LIK CHUNG**
 Race: **CHINESE**
 Date of Birth: **06-11-1967** Sex: **M**
 Country of Birth: **SINGAPORE**

Land Transport Authority

VOCATIONAL LICENCE


 Licence No. **S1828470G**
 Name: **LEE LIK CHUNG**
 Issue Date: **4/12/2013**
 Please visit www.lta.gov.sg to check the status of this vocational licence

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

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	09 Dec 1985
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	13 Sep 1990

NP 428A

Licence No: **S1828470G**

A0092237




 NRIC No. **S1828470G**
 Blood Group: **B+** Date of issue: **28-12-2001**
 Address:
APT BLK 311B ANCHORVALE LANE
#17-20
SINGAPORE 542311

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	04/12/2013





HOTLINE TEL: (65) 6419-3000
FAX: (65) 6415-3723

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)

M 2 400

(The below excess is subject to GST)

COMPREHENSIVE	COMMERCIAL MOTOR	POLICY EXCESS	S\$2000.00 (Sect I & II)
CERTIFICATE NO.	SLT1357S	WINDSCREEN EXCESS	S\$100.00
POLICY NO.	999994387		

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE
FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.

S\$2,000.00 Section I & S\$2,000.00 Section II Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience in Singapore.

Up to \$250.00 one-time waiver excess under section I for build in car camera and applicable on non at fault claim only. (Valid for 6 months).

Accident repair can be carried out at any of your preferred workshop for repair subjected that all claim matters does not involved any lawyer services.

An additional excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.

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) LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

It is hereby agreed and acceptance that we would make special arrangement to this workshop known as N-51 Automotive Pte Ltd to be your accident claim reporting center based on the conditions below.

LOSS OF USE	Not Included
HIRE PURCHASE COMPANY	MAYBANK

*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).

Issued in Singapore 17 Oct 2018

AIG Asia Pacific Insurance Pte. Ltd.

Swift Link Insurance Agency - 502117

61 Ubi Avenue 2

#08-04A Automobile Megamart

Singapore 408898

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	SLT13575		
Vehicle Type:	Z11 - Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	HONDA	Vehicle Model:	SHUTTLE HYBRID 1.5 AUTO
Chassis No.:	GP71121020	Engine No.:	LEB6325921
Motor No.:	H13626058	Trailer Chassis No.:	-
Propellant:	Petrol-Electric	Passenger Capacity:	4
Engine Capacity:	1496 cc	Power Rating:	22.0 kW
Maximum Power Output:	101.0 kW (135 bhp)		
Unladen Weight:	1190 kg	Maximum Laden Weight:	1465 kg
Primary Colour:	Silver	Secondary Colour:	-
First Registration Date:	19 Oct 2017	Original Registration Date:	19 Oct 2017
Manufacturing Year:	2017	Open Market Value:	\$21,297.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$2,500.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$20,000.00 (100%), next \$1,297.00 (140%)
Actual ARF Paid:	\$5,000.00		

Owner Particulars

Owner Name:	TWINCAR LEASING PTE LTD
Owner ID Type:	Company
Owner ID:	201533046C
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block /House No.:	2
Registered Street Name:	KAKI BUKIT AVENUE 2
Registered Unit No.:	# 01 - 17