NATIONAL Assessment Ce	ntre Services.	wef James Me	T L SICCOLD		
Date In: 3/6/19 - 10:57	Jcb descript		Date & Time Completed	Do	ne by
Ref No: HA (177) 20 9721724	SAS e-filir	ng			
Veh No: x7 44360	E-mail (wit	thin Shrs, AIC 2hrs)			
D.O.A: 1/6/19 - 18:00		laim Form		- TILLING WE	
AND ACTION OF THE PROPERTY OF		7/O (Within: OD 2hrs,	TP (hrs)		•
OD / TP / Reporting-Only	i-Photo Up		1		
TP Insurer:		Survey Report			dice.
IP Insurer:		t by Fax / Hand to	Owner/Wksn		
Preferred Wksp / INC Assign Wksp / QW:					-
TP Particulars: Veh No: 4		. INC(ax:	
Owner / Driver: (22010	. INC()/Non-INC()		
Policy No: (Period: (``	Cover Type: ()	
Confirmed by : (Date:	Time:		
Insured/Driver Liability: (%	(i) [Note-Est Status		%; P: 21-79%. P: 80-1	, ,	
Year of Registration: ()			76, F. 21-7976. F: 50-1	00%]	
Excess: (\$) Loading: \$, , ,			
CA MOVE A SHE ARE THE TOTAL OF THE SHEET OF					
		NO (); To	wing Co: ()
Remarks: (INC hotline: 6788 6616) programme in the	17.55	Date&Time Completed	Don	a hu
	/ Courtesy Car ()			9,13
2) QC Check / Post Repair Inspection	()	*		
Upload Resurvey Photo [Repair Cost >	\$3000] ()			
Injury:		The state of the s			
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Date/Time Actions			The state of the state of		
1.0				NAST 18125 N. 3.5	
	- 4				
191904178		Invoice Prepa	ation Checklist	Anit (S)	Amt (
aimant's Particulars :-		1) AR : Accident Re	porting (\$30);	Tat Bill	Add B
iver/Owner:		2) DA : Damage Ass 3) TF : Towing Fee			- Language
		4) FT : Follow-Throu	gh Survey \$1		
		5) FT : Follow-Throu		30	
maged Portion:		6) TR : Re-inspection		75	
	3	7) N1 : Idac DA + SN 8) NTUC Additional		60	
Checked by (Engr-In-Charge):		OD.			
		*N5: Courtesy Car		\$3	
ditors! Comments :-		*N6; Repair Co-on *N7; Fost Repair I		25	-
1:	來的被制作。這個的	*N8: DV / Collect	Excess Coordination 3	55	
		TP (N11): TP (N: 9) N12: Idno Mobile		30	
2/3;		Invoice dated	Pee Charged		ar at
tion.		Invoice dated	Fee Charged	SHEET IN	77.12-62

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 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.
- 5. 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

A. A	ACCIDENT STATEMENT	
Date Of Report	03/06/2019 10:57	
Date Of Accident	01/06/2019 18:00	
Exact Location Of Accident	TPE TWDS CHANGI BEFORE EXIT 3C	
Country/State of Loss	SINGAPORE	
MARKET WASHINGTON TO THE RESERVE OF THE	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	XD4436U	
Insured/Policyholder		
Name Of Registered Owner	KOK TONG TRANSPORT & ENGINEERING WORKS PTE LTD	
Co Reg No	199904117E	
Email Address	NOEMAIL	
Mobile Phone No		
Alternative Phone No	OFFICE-89999999	
Vehicle Particulars		
Manufacturer	MITSUBISHI	
Model	FV51JJD4RDEA	
Exact Purpose for which vehicle was being used at time of accident		
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	
Type Of Coverage	THIRD PARTY	
Fleet Policy	NO	
Policy Number	DMCVSN1818681800	
Cover Note Number		
Driver		
Name of Driver	SUN HONGSHENG	
Passport No/FIN	G2154477P	
Date Of Birth	G2154477P 17/06/1973	
Occupation	OUTDOOR	
Date Of Driving Pass	12/04/2013	
Driving Experience	6 YEARS AND 1 MONTH	
Sender	MALE	
Mobile Number	(LOCAL) +65-96727669	
ax Number		
Contact Number	OFFICE-96727669	
Mail Address	7,000	

NOEMAIL

Address 27 PANDAN CRESCENT Postcode 128476 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 - 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) 2 involved in the accident 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) NO soliciting/offering accident claims assistance. 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 REFER TO STATEMENT. 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

XE3059B

Vehicle Make/Model/Colour

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

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- 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.
- Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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.
- 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:
 - 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)

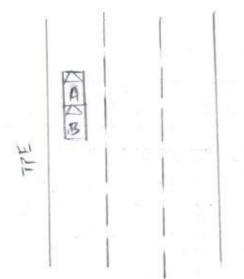
Date & Time:

Reporting Centre Personne's Signature

Name:

NRIC/FIN No.:

C . B . P	ETC	 111 - 4	5. 7. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 1st June 2019 at 1800hrs, I was driving XD4436U along	g TPE(Changi)before
C exit, I felt an impact from my rear, I stopped my truck(XD	
(KL lorry(XE3059B) collided to my rear of XD4436U. No on	
CLARATION	

I/We declare the loregoing particulars are true in every respect.

Policyholder's Signatule

Date & Time:

Driver's Signature

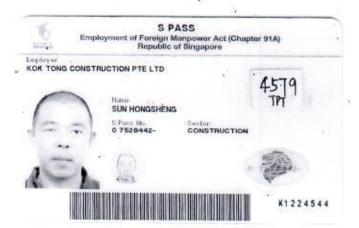
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





FOR LANGINAL USE OTHY



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

EFFECTIVE DATE

17 Dec 2012

Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg Motor vehicles which are not constructed to carry load or passengers and the unladen weight =< 7250kg load or passengers and the unladen weight =< 7250kg

12 Apr 2013

NP 428A





中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Co. Reg. No. 200208384E

MZ300/C

N SN BR0072A

MOTOR COMMERCIAL VEHICLE

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)

Cov. Type: T PLM 315309

ORIGINAL

CERTIFICATE No.

DMCVSN1818681800

Engine No :6M70429051

ChaNo: FV51JJA00439

1. Index Mark and Registration

Number of Vehicle

XD4436U

2. Name of Policy Holder

KOK TONG TRANSPORT & ENGINEERING WORKS PTE LTD

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

4. Date of Expiry of Insurance

12 July 2019

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their 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:*
 - (1) Use in connection with the Policyholder's business.
 - (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 - (3) Use for social, domestic or pleasure purposes.
 - The Policy does not cover.
 - (1) Use for hire or reward or 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.

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:

Authorised Officer

Authorised Signatory