NATIONAL Assessment Centre Services :		
Date In: 06 06 2019 17:29 Jeb description	Oute & Fine Completed	Done by
Ref No: NBA/LIP190 10016/24 SAS c-Ming		
Veh No: SLQ 6168 D E-mail (without 8h	irs, AIC 2lus)	
DOA: 05/06/2019 12:25 T-Motor Claim	Form .	
i-Motor W/O	(Within: OD 2hrs. TP 4hrs)	
OD TP : Reporting Only I-Photo Uploa		
Assessment/Sur		
	Fax / Hand to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: (The same of the sa	ax:)
TP Particulars: Veh No: JNV521	[INC()/Non-INC().	
Owner / Driver: (T'el;)
Policy No: () Period: () Cover Type: ()
Confirmed by : (Date: Time:)
Insured/Driver Limbility: (%) [Note-Est Status (W	O): N: 0-20%; P: 21-79%. F: 80-	100%]
Year of Registration: () Warranty; YES ()/NO()	
Excess: (\$) Loading: \$1,000 ()/\$2,000	()	
General Remarks:		1. 4.1.1
() Walk-In Customer's Customer's information strictly Cor	offdential & Strictly NO refer of repairer	
() Total Loss Case : to e-mail Insurer URGENTLY.	O(); Towing Co: (
Drive-In () / Towed-In (); Invoice: YES () / N		
Remarks: (INC hotline: 6788 6616)	Date&Time Completed	Done by
i) Apply for Transport Allowance ()/ Courtesy Car ()	
2) QC Check / Post Repair Inspection ()	ļ
3) Upload Resurvey Photo [Repair Cost > \$3000] ()	
Injury:		
Date/Pime Actions		Augusta .
Ditterrunes Actions	6351 Sept. 200 pagarana and 120 pagarana	
11 1/4 100 1E1 715	Invaice Preparation Checklist	Anil (5) Amil (5)
"NH 1904174	1) AR : Accident Reporting (\$30);	Mad Bill Add Bill
Chamant's Particulars :-	2) DA ; Dumnge Assetsment (\$100); INC	(580)
Driver/Owner:	3) TF: Towing Fee 4) FT: Fallow-Through Survey	\$120
Contact No:	5) FT : Follow-Through Survey (Resurvey) For claiming against INC Only (well 10 Jan.	530
	6) TR: Ite-inspection	575
Damaged Portion:	7) N1 : Idao DA + SMRT Survey 8) NTUC Additional Servines:	\$160
	012	
QC Checked by (Engr-In-Charge):	* N5: Courteay Cor / Tpt Allowance * N6: Repair Co-ordination	510
Name of the Control o	*N7: Fost Repair Inspection	525
Auditors Comments:	*N8: DV / Collect Excess Coordination	\$5
Cal.J.:	22 (N11) : TF (N-16 INC) against INC 9) N12: Idea Mobile	30
Cat. 2/3:	Invoice dated Fee Char	yad Sala
1 / 1 / 1	Fue Char	DE SPENITS BY

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 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	06/06/2019 17:29
Date Of Accident	05/06/2019 12:25
Exact Location Of Accident	PIE(TUAS)AFTER EXIT27TO CLEMENTI AVE6/TOHTUCKAVEE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLQ6168D
Insured/Policyholder	
Name Of Registered Owner	VICTORY ELITE
Co Reg No	
Email Address	ROBIN_SOUL@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96980660
Alternative Phone No	OFFICE-96980660
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	
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	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V06057/VPL/R00
Cover Note Number	

Driver

Name of Driver ROBIN ZHUO HONGLIN

 NRIC No
 \$8335327I

 Date Of Birth
 09/11/1983

 Occupation
 INDOOR

 Date Of Driving Pass
 17/10/2005

Driving Experience 13 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96980660

Fax Number

Contact Number OTHERS-96980660

EMail Address ROBIN_SOUL@HOTMAIL.COM

Address BLK 334D YISHUN STREET 31

#14-127

Postcode 764334

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 Registration Number of Driver

#1 #1

Insurance Company of Driver's Own Vehicle

_

General Information of the Accident

Type Of Accident CHAIN COLLISION

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

NO

1

3

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-8522999 - FAX NO: 68522239

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190605/2047

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 JNV5216

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver HO GEE HIUNG

NRIC/Passport Number G8394473R Contact Number 90553286

Address Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

JLW1126

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)

Page 3 of 31

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.
- 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:
 - 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.

SETORY EL MEL MOL SESSIONES POR

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 .:

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 .:





1 of 4 Report No. T/20190605/2047

REPORT OF A TRAFFIC ACCIDENT

	ne Report I 019 14:23	Made:	Vide Report No.:	Station Diary No.: 55	
Informa	nt's Partic	ulars			
Name of Informant: ROBIN ZHUO HONGLIN			Address: APT BLK 334D YISHUN STREET 31 #14-127 SINGAPORE 764334		
The second secon	/ ID No.: O / S83353	271	Contact No.: Home/Office:	Mobile: 96980660	
National SINGAP	ity: PORE CITIZ	ŒN	Email:		
Sex: Male	Age:	Date of Birth: 09/11/1983	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Private Investigator			Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:	

General Infor	mation of the Accident			
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 05/06/2019 12:25	Type of Location: Straight Road
ASSAULTE SINE DE CONTROL	EXPRESSWAY after exit 27, leading to 0		Tuck Avenue exit	Road Speed Limit:
Clear		Dry		rtodd Opecd Eirint.
Traffic Flow:		Traffic Control:	138	Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear		8	Anyone conveyed by ambulance: No	

THE RESIDENCE AND PARTY OF THE	ehicle Involve	d		The Sales		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
JLW1126	Car					0
JNV5216	Motorcycle					0
SLQ6168D	Car				Slightly	0





Report No. T/20190605/2047

2 of 4

CONTINUATION OF REPORT

Any Pedestrian I	nvolved: No			A STATE OF PERSONS ASSESSED.
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Rider				
Name	HO GEE HIUNG	10	No.	G8394473R
Related Vehicle	JNV5216 (Motorcycle)	C	ontact No.	90553286
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Dischar		
No. of Days gran	ted Medical Leave NIL	Degree of Inj		
Driver	TO SEE SHOULD BE SEEN THE SEE	WHITE BEEF		100 100 E-200 d
Name	ROBIN ZHUO HONGLIN		No.	S8335327I
Related Vehicle	SLQ6168D (Car)		ontact No.	96980660
Hospital/Clinic	NIL		ass of riving cence & cpiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Dischar		
No. of Days gran	ted Medical Leave NIL	Degree of Inj		

Brief Details.

On 5/6/2019 at about 12:26 pm, I was driving my car (red Renault, registration no: SLQ6168D) along PIE towards Tuas, and took Exit 27 as I intended to head straight towards Toh Tuck Ave. Up ahead, there is a fork in the road where drivers can either take the exit into Clementi Ave 6 or Toh Tuck Avenue. The traffic leading into Clementi Ave 6 is quite heavy, and there is a long queue. However, there is no traffic leading to Toh Tuck Avenue and thus I was travelling about 50 km to my destination. As I was driving, there is a Malaysian car (silver Toyota Vios, registration no: JLW1126), in front of my car.

At the last moment in the road which branches out to two different exits, the driver of the Malaysian car suddenly turned into Clementi Avenue 6. As it was so sudden, I had to jam-brake my car in order not to collide into the Malaysian car. I also had to stop my car for a short while, as my car could not go through in order to proceed to Toh Tuck Avenue. I then honked to the driver, however he just ignored me. From the rearview mirror of my car, I then noticed that from far away, a Malaysian motorbike (black-and-white Yamaha, registration no: JNV5216) speeding towards my car.

I proceeded to honk my car and also turned on the signal lights of my car in order to alert the Malaysian motorbike to my presence. However, the rider of the motorbike did not appear to slow down, and subsequently the motorbike collided into the rear of my car. Fortunately, I was not injured.

Thereafter, I alighted from my car and assisted the rider of the motorbike. He also had a pillion with him. Both parties informed me that they are not injured, however the rider said that he felt pain on one of his shoulders. When I enquired, the rider claimed that he is rushing to work and told me why I suddenly stopped my car. However, I wish to state that the motorbike was quite far away when my car was already stationary. He also claimed that his motorbike did not collide with my car. However, I wish to state that





3 of 4 Report No. T/20190605/2047

CONTINUATION OF REPORT

this is untrue and there was collision earlier. I told him that the collision had caused damages to my car's bumper. The whole bumper came off and there are scratches at the rear.

We exchanged particulars, and the rider even offered to meet tomorrow in order to settle the damages. However, I decided to lodge a police report instead. I wish to state that the pillion was not very cooperative during the accident.





4 of 4 Report No. T/20190605/2047

GONTINUATION 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:	Signature Of Informant:
Sr Staff Sgt MOHAMAD FAIROZ BIN MOHAMED MAKHROF	Im
Signature Of Interpreter: Not applicable	Date/Time: 05/06/2019 14:23
Officer In Charge Of Case: TP / AEIT / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp	- Kud

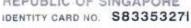
Reportedon 6/6/2019 @ 092XAN · (Bukit Merah)

ACCIDENT STATEMENT

ACCIDENT DATE: 56 2019 (DD/MM/YYY), TIME: 12:25 (HH:MM)
LOCATION: PIE (TUAS), after exit 27
1. DETAILS OF VEHICLE
a) VEHICLE NUMBER: SLQ6168D .
b)INSURANCE COMPANY:
c)POLICY NUMBER:
d)POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)
OJMAKE & MODEL:
DTYPE:(SALOON COURS (MRY MAN)
() TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE) h) PURPOSE OF USING AT ACCIDENT TIME:
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO. PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)
2. INSURED / FOLICY HOLDER
A) NAME: (MALE / FEMALE)
b)NRIC/FIN/PASSPORT:CONTACT:
c)ADDRESS:
* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER
The of passanger DRIVER .
Clincludina diser Clinchales
DINRIC/FIN/PASSPORT: CONTACT: 96980660
c)ADDRESS:
*d)DATE OF BIRTH: (/
e)OCCUPATION; (INDOOR / OUTDOOR)
FIDATE OF DRIVING PASC
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:
5. d) WEATHER CONDITION: (CLEAR / RAINING / OTHERS
b)ROAD SURFACE: (DRY / WET / OTHERS
6. WAS ANYBODY INJURED (YES / NO)
/. a) REPORTED TO POLICE (YES / NO)
IF YES, PLEASE STATE WHICH POLICE STATION
8. IHIRD PARTY VEHICLE Motore /
Including driver) DI DRIVER'S NAME: TO GEE HILLNG
() NRIC/FIN/PASSPORT: 6 839 4473 CONTACT: 90553286
THING PART VEHICLE
MODEL:
Indudes de la Company de la Co
(CONTACT:

email = Robin_Soul@hotmail.com VIDEO Robin_Soul@hotmail.com

REPUBLIC OF SINGAPORE







ROBIN ZHUO HONGLIN



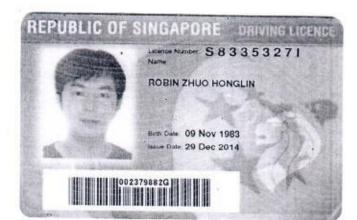
CHINESE

Date of birth

09-11-1983

SINGAPORE





5318935



NRIC No. S83353271

18-06-2014

APT BLK 334D VISHUN STREET 31 #14-127

SINGAPORE 764334

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

EFFECTIVE DATE

 Class 2B
 Motorcycles =< 200 cc</td>
 11 Jul 2002

 Class 2A
 Motorcycles between 201 cc and 400 cc
 19 Aug 2003

 Class 2 (Class 2 (Class 3 of the driver; and other motor vehicles =< 2500kg</td>
 26 Apr 2005

 To class 3 of the driver; and other motor vehicles =< 2500kg</td>
 17 Oct 2005

NP 428A

Licence No. \$8335327i





Liberty Insurance Pte Ltd

Registration no. 199002791D 51 Club Street #03-00 Liberty House Singapore 069428 Tel: (65) 6221 8611 Fax: (65) 6225 6890 Website: http://www.libertyinsurance.com.sg

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)

Certificate No	SD18V06057 /VPL /R00	
From	MZ400B	
Date Of Issue	19-JUN-2018	
1.Index Mark and Registration No. of Vehicle:	SLQ6168D	
2.Chassis number of Vehicle:	VF1RFB00X56588901	
3.Name of Policyholder:	VICTORY ELITE	
4.Effective date of Commencement of Insurance for the purpose of the Act:	17-JUL-2018 00:00 AM	
5.Date of Expiry of Insurance:	16-JUL-2019 23:59 PM	
6.Persons or Classes of Persons entitled to drive*:		
For Uber/Grabcar Usage :	ROBIN ZHUO HONG	

For Social, domestic & pleasure purposes : Any Authorised Drivers driving with the permission of the Policyholder.

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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7.Limitations as to use*:

- A) Use for carriage of passengers or goods in connection with the Policyholder's business.
- B) Use for social, domestic and pleasure purposes.

8. Policy does not cover:

A) Use for racing, pace-making, reliability trials or speed-testing.

B) Use whilst drawing a trailer except the towing (other than for reward) 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).

For and on behalf of LIBERTY INSURANCE PTE LTD

Approved Insurers

Ross 1

Authorised Signature

For Information only:

COVERAGE:

Comprehensive, Unlimited Windscreen, Grabcar Extension (Geographical Area: Singapore only)

SUM INSURED: MARKET VALUE AT THE TIME OF LOSS.

EXCESS:

Section I (Singapore) S\$2000, Section I (Outside Singapore) S\$4000, Section II (Singapore) S

\$1500, Section II (Outside Singapore) S\$3000, Windscreen Excess S\$100

FINANCE COMPANY:

MAYBANK

PRODUCER NAME:

SC ALLIANCE PTE LTD

PLSL/-/19-JUN-18

S1_CI_T1_T3_OE_Template6-Ver1. 19-JUN-18

Jun 19, 2018, 5:42 PM