

NATIONAL Assessment Centre Services

(wef 1 Jan 05) **MA1909114V**

Date In: 14/1/19-14:25	Job description	Date & Time Completed	Done by
Ref No: MA1909114V	SAS e-filing		
Veh No: SIC28357X	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 11/1/19-12:45	i-Motor Claim Form		
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: **MA1909114V**

INC () / Non-INC ()

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured/Driver Liability: (

%)

[Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]

Year of Registration: (

Warranty: YES (

)/ NO (

Excess: (\$

Loading: \$1,000 (

)/ \$2,000 (

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:

(INC hotline: 6788 6616)

Date & Time Completed

Done by

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time

Actions

MA1909114V

Invoice Preparation Checklist

Am't (\$)

Am't (\$)

1st Bill

Add Bill

Claimant's Particulars:-

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$80)

3) TF: Towing Fee \$40/\$45

4) FT: Follow-Through Survey \$120

5) FT: Follow-Through Survey (Resurvey) \$30

For claiming against INC Only (wef 10 Jan 2005)

6) TR: Re-inspection \$75

7) N1: Idac DA + SMRT Survey \$160

8) NTUC Additional Services:-

ON*

*N5: Courtesy Car / Tpt Allowance \$5

*N6: Repair Co-ordination \$10

*N7: Post Repair Inspection \$25

*N8: DV / Collect Excess Coordination \$5

TP (N11): TP (Non INC) against INC \$20

9) N12: Idac Mobile 30

Invoice dated

Fee Charged

Invoice dated

Fee Charged

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Ref 1:

Ref 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	12/07/2019 14:25
Date Of Accident	11/07/2019 12:45
Exact Location Of Accident	JUNC KAMPONG KAPOR RD & SYED ALWI RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKZ8393X
Insured/Policyholder	
Name Of Registered Owner	KEM AUTO
Co Reg No	53309211J
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999
Vehicle Particulars	
Manufacturer	TOYOTA
Model	VIOS E MANUAL
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	18-MJ001016-R00
Cover Note Number	
Driver	
Name of Driver	TAN KHAI WANG
NRIC No	S2562634F
Date Of Birth	02/11/1964
Occupation	INDOOR
Date Of Driving Pass	15/12/1982
Driving Experience	36 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91309972
Fax Number	
Contact Number	OFFICE-91309972
Email Address	NOEMAIL

Address	400 BALESTIER ROAD #08-01
Postcode	329802
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 - 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?	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)	5
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : MALE
Passenger 3	NAME: : - GENDER: : MALE
Passenger 4	NAME: : - GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	MOULMEIN NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 101 JALAN RAJAH , POSTCODE: 320101 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2508999 - FAX NO: 63554312
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT- T/20190711/2139. I WAS TRAVELLING STRAIGHT SLOWLY SUDDENLY A TAXI (SHB6319L) DID NOT ENSURE CLEAR TRAFFIC AND DROVE OUT WITHOUT STOPPING AT THE STOP LINE AND CAUSE THE ACCIDENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES

Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB6319L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2
Passenger 1	NAME: : GENDER: :

DETAILS OF INJURED PERSON 1

Name	TAN KHAI WANG
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SKZ8393X
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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**.
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. 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.

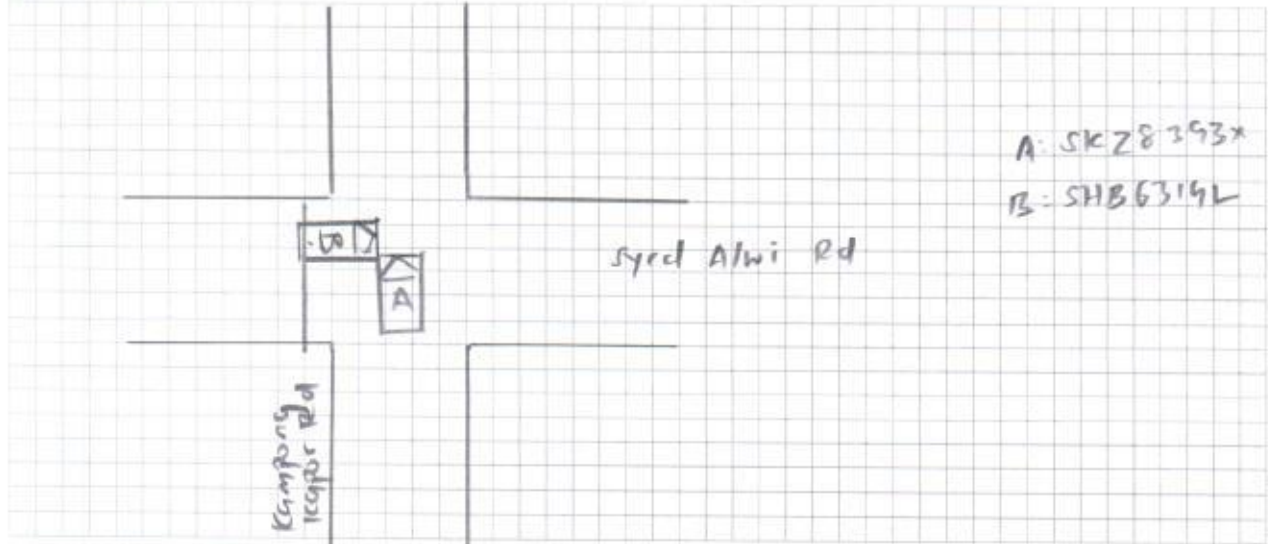


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 1701902111/2139.

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:

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



SINGAPORE POLICE FORCE



T/20190711/2139

Police Station Of Origin:
Moulmein NPP
101 Jalan Rajah #01-01 SINGAPORE
321101
Tel No: 1800-25089999

1 of 3

Report No. T/20190711/2139

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/07/2019 21:01		Vide Report No.:		Station Diary No.: 47	
Informant's Particulars					
Name of Informant: TAN KHAI WANG			Address: 400 BALESTIER ROAD #08-01 SINGAPORE 329802		
ID Type / ID No.: NRIC NO / S2562634F			Contact No.: Home/Office: Mobile: 91309972		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 54	Date of Birth: 02/11/1964	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SALES			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/07/2019 12:45	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 KAMPONG KAPOR ROAD SYED ALWI ROAD Twds Kitchener Road, Near Mustafa Center				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB6319L	Car				Slightly Damaged	1
SKZ8393X	Car				Slightly Damaged	4

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190711/2139

Police Station Of Origin:
Moulmein NPP
101 Jalan Rajah #01-01 SINGAPORE
321101
Tel No: 1800-25089999

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Report No. T/20190711/2139

CONTINUATION OF REPORT

Driver			
Name	TAN KHAI WANG	ID No.	S2562634F
Related Vehicle	SKZ8393X (Car)	Contact No.	91309972
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	11/07/2019	Date Discharge	11/07/2019
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

On 11/07/2019, at about 1245hrs, I was driving my vehicle SKZ8393X together with 4 other passengers. I was travelling along Kampong Kapor Road towards Kitchener Road. As I was approaching the junction of Kampong Kapor Road and Syed Alwi Road, I slowed down as the area was not controlled by traffic light.

As I was moving off to the main road, one vehicle SHB6319L which was travelling along Syed Alwi Road dashed out and I collided onto his right front vehicle. I then alighted from the vehicle and make a check. I make a check on my vehicle, noticed there are dent and scratches on the front bumper. The vehicle whom I collided with is one blue Comfort taxi SHB6319L. I noticed that there is one female Indian passenger in the taxi as well.

The taxi driver and I exchanged particulars. No ambulance and traffic police were at scene. Thereafter, my 4 passengers and me proceeded to seek medical treatment. I was then treated as Outpatient at Mount Alvernia Hospital on 11/07/2019, and was given Outpatient Sick Leave from 11/07/2019 to 14/07/2019.

I wish to state that my vehicle has an in built vehicle camera and it can used to aid in investigation. The medical certificate details of my passengers can be found T/20190711/2133.



**SINGAPORE
POLICE FORCE**



T/20190711/2139

Police Station Of Origin:
Moulmein NPP
101 Jalan Rajah #01-01 SINGAPORE
321101
Tel No: 1800-25089999

3 of 3

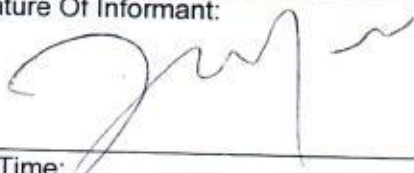
Report No. T/20190711/2139

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: E / Sgt 2 TAN JUN WEN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 11/07/2019 21:01
Officer In Charge Of Case: TP / AEIT / Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID Contact No.: 65476172	Classification Of Case:
Authentication Stamp NP168	SN 080

SIGNATURE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2562634F



Name

TAN KHAI WANG

Race

CHINESE

Date of birth

02-11-1964

Sex

M

Country of birth

MALAYSIA

S2562634F

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

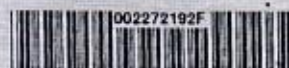


License No. S2562634F

TAN KHAI WANG

Birth Date 02 Nov 1964

Issue Date 05 Feb 2014



002272192F



4855510

NRIC No. S2562634F



Date of issue

02-04-2012

400 BALESTIER ROAD #08-01
SINGAPORE 329802

NRIC No. S2562634F

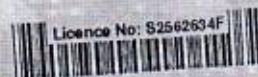
Date: 25/06/2019

For LKK/NAC Use Only

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

EFFECTIVE DATE

15 Dec 1982
of the driver and other motor vehicles < 2500kg



License No: S2562634F

NP 428A

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)
20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046
T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com



TOKIO MARINE
INSURANCE GROUP

FORM MX1 H

A member of the
Tokio Marine Group

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)

Policy No.: 18-MJ001016-R00 (Private Motor Car)

1. **Index Mark and Registration Number of Vehicle** SKZ8393X **Chassis No.:** MR053HY9305094648
2. **Name of Policyholder** KEM AUTO
3. **Effective date of the Commencement of Insurance for the purposes of the Act** 04/01/2019
4. **Date of Expiry of Insurance** 23/07/2019
5. **Persons or Class of Persons entitled to drive***
Any person who is driving on the Policyholder's order or with their permission.
The hirer.
Any other person who is driving on the hirer's order or with his/ 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. 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.

6. **Limitations as to use***
Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.
Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.
The Policy does not cover:-
1) Use for 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.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 2397DDA

Insurance Plan: Third Party Cover Only
Policy Excess: Excess-Third Party (Sect II) SGD 2,000

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Tay Pui Leng Katherine -

Printed 04/01/2019