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i-PI	ioto Uploadeti		Day cursories	
TP Insurer:	ssment/Survey Report			
Ass'	t Report by Fax / Hand	to Owner/Wksp		
Preferred Wksp /4NC Assign Wksp / QW: (Tel:	Fax:	1
TP Particulars: Veh No: FI3H 67	1214 INC	(,)/Non-INC()	
Owner / Driver: (7'cl:)
Policy No: () Period: (Cover Type: ()
Confirmed by : (Date:	Tinte:		1
		-20%; P: 21-79%. F:	80-100%]	
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General Remarks:	Children British	2 17年初8年12日	dene	
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() Total Loss Case : to e-mail Insurer URG		Tawing Co. (·)
Drive-In()/ Towed-In(); Invoice: YES()/NO()	; Towing Co: (
Remarks (INC horling: 6788 6616)		Date&Time Comple	oct of the	Done by
Apply for Transport Allowance () / Courtesy	Car ()			
2) QC Check / Post Repair Inspection	()			
3) Upload Resurvey Photo [Repair Cost > \$3000]	()			
Injury:				
Date/Tune Actions			2 15 Table	11-90
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laumantis Particulars :-	I) AR : Acc	eldent Reporting (\$30);	INC (\$80)	
AND DESCRIPTION OF TAXABLE PROPERTY AND ADDRESS OF TAXABLE PROPERTY.	3) TF: To	minge Assessment (\$100);	\$40,'\$45	
Driver/Owner:	5) FT : Foll	low-Through Survey low-Through Survey (Resurvey	5120	
Contact No:	Fortlain	plus against INC Only (wel 10	Jan 2005) 575	NOT THE REAL PROPERTY.
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	8) NTUC /	Additional Servines:		
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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.

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

Charles the real particular particular and the	ACCIDENT STATEMENT
Date Of Report	16/07/2019 14:25
Date Of Accident	15/07/2019 10:10
Exact Location Of Accident	AYE TOWARDS CITY BEFORE CLEMENTI AVENUE 6 EXIT 11
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	FBB9395S
Insured/Policyholder	
	WANG ZHIGANG
Passport No/FIN	G29881465
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96979387
Alternative Phone No	OFFICE-96979387
Vehicle Particulars	
Manufacturer	YAMAHA
Model	X-1R-135CC (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	MOTORCYCLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5062340715-05
Cover Note Number	
Driver	
Name of Driver	WANG ZHIGANG
Passport No/FIN	G29881465
Date Of Birth	11/08/1984
Occupation	OUTDOOR
Date Of Driving Pass	14/09/2013
Driving Experience	5 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96979387
Fax Number	2002
Contact Number	OFFICE-96979387

NOEMAIL

Address

BLK 36 BEO CRESCENT

#09-49

Postcode

160036

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

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLIDED INTO MOTORCYCLIST

Weather Conditions

AFTER RAIN

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

3

involved in the accident

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 SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FBH6721Y

Vehicle Make/Model/Colour

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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

EN900U

Page 2 of 23

Vehicle Make/Model/Colour

MERCEDES BENZ

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

WANG ZHIGANG

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBB9395S

Were seat belts worn?

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.
- 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: 16/07 /2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature /

Name:

NRIC/FIN No.:

SKETCH PLAN	AYE TOWARD	s cny blf	CLEMENTI AV	H 6
A) FBB9 B) FBH C) EN°	3955 67217 100U	全 圖		
DESCRIBE CIRCUMST	ANCES OF THE ACCIDENT	1/1/		

FBH 6721》向右割车先播倒至我和车不及的横上去了。	3 EN 900 U	倒地、刚好就在我前面
1到至我到弃不及也撞上去了, FBB939\$5		
/ F8617135 \		

DECLARATION

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

Policyholder's Signature Date & Time: 16/07/2019.

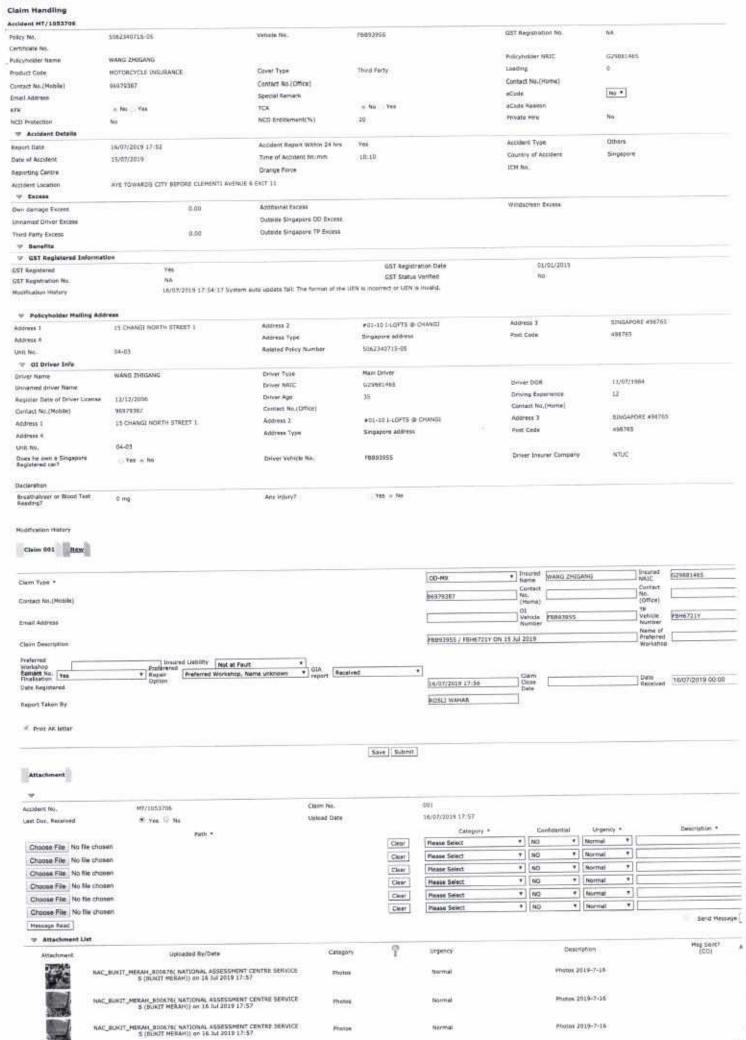
Driver's Signature (If driver is not the policyholder) Date & Time:

NRIC/FIN No.:

Reporting Centre Personnel's Signature

Reporting Centre Personnel's Signature

Reporting Centre Personnel's Signature



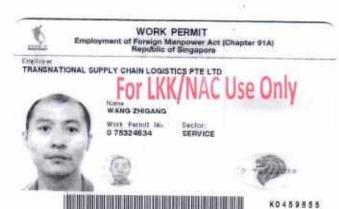
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ik.	NAC BURET MERAH BEOGYOL NATIO S (BURET HERAH))	DAAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:56	SAS	Named	SAS 3019	-7-16	
APS.	NAC_BURIT_MERAH_BIDGGFG NATIO E (RUKIT MERAH)))	ONAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:56	NRIC/ Driving License	Normal	NRSC/ Driving Use	nse 2019-7-14	
	NAC_BURIT_MERAH_BEGG76(NATIO 3 (BURIT MERAH)) (WAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:58	NRIC/ Driving License	Normal	NR3C/ Onlying Live	nes 7019-7-16	
ill.	NAC_BUNIT_MERAH_RE0676(NATIO S (BUNIT MERAH)) (SWAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:56	SRIC/ Driving License	Normal	MRSC/ Oming Lice	nse 2019-3-16	
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K	NAC_BURIT_MERAH_ROGGTS(NAT); 5 (BURIT MERAH));	WAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:56	Photos	Normal	Phones 201	9-7-18	
dia dia	ANC_BURST_MERAH_BOOK78(NATIO S (BURST MERAH)) (ONAL ASSESSMENT CENTRE BERVICE In 18 Jul 2019 17:56	Photos	Normal	Protos 211	9-7-16	
ě	NAC_BURIT_MERAN_800676(NATIO 1 (HARRIM TIRLE) 2	SWAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:36	Proces	Notetal	Prome 201	9-7-16	
6	NAC_BURIT_MERAN_BIDGES (NATIO E (BURIT MERAN)) (WAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:56	Photos	Normal	Photos 201	9-7-16	
	MAC_BUNIT_MENAH_BIDDOTA(NATIC \$ (BUNIT HERAH)))	WAL ASSESSMENT CENTRE SERVICE on 18 Jul 2019 17:36	Photos	Normal	P90(06.201	9-7-16	
	NAC BUNLY MERAH BOOKTR(NATIO S (BUKIT MERAH)) (DNAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:56	Priories	Narmal	Photos 203	Q-7-16	
	NAC_BURIT_MERAN_BD0676(NATIO 5 (BURIT MERAH))	ONAL ASSESSMENT CENTRE SERVICE OF 16 Jul 2019 17:58	Protes	Normal	Photos 201	9-7-16	
	HAC_BUNIT_HERAH_800675(NATIO \$ (BUKIT MERAH))	DNAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:57	Photos	Normal	Afoins 201	9-7-18	
d)	NAC_BUNCT_MERAH_BD0676(NATIO 6 (BURCT MERAH))	ONAL ASSESSMENT CENTRE SERVICE 0+ 16 34 7019 17:17	Photos	Normal	Photos 201	9-7-16	
	NAC BURT MENAN BODGPS NATION & (BURT MENAN)	ONAL ASSESSMENT CENTRE SERVICE on 16 Jul 2019 17:57	Photos	Stermal	Pretos 204	9-7-16	
	HAC_BUNIT_MERAH_BOCG74(NATIO S (BUNIT MERAH))	DNAL ASSESSMENT CENTRE SERVICE III 16 Jul 2019 17:57	Photos	Normal	Photos 201	9-7-16	
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	NAC_BURIT_MERAH_RODE26(NATIO S (BURIT MERAH))	ONAL ASSESSMENT CENTRE SERVICE 04:18 Au 2018 17:57	Photos	Normal	Proma 201	9-7-16	
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ACCIDENT STATEMENT

ACCIDENT DATE: 151.07,	1019
LOCATION: AYE CLEM?	ENT AVE 6 EXIT 11
1. DETAILS OF VEHICLE	DXI II
alvehicle Number: FE	B93969
DINSURANCE COMPANY	NTIL
CIPOLICY NUMBER: 506	2340715-06
d)POLICY TYPE: (COMPRE	JENSINE LTHER
OMAKE & MODEL: Ya	HENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)
TYPE: (SALOON / COUPE	MANAGEMENT
" GIVEHICLE CATEGORY: (PR	VATE / COMMERCIAL / MOTORCYCLE / OTHERS)
INPURPOSE OF USING AT A	CCIDENT TIME: WORLD A
IF NO PLEASE STATE TO THE	R YOUP OWN INSURANCE (YES/NO)
2. INSURED / POLICY HOLDER	PARTY CLAIM / REPORTING ONLY)
A)NAME: Wang Zhi	frans
b) NRIC/FIN/PASSPORT: 921	1952WL CONTINUE (MALE) FEMALE)
CIADDRESS: 36 Beb	CHOS #09 110 CONTACT: 967 1730 1
* CONTINUE	S(160036)
THO of prisongs DRIVER	ALSO POLICY HOLDER
	. ABOVY
() DINRIC/FIN/PASSPORT	(MALE / FEMALE)
CJADDRESS:	CONTACT:
*d)DAYE OF SIDY	
*d)DATE OF BIRTH: (11_1984_1(DD/MM/YYYY) .
DORTE DEDRIVING DAGE	OUTDOOR)
WAS DRIVER AN EMPLOYER	OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF TO	HE DRIVER WITH INSURED:
5. DIWEATHER CONDITION: (CLE	AR / RAINING / OTHERS AFTAK FOLK
6. WAS ANYBODY INJURED (YES 7. DIREPORTED TO POLICE YES 7	NOI 2DAYS m/c
IF YES, PLEASE STATE WHICH I	NO)
Value all man	1 (
	167219 MODEL: MODERCYCLK
() DRIVER'S NAME:	The model fire the good
9. THIRD PARTY VEHICLE	CONTACT:
No of passanger d) VEHICLE NUMBER: EN	900 U 1000 000
(Including diviver) O DRIVER'S NAME:	MODEL: MARCAPA2
NRIC/FIN/PASSPORT:	COURTE
	CONTACT:
*	*

email = VIDBO







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

Motorcycles =< 200 co
Motor cars with unladen weight =< 3000kg with =< 7

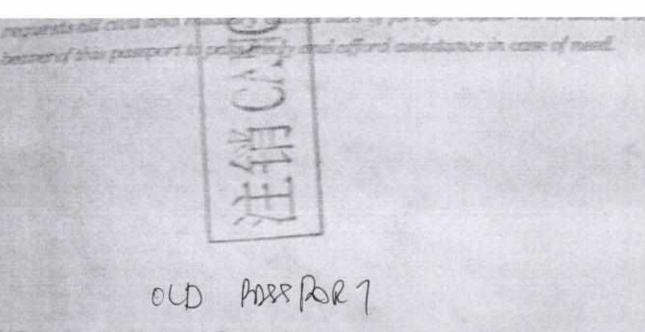
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pessengers, exclusive of driver

EFFECTIVE DATE

For LKK/NAC Use Only

NP 428A





PASSPORT

医副型基础器型副部

G29881465

王/WANG

For LKK/NAC Use Only

志岗/ZHIGANG

表数 / Type / 國家將 / Country Cook

男/M

新部/500

11 JUL 1984

在发现等。Date of once

哲生区型。Decreased

08 JUL 2008

新型模型 Notherty

公安部出入境管理局

红茶/JIANESU

整度地位 / Flored insu

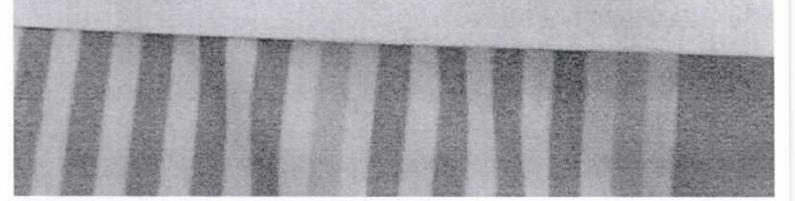
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高量 10日 / Date of property

07 JUL 2018

Exit & Entry Administration Ministry of Public Security

POCHNWANG<<ZHIGANG<<<<<<<<<<<



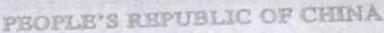
中华人民共和国外交部请各国军 政机关对持照人子以通行的便利和公 要的协助。

The Ministry of Foreign Affairs of the People's Republic of China requests all civil and military authorities of foreign countries to allow the bearer of this passport to pass freely and afford assistance in case of need.

NAW POSS BORT

中华人民共和国

PASSPORT



M. W. St. Country Code

av-III N. Et. Passport No.

EA9484176

M. Tr. Name 王志岗

WANG. ZHIGANG

For LKK/NAC Use Only



表型/Type

S. M. Sex. D.B. Napoulov -

CHN

男/M 中国/CHINESE

It is to the office of two

江苏/JIANGSU

was in the Personal Street

新加坡 SINGAPORE

SEE Authority

中即吐新加坡大使馆 EMBASSY OF P.R. CHINA IN SINGAPORE

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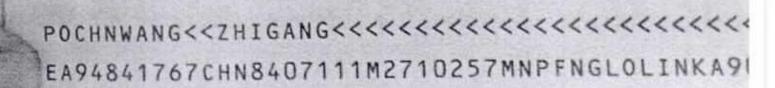
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26 10月/OCT 2017

SHE DERKER

25 10月/OCT 2027

15 N. J. S. W. Benger's signature





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	Vehicle No.(For Motor)		FBB939	FBB93955		Certificate Number					
						Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5062340715- 05		WANG ZHIGANG	G29881465	GMC	Third Party	1955 Tanan 1956an		21/09/2018	20/09/2019
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