

NATIONAL Assessment Centre Services

[ver 1 Jan03]

MNA 119098417 -01

Date In: 29/7/19 09:54	Job description	Date & Time Completed	Done by
Ref No: MNA 119013248/64	SAS e-filing		
Veh No: SJM 2935H	E-mail (within 2hrs, AIG 2hrs)		
D.O.A: 29/7/19 11:45	I-Motor Claim Form		
OD: <input checked="" type="checkbox"/> 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/Wks12		

Preferred Wksp / IRC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SJW 6345 B	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: 6748 6016)	Date:	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

NA1905619

Claimant's Particulars:	Invoice Reconciliation Checklist	Amo (\$)	Amo (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	3000	
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TP: Towing Fee \$40/\$43		
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2003)		
	6) TR: Re-inspection \$73		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$23		
	*N8: DV / Collect Excess Coordination \$3		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idao Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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	29/07/2019 08:54
Date Of Accident	27/07/2019 11:45
Exact Location Of Accident	PIE TWDS TUAS B4 KALLANG BAHRU EXIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJM2835H
Insured/Policyholder	
Name Of Registered Owner	MR TAN CHEE WEE
NRIC No	S8120408Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91856261
Alternative Phone No	OFFICE-91856261
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	AVANTE
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MU002480-R02
Cover Note Number	-
Driver	
Name of Driver	MR TAN CHEE WEE
NRIC No	S8120408Z
Date Of Birth	24/06/1981
Occupation	INDOOR
Date Of Driving Pass	31/07/2003
Driving Experience	15 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	+65-91856261
Fax Number	
Contact Number	OFFICE-91856261
EMail Address	NOEMAIL

Address	2 FLORA DR #07-34
Postcode	507025
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	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	3
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJW6345B
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	AEH752Z
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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

MR TAN CHEE WEE

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SJM2835H

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

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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:



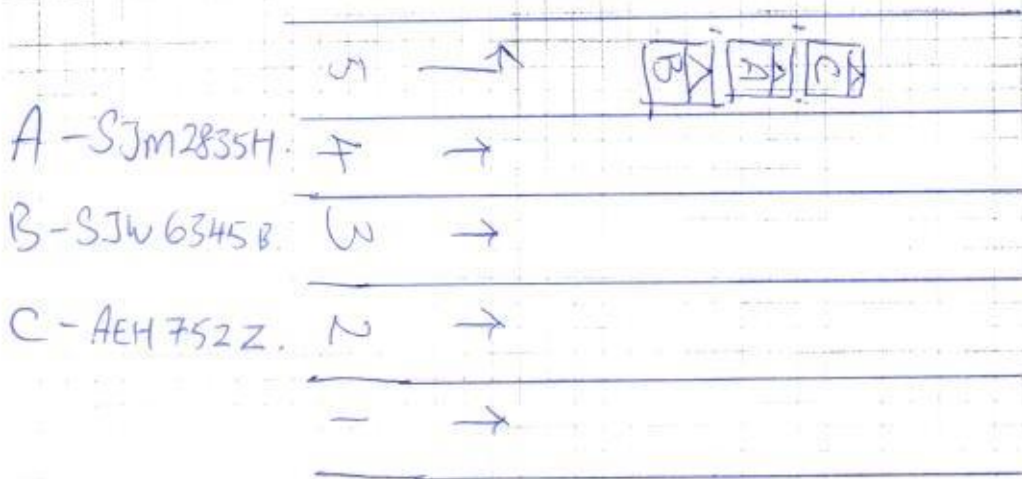
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN

PIE TOWARDS TUAS BEFORE KALLANG BAHRU EXIT.

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

I was driving along PIE towards Tuas on a 5-Lane expressway. I was on the most extreme Left lane. Vehicle in front of me slowed down due to exiting on the slip road. Out of sudden, I felt an impact from the rear. Due to the impact, my vehicle surge forward and collided onto vehicle (C). I alighted and noticed vehicle (B) from the rear collided onto my vehicle rear portion, my vehicle surge forward and collided onto vehicle (C). I realised it was a 3-car chain collision accident and vehicle (C) passenger was injured.

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.:

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA119095417 Vehicle Registration No: S3 M 2835H
Name (as shown in NRIC) : Tan Chee Wee NRIC/FIN/Passport No : S81204082
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 2 Flora Drive #07-34 Singapore (507025)
Contact (Tel) : 9185 6261 Mobile No. : _____
Email Address : tancc009@gmail.com
Date of Accident : 27/7/19 Time of Accident : 1145
Place of Accident : P112 toward Tuas before Kallang Bahru Exit.
Insurance Company : Tokio Marine.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amendment for statement type.
Attached with new statement for amendment.

Policyholder / Driver's Signature
Date:

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

Vehicle No.	SJM 2835H.	Model / Make	HYUNDAI AVANTE
Date of Accident	27/7/19.		
Time of Accident	1145.	HRS	
Location of Accident	PZT Towards THAS Before KALLANG BAHU Exit.		
Exact purpose use during accident	Personal.		
Name of Owner	TAN CHEE WEE.		
Telephone No.	H/P : 9185 6261	Home :	Office :
NRIC	S81204082.		
Address	2 FLORA DRIVE #07-34 SPORE 507025.		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	TOKIO MARINE		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	18-MY002480-R02.		
Name of Driver	As Above If No,		
NRIC		Any Passengers :	N/I
Date of birth	24/06/1981		
Occupation	Outdoor / Indoor		
Driving License Pass Date	31/07/2003		
Gender	Male / Female		
Contact No.	H/P :	Home :	Office :
Address			
Driver have any own vehicle	No, If yes, Reg No.		
Relationship	Employee, If no, state owner.		
Weather condition	Clear Raining Other		
Road Surface	Dry Wet Other		
Any Injuries	No, If Yes, Who? Observing.		
Name And Contact No.			
Name And Contact No.			
Police Report	No, If Yes, Where?		
Vehicle B No.	SJM 6345B.	Any Passengers :	N/I
Name of Driver	DOO CHI WEI, GERMINE	Contact No. :	8399 3467.
Vehicle C No.	AEH 7522	Any Passengers :	1-MALE.
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	Front and Rear portion		
Camera Recorder	Yes / No		
Email Address	tanc0009@gmail.com		
PARTICULAR WORKSHOP	Twin Car Automotive Pte Ltd.		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Zi ting.		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	Sales@n51.com.sg		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8120408Z**



Name
TAN CHEE WEE

陈 志 伟

Race
CHINESE

Date of birth
24-06-1981

Sex
M

Country of birth
SINGAPORE



LKK/NAC Use Only

3694884



NRIC No. **S8120408Z**

For LKK/NAC Use Only

Date of issue
12-03-2005

Address
**2 FLORA DRIVE #07-34
SINGAPORE 507025**

NRIC No: **S8120408Z** Date: **14/10/2009** No: **6230958**

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8120408Z

Name:

TAN CHEE WEE



Birth Date: 24 Jun 1981

Issue Date: 14 May 2005



0013414808

For LKK/NAC Use Only

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

Class 3 Motor cars \leq 3000 kg with \leq 7 passengers,
exclusive of the driver, and motor tractors
/vehicles \leq 2500 kg

PASS DATE

31 Jul 2003

For LKK/NAC Use Only

NP 428A



Licence No: S8120408Z

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

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

FORM MX1

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-MU002480-R02 (Private Motor Car)

- | | | |
|---|-----------------|--|
| 1. Index Mark and Registration Number of Vehicle | SJM2835H | Chassis No.: KMH DU41BR9U657618 |
| 2. Name of Policyholder | MR TAN CHEE WEE | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 27/12/2018 | |
| 4. Date of Expiry of Insurance | 26/12/2019 | |
| 5. Persons or Class of Persons entitled to drive* | | |
| (a) The Policyholder. | | |
| (b) Any other person who is driving on the Policyholder's order or with his 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 only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* 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: 0896DDB

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 600	
	Windscreen Excess	SGD 100	
Financial Interest:	KOMOCO MOTORS PTE LTD		

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

Enquire Vehicle Information

Vehicle No.	
Vehicle No. :	SJM2835H
Vehicle Details	
Vehicle Type :	Passenger Motor Car
Vehicle Attachment 1 :	No Attachment
Make / Model :	HYUNDAI / HD AVANTE 1.6 M
Primary Colour :	Blue
Year of Manufacture :	2008
Maximum Laden Weight :	1760 kg
Unladen Weight :	1264 kg
No. Of Axles :	2
Engine No. :	G4FC8U574393
Chassis No. :	KMH DU41BR9U657618
Engine Capacity :	1591 cc
Maximum Power Output :	89.7 kW (120 bhp)
IU Label No. :	1122697501
Propellant :	Petrol
Passenger Capacity :	4
Original Registration Date :	27 Dec 2008
First Registration Date :	27 Dec 2008
Open Market Value :	\$9,741.00
Additional Registration Fee Rate :	100.00 %
Actual ARF Paid :	\$9,741.00
PARF Eligibility :	Forfeited
Minimum PARF Benefit :	-
COE No. :	2009010101000542H
COE Category :	A - Car (1600cc & below)
COE Expiry Date :	26 Dec 2028
Quota Premium (QP) :	\$7,721.00
PQP Paid :	\$27,571.00
OPC Cash Rebate Eligibility :	No
QP during COE Bidding Exercise :	\$7,721.00
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-

Previous

OK