

Date In: 31/7/19 16:36	Job description	Date & Time Completed	Done by
Ref No: MA/MS619013452164	SAS e-filing		
Veh No: 5DL 9199R	E-mail (within 3hrs, AIC 2hrs)		
DOA: 31/7/19 14:20	I-Motor Claim Form		
OD / TP / Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wks12		

Professional Wksp / INC Assgn Wksp / GW: () Tel: () Fax: ()

TP Particulars: Veh No: SJE 6161J- 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 repolrer.
 Total Loss Case: to e-mail Insurer URGENTLY.
 Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks: (INC 6011167086616)
 1) Apply for Transport Allowance () / Courtesy Car ()
 2) QC Check / Post Repair Inspection ()
 3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: _____

Date/Time	Actions

MA1905707	Invoice Breakdown (Gross)	Am't (\$)	Ass't (\$)
1) AR: Accident Reporting (\$30)		30.00	
2) DA: Damage Assessment (\$100); INC (\$80)			
3) TP: Towing Fee	\$40/\$45		
4) PT: Follow-Through Survey	\$120		
5) PT: Follow-Through Survey (Resurvey)	\$30		
For claiming against INC Only (ver 10 Jan 2003)			
6) TR: Re-inspection	\$75		
7) NI: Idao DA + EMRT Survey	\$160		
8) NTUC Additional Services:-			
ON:			
*N5: Courtesy Car / Tpl Allowance	\$5		
*N6: Repair Co-ordination	\$10		
*N7: Post Repair Inspection	\$25		
*N8: DV / Collect Excess Coordination	\$5		
TE (N11): TP (S-n INC) against INC	\$20		
9) N12: Idao Mobile	\$0		
Invoice dated	Fee Charged		
Invoice dated	Fee Charged		

QC Checked by (Engr-In-Charge):
 Auditors Comments:
 Date: 31/7/19

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	31/07/2019 16:36
Date Of Accident	31/07/2019 14:20
Exact Location Of Accident	EU TONG SEN STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDL9199R
Insured/Policyholder	
Name Of Registered Owner	GAN BENG SENG
NRIC No	S2538458Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96371037
Alternative Phone No	OFFICE-96371037

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E-250
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P 90353852 DMA
Cover Note Number	

Driver

Name of Driver	GAN BENG SENG
NRIC No	S2538458Z
Date Of Birth	15/05/1945
Occupation	OUTDOOR
Date Of Driving Pass	08/04/1974
Driving Experience	45 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96371037
Fax Number	
Contact Number	OFFICE-96371037
EMail Address	NOEMAIL

Address	21A JALAN GRISEK SINGAPORE
Postcode	419458
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	SIDE SWIPE
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?	NO
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 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	SJE6161J
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG GUAN LEONG
NRIC/Passport Number	S1504790I
Contact Number	92956161
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

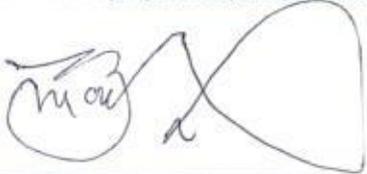
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5. **Any false reporting may be referred to the Police for investigation.**
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and 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:

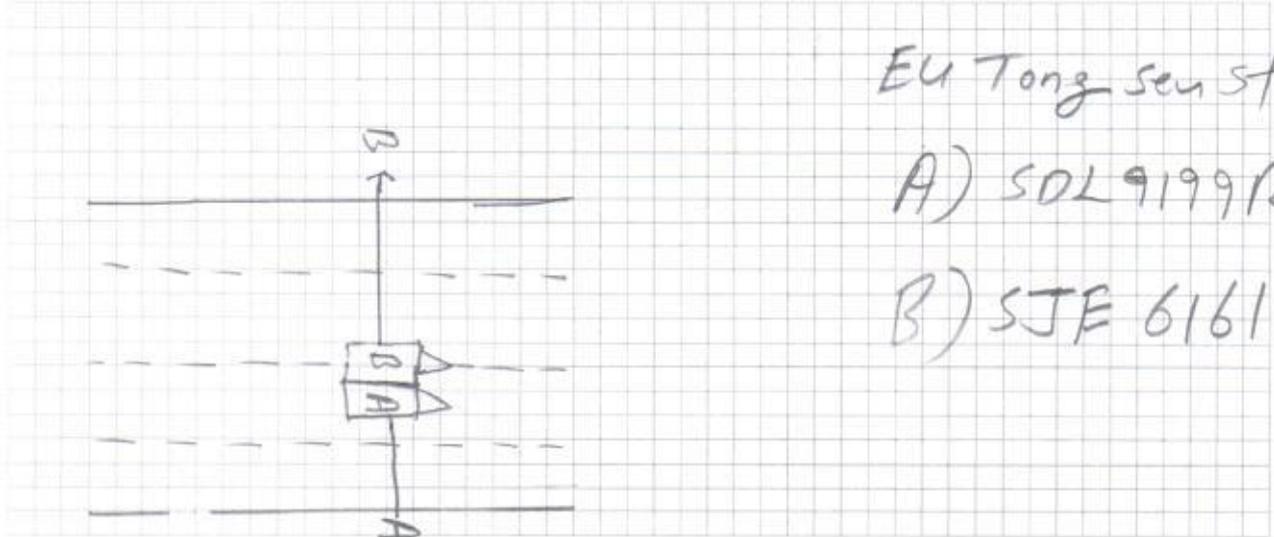


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



EU Tong Sen St
A) SOL 9199R
B) SJF 6161J

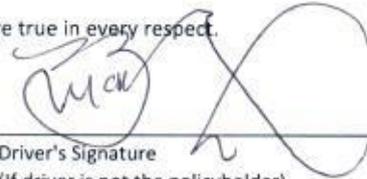
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to statement

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.:

I WAS TRAVELLING ALONG EU TONG SEN ST ON THE SECOND LANE FROM THE RIGHT, SUDDENLY I FELT MY LEFT MIRROR WAS KNOCK, THEN WE MOVE TO THE SIDE AND DISCUSSED, UPON CHECKING ON MY VEH, NO OBVIOUS SCRATCHES ON MY VEH FRONT LEFT HAND SIDE, WE EXCHANGE PARTICULAR AND LEAVE FROM THE SCENE.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S2538458Z**



GAN BENG SENG
@GAN KAH KENG

Birth date: 15 May 1945
Issue Date: 26 Oct 2017

002737337G

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S2538458Z**



Name
GAN BENG SENG
@GAN KAH KENG
顏嘉慶

Race
CHINESE

Date of birth
15-05-1945

Sex
M

Country/Place of birth
MALAYSIA




Acci time : 14.22 pm

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

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	08 Apr 1974
Class 2A	Motorcycles between 201 cc and 400 cc	08 Apr 1974
Class 2	Motorcycles > 400 cc	08 Apr 1974
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	08 Apr 1974

NP 42RA

Licence No: S2538458Z

For LKK/NAC Use Only

5826964



NRIC No: **S2538458Z**



Date of issue
26-10-2017

Address
21A JALAN GRISEK
SINGAPORE 419458



MSIG

MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co.Reg No. 200412212G GST Reg. No. 20-0412212G
A Member of **MS&AD** INSURANCE GROUP

Handwritten signature and date: 19/06/19

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**DRIVESHIELD - PREMIER
Comprehensive**

Certificate No. P 90353852 DMA

Excess : SGD1,000

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle

SDL9199R

2. Name of Policyholder

Gan Beng Seng

3. Effective Date of the Commencement of Insurance for the purposes of the Act

08/07/2019

4. Date of Expiry of Insurance

07/07/2020

5. Persons or Classes of Persons entitled to drive*

Gan Beng Seng

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

*Provided that the person driving is permitted in accordance with the licensing or other laws or 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 *

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 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 Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

Craig Ellis
Chief Executive Officer