a Comings	337.3		
	Date & June Completed	Done)V.
	Sans States States	D. Cittle	0.600
	1 1 210 0		
	- delication of the second of		
	hrs, IP +hrs)		
	I to Owner/Wksp		4. (0.00)
			-17
, , , , , , , , , , , , , , , , , , , ,	For a five section of the section of)	
riod: ()	092000		
Date:			
Note-Est. Status (WO): N: 0-	20%: P: 21-79%. F: 80-100	%]	
			-
77 77 92,000 ()			-
Courtesy Car () () () () ()			
		-10	
O Invoice Pr	reparation Checklist	Anit (\$)	Amt (
P. P. C.			W V
Priver/Owever: 3) TF: Towing Fee \$40/\$			
For claiming	g against INC Only (wef 10 Jan 2005)		2./A.mer - 2
7) N1 : Idac DA + SMRT Survey \$160			
OD* *N5: Courte		5	
+NIC-Daniele			
*N7: Post R *N8: DV / C	Co-ordination \$10 Lepair Inspection \$22 Collect Excess Coordination \$	5	
*N7: Post R *N8: DV / C	Co-ordination \$10 Apair Inspection \$22 Collect Excess Coordination \$. TP (Non INC) against INC \$20	5	
	i-Photo Uploaded Assessment/Survey Report Ass't Report by Fax / Hand 6	SAS e-filing F-mail (w.thm. Shrs. AIC 2hrs.)	Done Done Done Done Done SAS e-filing E-inail (widen Star, AIC 2)rts,

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 regudiate 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

HE SHOW TO A CONTROL OF THE SHOW THE SH	ACCIDENT STATEMENT
Date Of Report	02/08/2019 14:37
Date Of Accident	02/08/2019 09:45
Exact Location Of Accident	CTE SLIP RD TO PIE
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SMA4686K
Insured/Policyholder	
Name Of Registered Owner	AURORA CAR RENTAL & LEASING SINGAPORE PTE LTD
Co Reg No	201914185K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-99999999
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ALTIS
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	THIRD PARTY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5110029694
Cover Note Number	
Driver	
Name of Driver	NG CHEE CHOONG
NRIC No	S1714244E
Date Of Birth	27/08/1965
Occupation	OUTDOOR
Date Of Driving Pass	02/07/1985
Driving Experience	34 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91058870
Fax Number	
Contact Number	
EMail Address	NOEMAIL

BLK 404 BEDOK NORTH AVE 3 Address

#08-217

460404 Postcode

NO Was driver an employee of the Insured's Company

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

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions 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

YES Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES

YES

NO

2

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

BEDOK SOUTH NEIGHBOURHOOD POLICE CENTRE Police Station Name

YES

ROAD: 20 CHAI CHEE DRIVE , POSTCODE: 469045 , COUNTRY: Police Station Address

SINGAPORE

TEL NO: 1800-2448999 - FAX NO: 62446558 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20190802/2037

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

SD CARD WITH TRAFFIC POLICE

NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FBK3719J

Vehicle Make/Model/Colour

Details Of Properties

MOTORCYCLE

Vehicle Category Name of Driver

LIM SU JEE

NRIC/Passport Number

G7721317T

Contact Number

Address

Postcode

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Name LIM SU JEE Approximate Age Injuries Sustain Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance? Address

ATE OF ACCIDENT	03 / 08 / 3019 09 41 AD/PM
ME OF ACCIDENT	
OCATION OF ACCIDENT	Stip road towards PIE
xact Purpose use during accident	21 10
AME OF OWNER	Autora car kental & Leasing singapore Ate Go
ELP NO	And his Ath
RIC	OD / THIRD PARTY // Reporting Only
LAIM TYPE	The state of the s
RIVATE HIRE	VES NO ?
NSURANCE CO.	Comprehensive Third Party / Third Party Fire & Theft
YPE OF CAVERAGE	Comprehensive Third Party / Third Party File & There
OLICY NO.	MRU53 ZEC 107134082
NAME OF DRIVER	As above / If No: Ng Chee Chorg
NRIC	SIF IUDIUE Any passengers:
DATE OF BIRTH	27 / 08 / 1965
OCCUPATION	Outdoor / Indoor
DATE OF DRIVING PASS	7 /
GENDER	Male / Female Home:
CONTAC NO.	HEC 212 \ (111 MI).
ADDRESS	BIK 404 Padok North Ave 3 # 08 312 (3) 460404
ADDRESS DRIVER HAVE ANY OWN Vehic	(NO)/ If yes: Reg No:
RELATIONSHIP	Employee
WEATHER CONDITION	(lear) / Raining
ROAD SURFACE	Dry / Wet / Other:
ANY INJURIES	If yes : Who?
CONTAC NO.	
POLICE REPORT	No / If yes: Where? Any Passenger:
VEHICLE B NO.	FBK 3H9J Any Passenger:
NAME	
CONTAC NO.	Any Passenger :
VEHICLE C NO.	Any Passenger :
VEHICLE D NO.	Any Passenger :
VEHICLE E NO.	Any Passenger :
VEHICLE F NO.	
ANY WITNESS	
WITNESS CONTACT NO.	Violeting (e) /
Have you been approach by uni	known person soliciting (s)/
offering accident claims assistar	ice?
PARTICULAR WORKSHOP	Sme Motor Fie Ltd 6 Speed Autowerkz Pte Ltd
TELP NO	1 Kaki bukit aye 6 #02-15 68 Kaki Bukit Avenue 6
CONTACT PERSON	Autokay @ Vaki bukit #02-05 ARK @ KB, Singapore 417896 Singapore 417883 Tel: 6384 7037 Fax: 6384 7039
CONTRICT	Singapore 417883 Tel: 6384 7037 Fax: 6364 70 Email: 6speedautowerkz@gmail

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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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)

l 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 personal information personal information of transfer such vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured wehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the 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")
- 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

requirements under any regulations, laws or court orders.

Olicyholder's Signature Date & Tigner

Driver's Signature

(If driver is not the policyholtier

Date & Time:

of 108

Reporting Centre Personnelle since

Name:

NRIC/FIN No.:

(If drive

Date & Time:

is not the policyholder)

Date & Time:

Reporting

NRIC/FIN No.:

Name:

tre Personnel's Signature





1 of 3

Report No. T/20190802/2037

Police Station Of Origin: Bedok South N.P.C

20 Chai Chee Drive SINGAPORE 469045

Tel No: 1800-2448999

REPORT OF A TRAFFIC ACCIDENT

	ne Report N 019 11:38	Made:	Vide Report No.: E/20190802/0073	Station Diary No.: 17	
Informa	nt's Partic	ulars			
Name of Informant: NG CHEE CHOONG			Address: APT BLK 404 BEDOK NORTH AVENUE 3 #08-217 SINGAPORE 460404		
7.1 Land 1970 1970 1970 1970 1970	/ ID No.: O / S17142	44E	Contact No.: Home/Office: Mobile: 91058870		
National SINGAP	lity: PORE CITIZ	EN	Email:		
Sex: Male	Age: 53	Date of Birth: 27/08/1965	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3,4	Date of Expiry:	

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 02/08/2019 09:45	Type of Location Straight Road
Location: Along Road 1 CENTRAL EX Slip road towa	(PRESSWAY			
Weather:	7. 37 90 1 1 1 100	Road Surface: Dry		Road Speed Limit:
Clear				
Clear Traffic Flow: One Way		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Moderate

Details of V	ehicle Involve	d				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBK3719J	Motorcycle				Slightly Damaged	0
SMA4686K	Car				Slightly Damaged	1

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





20100002/2001

2 of 3

Report No. T/20190802/2037

Police Station Of Origin: Bedok South N.P.C 20 Chai Chee Drive SINGAPORE 469045

Tel No: 1800-2448999

CONTINUATION OF REPORT

Rider					
Name	Lim Su Jee		ID No.		G7721317T
Related Vehicle	FBK3719J (Motorcycle)		Contac	t No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	Injury	NIL	
Driver					
Name	NG CHEE CHOONG		ID No.	a	S1714244E
Related Vehicle	SMA4686K (Car)		Conta	ct No.	91058870
Hospital/Clinic	NIL		Class Driving Licent Expiry	g ce &	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Disc		NIL	
	ited Medical Leave NIL	Degree of	f Injury	NIL	

Brief Details.

On the 02/08/2019 at about 0945hrs, I was driving my vehicle with a passenger bearing plate number SMA4686K along CTE towards PIE. I then entered the slip road heading to PIE (Airport direction).

While driving, the traffic was quite heavy and as such, I slowed down my speed. That was when suddenly, I felt an impact coming from the rear left. I immediately stopped and realized that there is a white in color Cisco motorcycle bearing plate number FBK3719J hit onto the rear left side of my vehicle. Both myself and my passenger then alighted to render assistance to the rider and called for ambulance.

Shortly later, both ambulance and traffic police arrived at my scene. The male rider was conveyed by ambulance. I then informed the traffic police what happened and was given a case card with reference number E/20190802/0073. My SD card for my in car camera was seized by the traffic police and I was advised to lodge a traffic police report. After which, my passenger cancelled my booking and took another vehicle. I then left the scene after doing the needful.

I wish to state that both myself and my passenger were not injured. Due to the collision, there are dents around my left rear side bumper, rear light and boot.





Police Station Of Origin: Bedok South N.P.C 20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999 3 of 3 Report No. T/20190802/2037

CONTINUATION OF REPORT

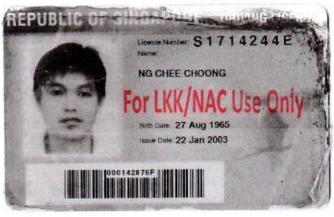
Sketch Plan

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 Informant:
afflicat /-
Date/Time:
02/08/2019 11:38
Classification Of Case:









GeneralClaim eBaoTech · Change Password · Change Language Hello, NAC_PAYA_UBI_800601 **Policy Query** My Desktop Notice of Loss 02/08/2019 14:29 Date of Accident Policy No. 5110029694 Certificate Number SMA4686K Vehicle No.(For Motor) Search Certificate Number Policyholder Name Policyholder NRIC Cover Vehicle Insured Commence Date Expiry Date Product Select Policy No. Object Type No. AURORA CAR RENTAL & 5110029694-000043 GFM Third Party SMA4686K SMA4686K 19/06/2019 29/05/2020 LEASING SINGAPORE PTE LTD 5110029694 201914185K Continue

Claim Handling

Accident MT/1056218 GST Registration No Vehicle No. SMA4686K 5110029694 Policy No. Certificate No. 5110029694-000043 Policyholder NRIC AURORA CAR RENTAL & LEASING SINGAPORE PTE LTD Policyholder Name Loading Cover Type Third Party FLEET MASTER INSURANCE Product Code Contact No.(Home) Contact No.(Office) Contact No.(Mobile) eCode Special Remark Email Address eCode Reason e No Yes . No Yes TCA KEK Private Hire NCD Entitlement(%) 0 NCD Protection Accident Details Accident Type Accident Report Within 24 hrs Yes 02/08/2019 16:48 Report Date Country of Accident Time of Accident hh:mm 09:45 02/08/2019 Date of Accident ICM No. Orange Force Reporting Centre Accident Location CTE SLIP RD TO PLE Total Excess Applicable Windscreen Excess 0.00 Excess Type Per Accident TP Standard Excess 1,500.00 OD Standard Excess YIED TP Excess 0.00 Driver is Covered? YIED OD Excess Additional Excess Total TP Excess Applicable 1,500.00 Total OD Excess Applicable ▽ Benefits GST Registered Information **GST Registration Date** GST Registered No **GST Status Verified** Yes GST Registration No. Modification History Policyholder Mailing Address Address 3 TOA PAYOH CENTRAL BLK 79B #29-17 Address 2 Address 1 Post Code Address Type Singapore address SINGAPORE 312079 Address 4 Related Policy Number 5110029694 Unit No. 29-17 OI Driver Info Unnamed Driver Unnamed Driver Driver Type Driver Name Driver DOB Driver NRIC S1714244E Unnamed driver Name NG CHEE CHOONG 53 **Driving Experience** Driver Age Register Date of Driver License 02/07/1985 Contact No.(Home) Contact No.(Office) Contact No.(Mobile) 91058870 Address 3 Address 2 BEDOK NORTH AVENUE 3 BLK 404 Address 1 Post Code Address Type Singapore address SINGAPORE 460404 Address 4 #08-217 Unit No. Does he own a Singapore Driver Insurer Com Driver Vehicle No. Yes a No Registered car? Declaration Breathalyser or Blood Test 0 mg Any injury? * Yes. No Reading? Modification History Claim 001 OD-MX New Insured Name OD-MX AUROR Claim Type * Contact No. (Home) Contact No.(Mobile) OI Vehicle SMA468 Email Address Number SMA4686K / FBK3719J ON 2 Aug 2019 Claim Description Preference Liability Not at Fault Preferred GIA Boquiet No. Yes ▼ GIA report Received Preferred Workshop, Name unknown Repair Option Claim 02/08/2019 16:55 Date Registered

ROSLINDA Workshop

✓ Print AK letter

Save Submit Attachment 001 Claim No. MT/1056218 Accident No. 02/08/2019 00:00 Upload Date Yes No Last Doc. Received Confidential Category * Path * NO Clear Please Select Choose File No file chosen Clear Please Select Choose File No file chosen Clear Please Select NO Choose File No file chosen NO Clear Please Select Choose File No file chosen • NO Please Select Clear Chaose File No file chosen * NO Please Select Clear Choose File No file chosen Message Read Attachment List 9 Des Category Urgency Attachment Uploaded By/Date mar 1970 to NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Aug 2019 16:54 NRTC/ Driving Normal NRIC/ Driving License NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on SAS 7 SAS Normal 02 Aug 2019 16:54 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Photos Normal 02 Aug 2019 16:54 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Aug 2019 16:54 Photos Photos Normal NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal Photos 02 Aug 2019 16:53 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Aug 2019 16:53 Photos Normal Photos NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Photos Normal 02 Aug 2019 16:53 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Aug 2019 16:53 Photos Normal Photos NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal Photos 02 Aug 2019 16:53 NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Aug 2019 16:53 Photos Normal Photos NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Photos Normal 02 Aug 2019 16:52 NAC_PAYA_UBJ_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Aug 2019 16:52 Photos Normal Photos NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Aug 2019 16:52 Photos Normal Photos NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal Photos 02 Aug 2019 16:52 NAC_PAYA_UBI_8006D1(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Aug 2019 16:52 Normal Photos Photos NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal 02 Aug 2019 16:52

Video List

Display in New Window Scan and uploading