

REF CS3/AWA19007333/E^{SV}sd3-1

Surveyor: Steve ASSIGNMENT (Office)

From (Person): Stella Goh of AWAC Date/Time: 1/8/19

Estimated Cost: 1 Bill to: ...

OD / TP / WS / TP RES / OD RES / EVA / INV / MY / CG

To Inspect Vehicle No: SKW2543K Insured: YN 5251P

at Workshop no: Sheng Koon Motor Tel: 9631 1939

of Blk 4, 393 woodlands Rd Yew Ind. Est.

Policy No: BVF CS B0007241811 Claim No: NSV1900196/SG

Sum Insured: ... Excess: ...

Make of Veh: ... D.O.A 12/04/2019

(Client's Record)

CA / REV / REP / REV 24 HRS

Date/Time: 10:12am 02/5/19 Person Contacted: ENC Vehicle IN / OUT: IN

Date/Time	Action/Instruction (X) Estimate	
	SKW2543K - CS/FCS16009556/Righ3dt	DOA: 11/5/16
	YN5251P - NA/ROS18013270/24	DOA: 11/17/18
	After repair: 10/5/2019.	

15/08/19 Submit L/S \$3,250/- @ 3 days
(\$2,440/- Red - 43%)


13/8/2019

RECEIVED 16 AUG 2019

No bill
200 - 200
PRS 5,690

Nivitha (LKK Auto)

From: Goh, Stella <stella.goh@awac.com> on behalf of Motorsurvey <Motorsurvey@awac.com>
Sent: Thursday, 1 August 2019 5:11 PM
To: Admin-D (LKKAuto); Motorsurvey; assignments
Subject: RE: TP Survey assignment for SKW 2543 K DOA:17/04/2019 Our ref: NSV1900196/SG
Attachments: 01082019165621-0001.pdf

Dear Nivitha,

We refer to the above captioned matter.

Please kindly assist with Paper-Re.

Thank you.

Regards
Stella Goh
Claims Analyst
Claims Group
Global Markets

Allied World Assurance Company, Ltd
60 Anson Road #08-01 Mapletree Anson Singapore 079914
T: +65 6423 0857
F: +65 6423 0864
E: stella.goh@awac.com
W: www.awac.com

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>
Sent: Friday, 26 April 2019 10:30 AM
To: Motorsurvey <Motorsurvey@awac.com>; assignments <assignments@lkkauto.com>
Cc: Tang, Ben <Ben.Tang@awac.com>
Subject: RE: TP Survey assignment for SKW 2543 K DOA:17/04/2019 Our ref: NSV1900196/SG

Dear Sir/Mdm,

Kindly assist to provide GIA Reports for both parties.

Best Regards,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Hew, Lee Fong [mailto:LeeFong.Hew@awac.com] **On Behalf Of** Motorsurvey
Sent: Wednesday, 24 April 2019 5:17 PM
To: 'assignments@lkkauto.com' <assignments@lkkauto.com>
Cc: 'sur@lkkauto.com' <sur@lkkauto.com>; 'Jovine Tan' <jt@chamberslaw.com.sg>
Subject: TP Survey assignment for SKW 2543 K DOA:17/04/2019 Our ref: NSV1900196/SG

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us do not have consensus in the appointment of the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	SKW 2543 K
Insured Vehicle	:	YN 5251 P
Policy Number	:	BVFCB0007241811
Name of Workshop	:	M/s Sheng Koon Motor Service
Contact Number	:	9631 1939
Person to Contact	:	Mr Eric
Estimated Cost of repairs	:	\$ NA

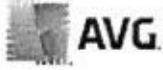
Regards,
Claims Division

Copy to Chambers Law LLP (Your Ref: CCL.jt.190405 SK) via Email.

Note -

- (x)
1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
 2. **Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.**
 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.



This email has been checked for viruses by AVG antivirus software.
www.avg.com

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	15/04/2019 12:45
Date Of Accident	12/04/2019 17:20
Exact Location Of Accident	AFTER WHAMPOA FLYOVER NEAR LAMP POST 359S13
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW2543K
Insured/Policyholder	
Name Of Registered Owner	HUP HUAT HENG ENGINEERING PTE LTD
Co Reg No	201227686R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67496521

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180-1.6 (A)

Exact Purpose for which vehicle was being used at time of accident

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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSN3027541900
Cover Note Number	

Driver

Name of Driver	CHEN QINGZHONG
NRIC No	S6977211J
Date Of Birth	19/10/1969
Occupation	OUTDOOR
Date Of Driving Pass	16/01/1996
Driving Experience	23 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92966359
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 652 WOODLANDS RING ROAD #12-374
Postcode	730652
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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

ON 12/04/2019 AT 17.20 PM, I WAS DRIVING MY CAR SKW2543K ALONG CTE TOWARDS PIE TUAS EXIT 8A, I WAS ON THE LEFT LANE, SUDDENLY A LORRY YN5251P CHANGE LANE AND SIDE SWIPE MY CAR AND IT DAMAGE MY RIGHT SIDE PORTION OF MY VEHICLE.

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	YN5251P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KERISA S/O SAMURALU
NRIC/Passport Number	S2171664B
Contact Number	96841459
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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:

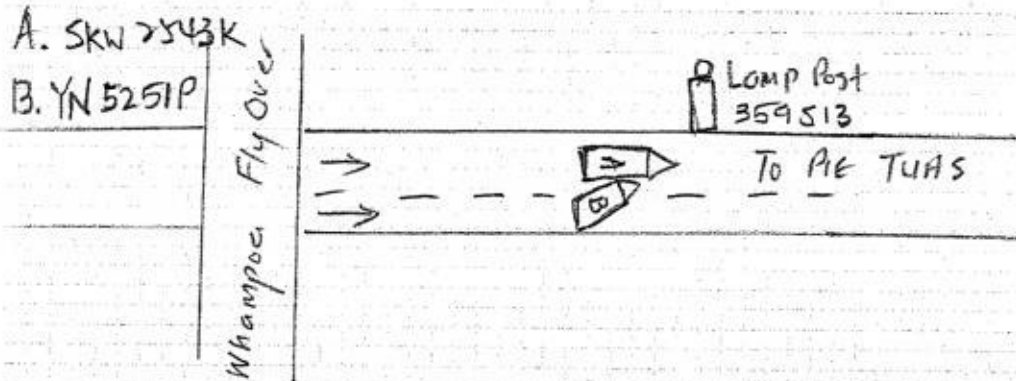
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:

15/04/19. 12:00

Josephine
Teo Hong Eng
S11006721Z

Accident Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/04/2019 at 17:20pm, I was driving my car SKW2543K along CTE towards PIE Tuas Exit 8A, I was on the left lane, suddenly a lorry YN5251P change lane and side swipe my car and it damage my right side portion of my vehicle.

DECLARATION

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



Policyholder's Signature
Date & Time:

Reporting Centre Personnel's Signature

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

15/04/19. 12:00

[Signature]
Reporting Centre Personnel's Signature
Name: Teo Hong Geng
NRIC/FIN No.: 311007212

Accident Sketch Plan Pg. 1



中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MZ406
N SN
AH0420A
COMPREHENSIVE
AUTOSAFE

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)

CERTIFICATE No.	DMHCSN3027541900	Engine No : 27491030409999 Chassis No: WDD2050402P063872
1. Index Mark and Registration Number of Vehicle	SKW2543K	
2. Name of Policy Holder	M/S HUP HUAT HENG ENGINEERING PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	12 APRIL 2019 (15:44 HOURS)	EX SECT. IS\$2,000.00 EX SECT. I (Outside Singapore).....S\$4,000.00 EX SECT. IIS\$2,000.00 EX SECT. II (Outside Singapore).....S\$4,000.00 EX ON WINDSCREENS\$100.00
4. Date of Expiry of Insurance	11 APRIL 2020	
5. Persons or Classes of Persons entitled to drive *		
<p>ANY PERSON WHO 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 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.</p>		
6. Limitations as to use: *	<p>(1) USE FOR THE CARRIAGE OF PASSENGERS OR GOODS IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. (2) USE FOR SOCIAL DOMESTIC PLEASURE PURPOSES AND BUSINESS PURPOSES 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. (3) USE FOR THE CARRIAGE OF PASSENGERS FOR HIRE OR REWARD BY ANY PERSON TO WHOM THE VEHICLE IS HIRED.</p>	
<p>HIRE PURCHASE CO. : SWEE SENG CREDIT PTE LTD AS HP OWNER * 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.</p>		

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). Please see reverse For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:



Authorised Officer

Authorised Signatory

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 15/04/2019 12:45
 Date Of Accident 12/04/2019 17:20
 Exact Location Of Accident AFTER WHAMPOA FLYOVER NEAR LAMP POST 359S13
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKW2543K
 Insured/Policyholder
 Name Of Registered Owner HUP HUAT HENG ENGINEERING PTE LTD
 Co Reg No 201227686R
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-67496521

Vehicle Particulars

Manufacturer MERCEDES-BENZ
 Model C180-1.8 (A)

Exact Purpose for which vehicle was being used at time of accident

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 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number DMHCSN3027541900
 Cover Note Number

Driver

Name of Driver CHEN QINGZHONG
 NRIC No S6977211J
 Date Of Birth 19/10/1969
 Occupation OUTDOOR
 Date Of Driving Pass 16/01/1996
 Driving Experience 23 YEARS AND 2 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-92966359
 Fax Number
 Contact Number
 Email Address NOEMAIL

A. SKW 2543K

B. YN 5251P

Whampoa Flyover

Lamp Post
359513



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/04/2019 at 17.20pm, I was driving my car SKW2543K along CTE towards AE Tuas Exit 8A, I was on the left lane, suddenly a lorry YN5251P change lane and side swipe my car and it damage my right side portion of my vehicle.

DECLARATION

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



Police Officer's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)

Reporting Centre Personnel's Signature
Name: Teo Hong Eng
NRIC/FIN No:

Accident Photo



Accident Photo



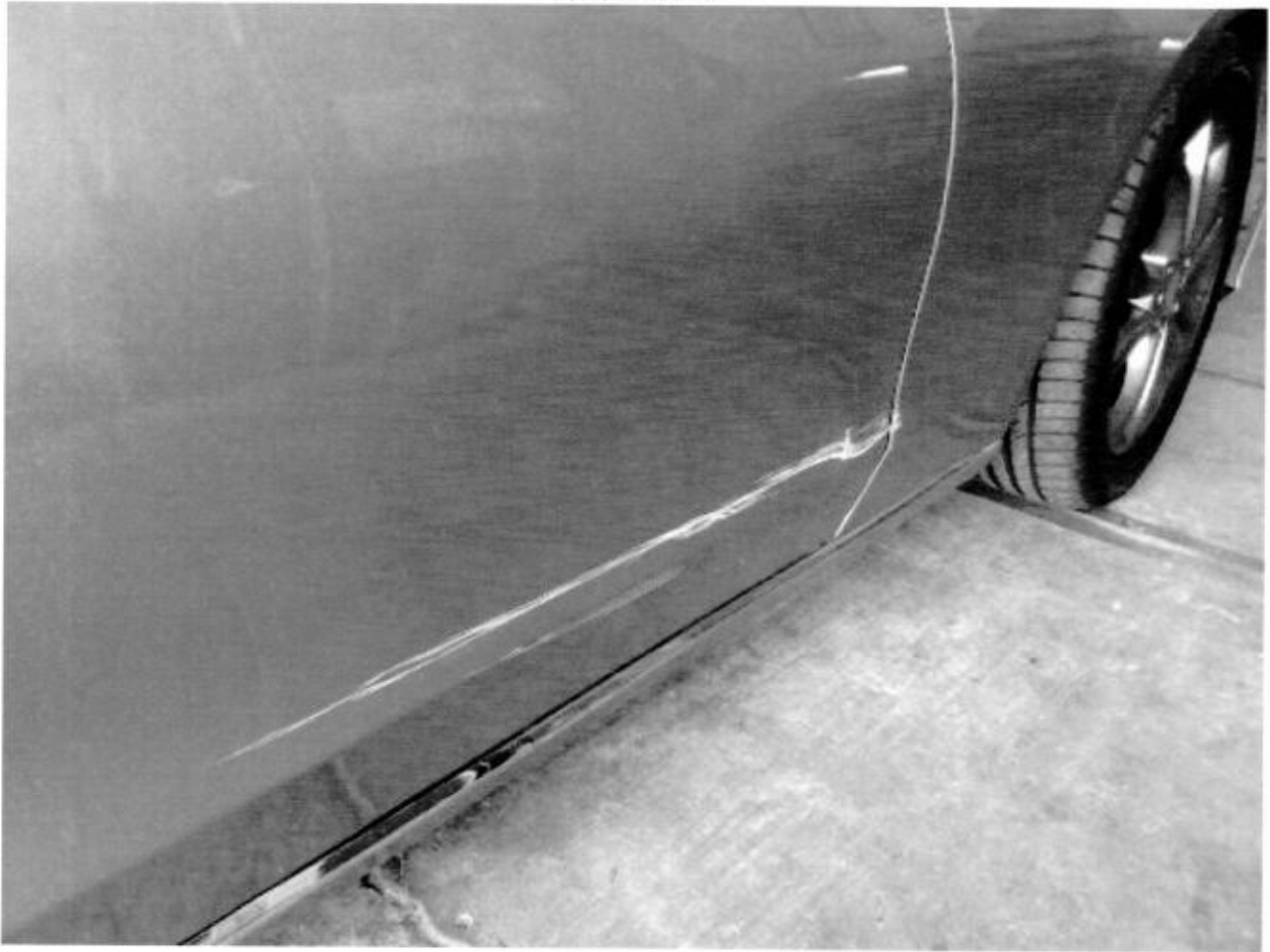
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S663500206 / GST Reg. No.: M400017735

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 : MSYH19048277 Vehicle Registration No: SKW 2543K
Name (as shown in NRIC) : Chen Qing Zhong NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Blk 652 Woodlands Ring Road #12-374 Singapore 730652
Contact (Tel) : 92966359 Mobile No. : _____
Email Address : _____
Date of Accident : 12/04/2019 Time of Accident : 17.20 pm
Place of Accident : After Whampoa Flyover Near Lamp Post 359313
Insurance Company : _____

(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:

Reporting change to Third Party Claim
Add on Drive NRIC And Driving Licence

[Signature]
Policyholder / Driver's Signature
Date: 15/04/2019

Josephine
Reporting Centre Personnel's Signature
Name: Teo Hong Eng
NRIC/FIN No.: 511000721Z
Date: 15/04/2019

Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S66500206 / GST Reg. No.: M600017735

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 : MSYH19048677 Vehicle Registration No: SKW 2543 K
Name (as shown in NRIC) : Chen Qing Zhong NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 65D Woodlands Ring Road #12-374 Singapore (730654)
Contact (Tel) : _____ Mobile No. : 92966359
Email Address : _____
Date of Accident : 12/04/2019 Time of Accident : 17.20 pm
Place of Accident : After Whampoa Flyover Near Lamp Post 359513
Insurance Company: CHINA TAIPIING INSURANCE (S) PTE LTD

(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:

Reporting change to Third Party Claim
Add Third Party Vehicle TN5251P And Particular
Remove document Driver NRIC And Driving Licence.

[Signature]
Policyholder / Driver's Signature
Date: 15/04/19

Josephine
Reporting Centre Personnel's Signature
Name: Teo Hong Eng
NRIC/FIN No.: S110067212
Date: 15/04/19

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 15/04/2019 12:45
 Date Of Accident 12/04/2019 17:20
 Exact Location Of Accident AFTER WHAMPOA FLYOVER NEAR LAMP POST 359S13
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKW2543K
 Insured/Policyholder
 Name Of Registered Owner HUP HUAT HENG ENGINEERING PTE LTD
 Co Reg No 201227686R
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-67496521
Vehicle Particulars
 Manufacturer MERCEDES-BENZ
 Model C180-1.6 (A)
 Exact Purpose for which vehicle was being used at time of accident
 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 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number DMHCSN3027541900
 Cover Note Number
Driver
 Name of Driver CHEN QINGZHONG
 NRIC No S6977211J
 Date Of Birth 19/10/1969
 Occupation OUTDOOR
 Date Of Driving Pass 16/01/1996
 Driving Experience 23 YEARS AND 2 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-92966359
 Fax Number
 Contact Number
 Email Address NOEMAIL

A. SKW 2543K

B. YN 5251P

Whampoa Flyover

Lamp Post
354513



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/04/2019 at 17.20pm, I was driving my car SKW2543K along CTE towards AE Tuas Exit 8A, I was on the left lane, suddenly a lorry YN5251P change lane and side swipe my car and it damage my right side portion of my vehicle.

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)

Reporting Centre Personnel's Signature
Name: Teo Hong Eng
NRIC/FIN No:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	7686R
Vehicle Details	
Vehicle No.:	SKW2543K
Vehicle to be Exported:	No
Intended Deregistration Date:	10 May 2019
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	C180 AVANTGARDE (R17 LED)
Primary Colour:	Silver
Manufacturing Year:	2015
Engine No.:	27491030409999
Chassis No.:	WDD2050402R083872
Maximum Power Output:	115.0 kW (154 bhp)
Open Market Value:	\$35,294.00
Original Registration Date:	23 Oct 2015
First Registration Date:	23 Oct 2015
Transfer Count:	1
Actual ARF Paid:	\$36,412.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 Oct 2025
PARF Rebate Amount:	\$27,309.00
Intended COE Rebate Details	
COE Expiry Date:	22 Oct 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$71,509.00
COE Rebate Amount:	\$46,115.00
Total Rebate Amount:	\$73,424.00

The information contained herein is correct as at 10 May 2019

OK

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	13/04/2019 09:47
Date Of Accident	12/04/2019 17:30
Exact Location Of Accident	MACPHERSON ROAD TOWARDS TUAS LINK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN5251P
Insured/Policyholder	
Name Of Registered Owner	AIR LIQUIDE SINGAPORE PRIVATE LIMITED
Co Reg No	197001157D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62654555

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO-11.1 D FP418D (M)

Exact Purpose for which vehicle was being used at time of accident

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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	KERISNA S/O SAMUALU
NRIC No	S2171664B
Date Of Birth	19/04/1958
Occupation	OUTDOOR
Date Of Driving Pass	16/06/1997
Driving Experience	21 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96841459
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 864 WOODLAND ST 83 #03-200
Postcode	
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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

REFER TO ATTACH SKETCH PLAN

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	SKW2543K
Vehicle Make/Model/Colour	MERCEDES
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEN QINGZHONG
NRIC/Passport Number	S6977211J
Contact Number	92966359
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

1. Part 1: General Information

2. Part 2: Declaration

1. I, the undersigned, Chen Chee Keng, do hereby declare that I am the owner of the vehicle involved in the accident.
2. I, the undersigned, Chen Chee Keng, do hereby declare that I am the owner of the vehicle involved in the accident.
3. I, the undersigned, Chen Chee Keng, do hereby declare that I am the owner of the vehicle involved in the accident.
4. I, the undersigned, Chen Chee Keng, do hereby declare that I am the owner of the vehicle involved in the accident.
5. I, the undersigned, Chen Chee Keng, do hereby declare that I am the owner of the vehicle involved in the accident.
6. I, the undersigned, Chen Chee Keng, do hereby declare that I am the owner of the vehicle involved in the accident.
7. By the signing of this report on the insurers, you hereby consent to the archiving of this report at the centre and in copies of the report being made available at present.
8. **Consent under the Personal Data Protection Act (PDPA)**
- I understand, acknowledge, agree and consent that:
- My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be 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 insurers who have insured vehicle(s) involved in this accident (all insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers". The Insurers' lawyer/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police) for the purposes of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - investigating the accident and/or my claims;
 - carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - 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 envelope/mail packages; and/or
 - complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes").
 - all insurers who have insured vehicle(s) involved in this accident and the Insurers' lawyer/law firms, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
 - my Personal Information may be disclosed by any of the Insurers and/or GIA to their third party service providers or agents including their lawyer/law firms, which may be sited outside of Singapore, for one or more of the above Purposes.
 - 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.
 - the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulation, law enforcement and government agencies as reasonably required for the purposes stated; or
 - for complying with requirements under any regulations, laws or court orders.

AIR LIQUIDE SINGAPORE PRIVATE LIMITED
 438B Alexandra Road
 Block B #07-01 Alexandra Technopark
 Singapore 119988
 ALSg 1.7

Signature of Chen Chee Keng
 Date: 13/4/2020

Signature of Chen Chee Keng
 Date: 13/4/2020

Signature of Chen Chee Keng
 Date: 13/4/2020
 Signature of Chen Chee Keng
 Date: 13/4/2020

Sketch Plan #2

381 PL

Refer to Attachment

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Attachment

IMPORTANT NOTE

Under General Condition – Conduct of Claims of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

DECLARATION

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

AIR LIQUIDE SINGAPORE PRIVATE LIMITED
4388 Alexandra Road
Block B #07-01 Alexandra Technopark
Singapore 119868
ALSg 6.7
Date: / /

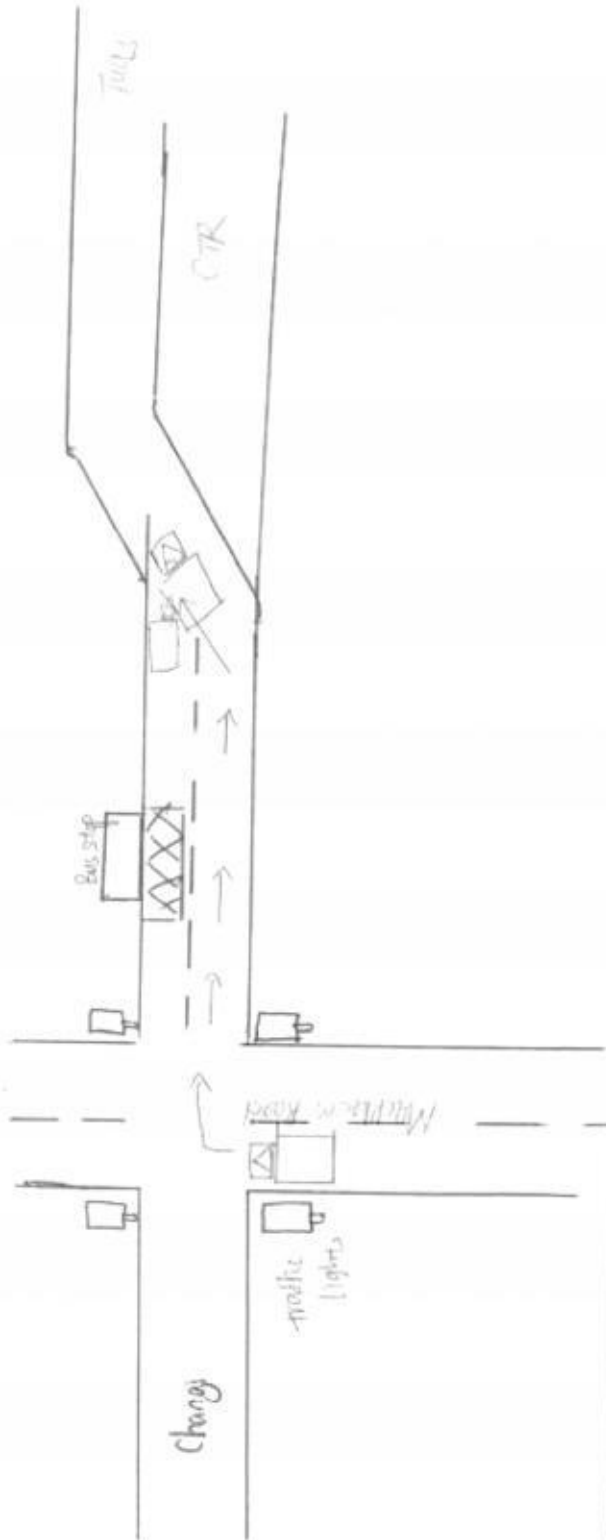
Driver's Signature
(Must be in the policyholder's
Care & Custody)

COMPANY'S SIGNATURE
Signature of the Representative
Date: 13/09/2024
Signature: [Signature]

Reporting Party's Signature
Name: Chan Chee Hong
Signature: [Signature]

Page

Sketch Plan #3



Date: 12/22/19

Time: 1730hrs

I turn my head to turn to turn direction toward back to other. I keep in right lane, when pass by the bus stop I turn to left lane. And the person is near to my truck. And route our truck body first to the person [as photo attached] driver side door and side mirror.

CERTIFICATE OF INSURANCE Pg. 1

COMMERCIAL VEHICLE (SCH 1)

CERTIFICATE OF INSURANCE

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) OF THE REPUBLIC OF SINGAPORE
THE ROAD TRANSPORT ACT 1987 OF MALAYSIA
THE AGREEMENT BETWEEN THE MINISTER FOR FINANCE (SINGAPORE) AND THE MOTOR INSURERS' BUREAU OF SINGAPORE DATED 22 FEBRUARY 1975
THE AGREEMENT BETWEEN THE MINISTER OF TRANSPORT (MALAYSIA) AND THE MOTOR INSURERS' BUREAU OF WEST MALAYSIA DATED 15 JANUARY 1968
ANY SUBSEQUENT REVISIONS TO THE ABOVE ACTS AND AGREEMENTS

M2300/C
R SB
B800SD0
Cov.Type: C
XUKSBSB

- CERTIFICATE No. BVFCSB0007241811 ChaNo: FM65FMAL0070
1. Index Mark and Registration Number of Vehicle YN 5251 P
2. Name of Policyholder AIR LIQUIDE SINGAPORE PRIVATE LIMITED
3. Effective Date of Commencement of Insurance for the purposes of the Ordinance 01 May 2018
4. Date of Expiry of Insurance 30 April 2019
5. Persons or Classes of Persons entitled to drive* (For certificate references MX1 and MX4, see overleaf)
ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH 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* (For certificate reference MX1, see overleaf)

- A. USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
B. USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
C. USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES.
THE POLICY DOES NOT COVER :
1. USE FOR HIRE OR REWARD OR FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
2. USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

Estimated Value : MARKET VALUE WITH COE/PARF
Hire Purchase Owner :
Type of Cover : Comprehensive

- * Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Malaysia) or Section 7 of the Motor Vehicle (Third-Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under the headings.

I/WE HEREBY CERTIFY that the policy to which this certificate relates is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and The Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Republic of Singapore)



Approved Insurers

Examined By

DRIVER ID AND LICENCE Pg. 1



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2171664B

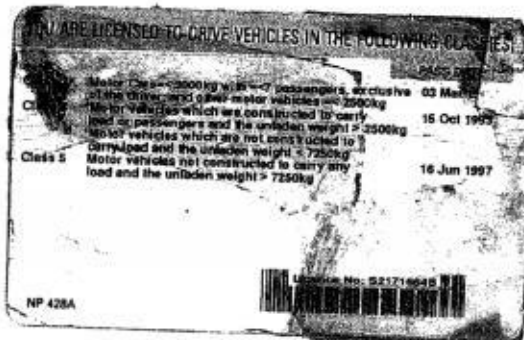
Name
KERISNA S/O SAMUVALU

Photo

சிறு குழந்தை II
Race
INDIAN
Date of birth
19-04-1958
Country/Place of birth
MALAYSIA

Sex
M

S2171664B



5207816

Barcode

NRIC No. S2171664B

Photo

Date of issue
22-08-2013

Address
APT BLK 864 WOODLANDS STREET 83
#03-200
SINGAPORE 730864