

NATIONAL Assessment Centre Services [and 1 Jan 2019] <b>NA1906197</b>			
Date In: <b>14/08/2019 14:49</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA1906197/4317</b>	SAS e-illing		
Veh No: <b>GR 6669D</b>	E-mail (within 4hrs, AIC 2hrs)		
D.O.A: <b>13/08/2019 09:20</b>	I-Motor Claim Form		
OD: TP: <b>Reporting Only</b>	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/Wksp		

Preferred Wksp / MNC Assign Wksp / QW: ( )		Tel: ( )	Fax: ( )
TP Particulars:	Veh No: <b>SHB 3351L</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%; F: 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 repair.	
( ) Total Loss Case: to e-mail Insurer URGENTLY.	
Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )	

Remarks:	(INC) (online: 678816616)	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )			
2) QC Check / Post Repair Inspection ( )			
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )			

Injury: ( )
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Date/Time:	Actions:

<b>NA1906197</b>		Invoice Preparation Checklist		Ass't (\$)	Ass't (\$)
Claimant's Particular:		1) AR: Accident Reporting (\$30)			
Driver/Owner:		2) DA: Damage Assessment (\$100)	INC (\$80)		
Contact No:		3) TP: Towing Fee	\$40/\$45		
Damaged Portion:		4) FT: Follow-Through Survey	\$120		
QC Checked by (Engr-In-Charge):		5) RT: Follow-Through Survey (Resurvey)	\$30		
Auditors' Comments:		For claimant's approval (INC Only) (wef 10 Jan 2019)			
Cat. 1:		6) TR: Re-inspection	\$75		
Cat. 2/3:		7) NI: Idm DA + SMRT Survey	\$160		
1 / 1 'd		8) NTUC Additional Services:			
		9) NI: Idm Mobility	\$30		
		Invoice dated	For Charged		
		For 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	14/08/2019 14:44
Date Of Accident	13/08/2019 09:20
Exact Location Of Accident	SLIP ROAD FROM PIE TOWARDS TOH TUCK ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GR6669D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	POO GENERAL CONSTRUCTION
Co Reg No	53360315C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98941723
Alternative Phone No	OFFICE-98941723

### Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY TO WORK
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	A 29078067 TMV
Cover Note Number	

### Driver

Name of Driver	KHO BUN POO
NRIC No	S2558876B
Date Of Birth	25/01/1959
Occupation	OUTDOOR
Date Of Driving Pass	12/02/1979
Driving Experience	40 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98941723
Fax Number	
Contact Number	OTHERS-98941723
Email Address	NOEMAIL



Address	BLK 798 YISHUN RING ROAD #03-3350
Postcode	760798
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	COLLISION - HEAD TO REAR
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 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	SHB3351L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	SOO HOO KA
NRIC/Passport Number	S0770388J
Contact Number	97869399
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.
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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.

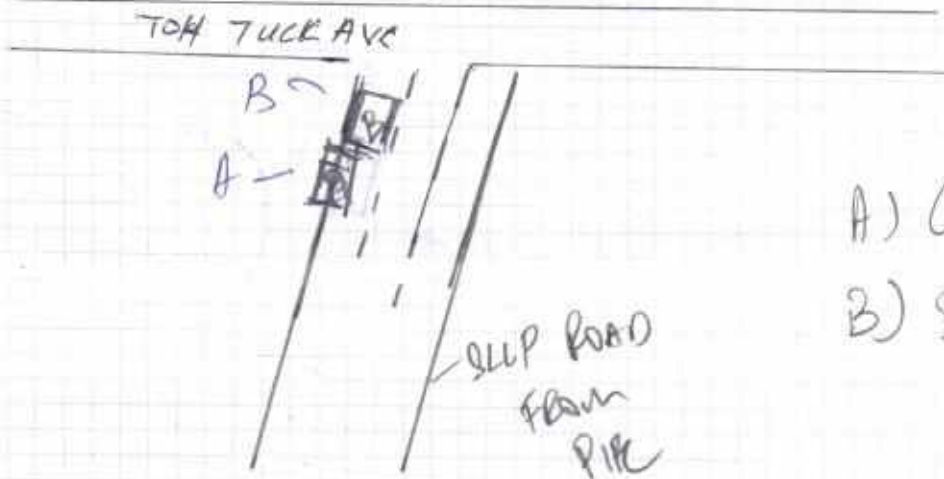


Policyholder's Signature  
Date & Time:

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

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

# SKETCH PLAN



A) GR6669D

B) SHB 3351L

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS

on 13/08/2019 AT ABOUT 0920 HRS SLIP ROAD FROM  
PIKE COMING TO TOH TUCK AVENUE IT WAS DOWN SLOPE  
& THE FRONT TAXI BRAKE & I COULD NOT BRAKE  
ON TIME & HIT THE REAR OF THE TAXI

## 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.:

14/08/2019

Resh (107110)



C101 4. INSURANCE CERTIFICATE

## ACCIDENT STATEMENT

ACCIDENT DATE: (13/08/2019) (DD/MM/YYYY), TIME: (09:20) (HH:MM)

LOCATION: Slip Road from Pk towards 70th Avenue

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GR 6669D  
b) INSURANCE COMPANY: MSLG  
c) POLICY NUMBER: A707067 TMV  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: ~~Toyota~~ Nissan Cabstar  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: ON THE WAY TO WORK  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

### 2. INSURED / POLICY HOLDER

- A) NAME: KEO Gnanapavan Construction (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: 53360315C CONTACT:   
c) ADDRESS:   
Mikatac

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: KHO BUN POO (MALE / FEMALE) 98941723  
b) NRIC/FIN/PASSPORT:   
c) ADDRESS:   
No of passenger (including driver) ( )

\* d) DATE OF BIRTH: ( ) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 12/02

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:   
No of passenger (including driver) ( )

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)  
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:   
No of passenger (including driver) ( )

### 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SHB 3351L MODEL: TAXI  
b) DRIVER'S NAME: SOO HOO PA  
c) NRIC/FIN/PASSPORT: 50770388J CONTACT: 97869395

### 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER:   
e) DRIVER'S NAME:   
f) NRIC/FIN/PASSPORT:   
No of passenger (including driver) ( )

email =

VIDEO

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2558876B



For LKK/NAC Use Only

KHO BUN POO

许文保

Race

CHINESE

Date of birth

25-01-1959

Sex

M

Country of birth

MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE

Identity Number S2558876B

Name

KHO BUN POO

For LKK/NAC Use Only

Birth Date 25 Jan 1959

Issue Date 01 Mar 2006



9144629

SPIC No. S2558876B

For LKK/NAC Use Only



Nationality

MALAYSIAN

Date of issue

19-10-2011

Address

APT BLK 708 YISHUN RING ROAD  
#03-3350  
SINGAPORE 760798

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

PASS DATE

- | Class    | Description  | Pass Date   |
|----------|--|-------------|
| Class 2B | Motorcycles <= 200 cc  | 03 Jul 1980 |
| Class 3  | Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg | 12 Feb 1979 |
| Class 4  | *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg      | 20 Apr 1981 |
|          | *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg                |             |
| *Class 5 | Motor vehicles not constructed to carry any load and the unladen weight > 7250kg                       | 02 Sep 1981 |

For LKK/NAC Use Only



NP 425A



**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

## 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 RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.2.300

Goods Carrying Vehicle - Sch I

**COMMERCIAL VEHICLE - TP****Third Party**

Certificate No. A 29078067 TMV

1. Index Mark and Registration Number of Vehicle

GR6669D

2. Name of Policyholder

Poo General Construction

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

12/04/2019

4. Date of Expiry of Insurance

11/04/2020

5. Persons or Classes of Persons entitled to drive\*

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 in connection with the Policyholder's business.

Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

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.

\* 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.

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 offence 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

for Chief Executive Officer