NATIONAL Assessment Centre	Services.	[wel   Jan'03] .	: MWA 119	106841	
Date In: 15 18 119 13:51	Jeb description		Date & Time Co		Done by
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Veh No. SIME 9432 Y	E-mail (with	in Shis, AIC 2hrs)			
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(21) (IP) Reporting Only	I-Motor W	O (Within: OD 2hrs	TP fbrs)		
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or moder:	Ass't Report	by Fax / Hand to	Owner/Wksp		,
Proformed Wksp / INC Assign Wksp / QW; (		ADDRESS OF THE PARTY OF THE PAR	Tol:	Fax	
TP Particulars: Veh No: 3	STN 1246J	, INC(	)/Non-INC(	).	1
Owner / Driver: (			Tcl:		)
Policy No: ( ) Perio	od: (	)	Cover Type: (		) .
Confirmed by : (		Date:	Time:		)
The state of the s	ote-Est. Status (	(WO): N: 0-20	%; P: 21-79%.	P: 80-100	%]
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Drive-In ( )/ Towed-In ( ); Invoice:	YES( )/	NO( ); To	wing Co: (	1,	· )
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1) Apply for Transfort Allowance ( )/Cou	irtesy Car (	)	7.0	,	
2) QC Check / Post Repair Inspection	( .	)-			
Upload Resurvey Photo [Repair Cost > \$300]	00] (	) ::	7		
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ver/Owner:	attractations and a second	3) TF 1 Towing Pee		\$40/\$45 \$120	
ulact No:		4) PT : Follow-Thro 5) PT : Follow-Thro	ugh Burvey (Resurvey	330	
		6) TR : Re-inspection	nst INC Only (wef 10	Jan 2003) \$75	
naged Portion:	NEW ADDRESS OF THE PARTY OF THE	7) N1 : Idao DA + S	MRT Survey	. 3160	
		8) NTUC Additions OD:	Services:-		
Checked by (Engr-In-Charge):		*NS: Courtosy Ca	r/Tpt Allowance	\$5	
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ditors Comments : 3 3 3 3 3 4 4 4 4 4 4	<b>新教的</b>	*NA: DV / Collec	Excess Coordination	23	
At .	• • • • • • • • • • • • • • • • • • •	TP (N11): TP (N 9) N12: Idao Mobile	on INC) against INC	\$20 30	
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Economics		Involce dated	Fee (	Charged	MENTA

## 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 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	15/08/2019 13:51
Date Of Accident	14/08/2019 10:10
Exact Location Of Accident	JLN MASJID TWDS CHANGI RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SME9432Y
Insured/Policyholder	
Name Of Registered Owner	YEO CHEE CHONG
NRIC No	S1669260C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94793809
Alternative Phone No	OFFICE-94793809
Vehicle Particulars	
Manufacturer	BMW
Model	5281
Exact Purpose for which vehicle was being used at ime of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
/ehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3004111900
Cover Note Number	St.
Driver	
lame of Driver	YEO CHEE CHONG

Name of Driver	YEO CHEE CHONG
NRIC No	S1669260C
Date Of Birth	09/10/1964
Occupation	INDOOR
Date Of Driving Pass	05/04/1982
Driving Experience	37 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94793809
Fax Number	W = W = DESTRUCTION
Contact Number	OFFICE-94793809
EMail Address	NOEMAIL

NOEMAIL

Address 21 LORONG 108 CHANGI #05-06

Postcode 426411

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 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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : UNKNOWN

GENDER: : MALE

Passenger 2

NAME: : UNKNOWN

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

NO

2

3

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 NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJN1246J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR Name of Driver TEO YONG SENG S9171375F

NRIC/Passport Number

Contact Number

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

## IMPORTANT NOTICE

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

I understand, advnowledge, 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 :
  - 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, involces, 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.

G (HEE GIONG

- (e) 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, 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:

EN (HEE CHONG

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

er sens

Reporting Centre Personner's Signature Name:

NRIC/FIN No.:

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		9				
		2501				
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DESCRIBE CIRCUM						
On the above	stated date	and time	c, I w	as travelin	g along	Jin Masjid
towards Change	lead. I	was stati	ionary whit	e whiting	tor the	front vehicle
± 1.00 - 000	oder CA	k i veta t	2			
to endos oft	which sudi	denly Vehicle	15 Collided	on to t	he rear	right portion
of my vehicle						
	No. of the last of					
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Vehide B:	SJN 1246J					
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Policyholder's Signature Date & Time:

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

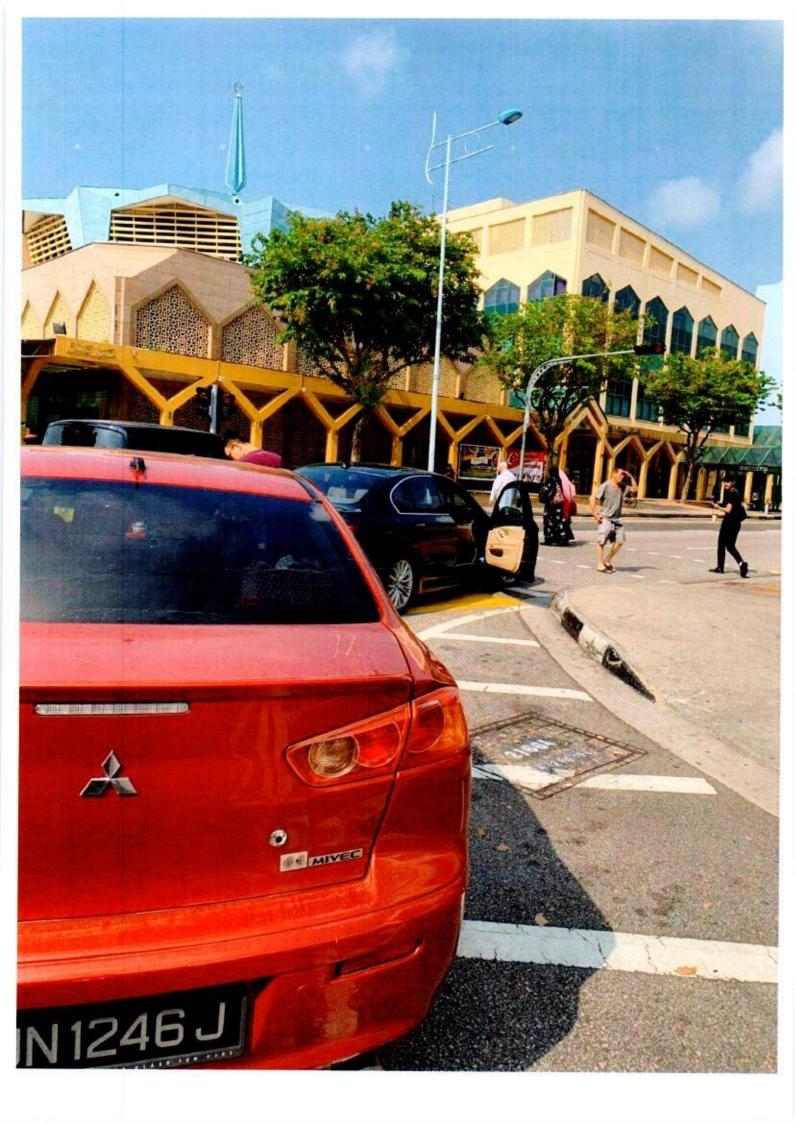
Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

5:ARMC SketchPlanForm\_V3

Date of Accident	: 14/08/19 Accident Time: 1013 (24-HR-Format)		
Accident Place	: In Masjid towards Gang Road		
Vehicle. No. (Car Plate No.)	: SME 9432 Y Make/Model: BMW 5281		
Insurace Company	: China Taiping Insurance Policy No: DMP(SN 3004 111 900		
Owner or Company Name /IC No.	: YEO CHEE CHONG SIEGESEOC		
Owner or Company Contact No.	: 9479 3809 Owner's Hp Company Tel		
DRIVER'S Name / IC No.	: YEO CHEE CHONG \$1669 260 C		
DRIVER'S Date Of Birth	: 04 / 10 / 1964 DRIVER'S License Pass Date_11 / Mar / 2003		
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee \ Others:		
DRIVER'S Address	: 21 Lorong 108 Chang; #05-06 5(426411)		
DRIVER'S Contact No./ Alt No.	:1) 9479 3809 2)		
DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)		
Email Address	: xdetox 32 @ gmail. com		
Weather & Road Surface	CLEAR & DRY RAINING & WET AFTER RAIN & WET		
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance		
Number of Passengers (Including D	river): 03		
Was there any video Captured by ca Exact purpose for which vehicle wa Any Injury (If YES, Pls state):	r camera: YES \ NO s being used at the time of accident: Private use \ Work purpose		
Other I	Party Driver's Particular (if any)		
Vehicle, No: 53N 12463	Vehicle, No:		
Vehicle Make Model: Mtsubish; L			
Name Driver: TEO YONG SENK Name Driver:			
IC No. Driver/Contact: 59171375F IC No. Driver/Contact:			

<sup>\*</sup> NEW - Passenger's name & gender:







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

Class 3

Class 4

Motorcycles not exceeding 200 cc Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms

PASS DATE

04 Feb 198 05 Apr 1982

30 May 1995

4817412

For LKK/NAC Use Only





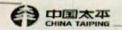
NRIC No. \$1669260C

For LKK/NAC Use Only

27-01-2012

Address

21 LORONG 108 CHANGI #05-06 SINGAPORE 426411



# 中国太平保险(新加坡)有限公司

THE SCHEDULE

AN0667A Agency AND667A 3239067

Class of Policy MOTOR PRIVATE CAR Issued on .... 10/01/2019 in SINGAPORE Acceptance Date 10/01/2019 Policy Number ..... DMPGSH3004111900

Period of Insurance from 11/01/2019 to 25/03/2020 , both dates inclusive

Insured's Name. Address YEO CHEE CHONG 21 LORONG 108 CHANGE #05-06 STILLE RESIDENCE

SINGAPORE 426411

Business/Occupn .. HAIR STYLIST Financial interest HONG LEONG FINANCE LTD AS HP OWNER

..... Base Annual Premium. Less 20% Autosafe Scheme......

No Claim Discount ......50.00% Incentive Discount 10%..... Total Annual Premium \$\$2,517.00 S\$503.40-881 006 80-S\$100.68-

55906.12 Premium Due Premium GST

Total Due

8\$1,091.80 \$\$76.43 \$\$1,168.23

Risk No. 001

MOTOR PRIVATE CAR

ORIGINAL REGISTRATION DATE: 26-03-2014 1. Registration SME9432Y

Make/Model .. Type of Cover Comprehensive No. of seats Capacity cc's 1997

BMN 5281 (A) 5

Body Type .... SALOON Yr of Manuf/Regn 2013/2014

Engine No. . . B2250667N20B20A Chassis No ... WBA5A52040D284946

Certificate Ref. MX1E

Sum Insured. Market value at the time of loss

Named Drivers Ex Sect. I ..... Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25.....

Ex Sect. I - Age >= 26..... \* Age as at date of accident

\$\$3,000.00 \$\$500.00

5\$750.00

EX ON WINDSCREEN .....

8\$100.00

Named Drivers THE INSURED

following clauses and endorsements apply to this policy Subject to Endts. 2, 25, 57, 72, N & W(unltd).

AUTOSAFE SCHEME (W)

In consideration of a premium discount given, the insured, in the event of any accident/windscredamage, must send his/their vehicle to the Company's authorised workshop for repairs if he/they to seek indemnity under Section I of this Policy.

Subject otherwise to the terms, conditions and exceptions of this policy.

One Time Waiver of Excess Clause - Own Damage Claim (Insured and Named Drivers only) Notwithstanding anything contained to the contrary, we will waive up to the first \$\$1,000.00 (f Insured and Named Drivers only) under the Excess for the first claim lodged under this Policy ;

Continued on page



Cover Type:

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Private Car Quotation at 08-Jan-2019 14:54:41 (Revised on 26-Dec-2018) Agent Code: AN0667A Agent Name: Trillium Insurance Agency Pte Ltd

Comprehensive

09-10-1964

05-04-1982

HAIR STYLIST

No Claims with NCD

Singaporean

No Claims

No Claims

Personal

SME9432Y

BMW 528i (A)

Yes

2014

BMW

Saloon

1997

50%

No:

N.A

No

No

No

MALE

### Proposer's Particulars

Name

MR YEO CHEE CHONG

Date of Birth:

Pass Date Gender

Occupation: Nationality:

Claims Experience in past 3 years: Jan 2018 ~ Dec 2018:

Jan 2017 ~ Dec 2017: Jan 2016 ~ Dec 2016:

Vehicle's Particulars

Vehicle Registration: Driven by Insured: Registration No. Year of Registration: Vehicle Make:

Vehicle Model: BM121 Seating Capacity:

Type of Vehicle Vehicle Capacity: NCD: (Free NCD Protector for Policyholders) Parallel Import (Pte. Reg. Plate Only).

Market value at the time of loss.

With Body Kit: Off-peak Car Loss Of Use Modified Vehicle: Protection Package: AutoSafe:

Windscreen Coverage (Comp only):

Include COE/PARF

Period of Insurance

From 11-01-2019 (DD/MM/YYYY) To 25-03-2020 (DD/MM/YYYY)

TYPE OF COVER	Comprehensive	Third Party Fire & Theft	
BASIC PREMIUM	\$3,032.78	\$1,556.75	Finance \$1,342.28
AUTOSAFE -20%	-\$606.56	Not Applicable	Not Applicable
NCD -50%	-\$1,213.11	-\$778.38	-\$671.14
OFD -10%	-\$121,31	-\$77.84	-\$67.11
GST 7%	\$76.43	\$49.04	\$42.28
AMOUNT PAYABLE	\$1,168.23	\$749.57	\$646.31
EXCESS APPLICABLE	\$750.00 - Please see Note	Not Applicable	Not Applicable

@ authorised workshops UNLIMITED

One time waiver of excess for the first S\$1,000 will apply to the insured and named drivers in the event of own damage claim at our authorised workshops for each policy year Windscreen Excess \$100.00

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss / Theft) will be doubled.

### Note

Additional excess other than named drivers (Only applicable to comprehensive)

1. A Flat Excess of \$3,500 will be applied for Unnamed Driver(s) who possess less than a year Singapore Driving License. Age\* <= 25 addition excess is \$3,000.00

Age\* >= 26 addition excess is \$500.00

Please note this quotation is valid till 22-Jan-2019 and is subjected to China Taiping Insurance (Singapore) Pte. Ltd. acceptance.