Danuaged Portion:  QC Checked by (Engr-In-Charge):  Anditors Comments::  24. 1:	8) N   Q   11   11   12   12   13   14   15   15   15   15   15   15   15   15	1: Idau DA + SMRT Su TUC Additional Service D.*  45: Courtesy Car / Tpi / NG: Repair Co-ordinatio N7: Post Repair Inspect N8: DV / Collect Excess P (N11): TP (N-in INC) 12: Idae Mobile  los dated	diowanse n on Coordination	\$5 \$10 \$25 \$25 \$20 30	and the state of t
Danuaged Portion:  QC Checked by (Engr-In-Charge):  Anditors Comments::	8) N   0   1)   1   1   1   1   1	TUC Additional Service  1) *  15: Courtesy Car / Tpt /  16: Repair Co-ordinatio  17: Post Repair Inspecti  18: DV / Collect Excess  P(N11): TP (N-1 INC)	diowanse n on Coordination	\$5 510 \$25 \$3 \$5 \$20	
Danuaged Portion:  QC Checked by (Engr-In-Charge):	8) N Q 1) 11 11 11 11 11 11 11 11 11 11 11 11	TUC Additional Service  1)*  45: Courtesy Ces / Tpt /  16: Repair Co-ordinatio  17: Post Repair Inspect	diowanne	\$5 510 \$25	
Danuaged Portion:	8) N Q *)	TUC Additional Service  1) *  45: Courtesy Car / Tpt /  46: Repair Co-ordinatio	illowance	\$5 \$10	
Danuaged Portion:	8) N	TUC Additional Service	15:-		
To distribute filling a property of the second section of the second section of the second se	7) N 8) N	TUC Additional Service	13:-		
To distribute filling a property of the second section of the second section of the second se			IVEY		
	6) T	R: Re-Inspection		\$75	
Contact No:	. 5) P	l' i Follow-Through Bur or claiming against INC	Only (well 10 Jan 200)	)	
Driver/Owner:	4) 17	I : Follow-Through Sur	vey	\$120 \$30	
Claimants Particulary 128 (3) 3 (2) 4 (4) 32 (2)	次语 (	A : Damege Assessmen F: Towing Fee	(\$100); INC (58		
A CONTRACT OF THE STREET, LICENSES,	906235	R : Acaldent Reporting	(330);	30.00	
N.A.			ichen met de		(LAMES)
•	1				
·		. 10			
Date/Times / Netions:				AST DELL'	<u></u>
Injury :				eronous view	waterwickier
The same of the sa	( )		,		į.
3) Upload Resurvey Photo [Repair Cost>\$300	( · )=	<del></del>	· · · · · · · · · · · · · · · · · · ·	7 ;	
Apply for Transf.ort Allowance ( )/Con     QC Check / Post Repair Inspection	urtesy Car ( )			<del>,</del> -	
Usmaris Section Calconnection by the control of	ACOMORANIA SENTENCIA	BUGS	Antidescribble and	Milamintonia	Livy .
The Supersyllowing in the Protection of the Supersyllowing in the			ROMVING VIVO	THE PROPERTY OF	TRIVILLE TO THE PARTY OF THE PA
Drive-In ( )/ Towed-In ( ); Invoice:		) ; Towing C	20: (	,	)
( ) Walk-In Customer : Customer's Inform ( ) Total Loss Case : to e-mail Insurer		, and a Suicity NC	Talor of Tepanal.		
Could at Kennya kanasa kan	CHECK CHARLES	CANCELL RESERVED	refer of repoler	14-04 P	
Excess: (\$ ) Loading: \$1,000	) ( ) / \$2,000 (	) )	BOTTO TO THE STATE OF	<b>185 75 75</b>	<del></del>
		/NO( )			
	ote-Est. Status (WO)		21-79%. P: 80-1	100%]	
Confirmed by : (		ater.	Time:	)	<del></del>
Policy No: ( ) Perio	od: (	) Cover	Турс: (	).	
Owner / Driver: (		Tcl:		)	
TP Particulars: Veh No: SI	HB 3575H.	. INC( . )/N	on-INC()		······································
Proformed Wksp / INC Assign Wksp / QW: (	Denouse account relies in a con-	Tol:		w:	)
TP Insurer:		x/Hand to Owne	/Wksn	,	
	Assessment/Surve	y Report			
OD : Reporting Only	I-Photo Uploade	d			
2118/19 04:25	I-Motor W/O (W	ithin: OD 2hrs, TP 4hrs)	,		
a management of a second secon	I-Motor Claim I	orm .			nt-
Volumo: SLQ 15 B	E-mall (within 8hrs,	AIC 2hrs)			
Refito: MA/ C7219014739144	SAS e-filing				
2-10111 11.20	Jeb description	Date	&Time Completed	Don	c pî.
Date In: 22/8/19 /1:28					1

## SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
   This Form must be <u>completed</u> 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

	ACCIDENT STATEMENT	
Date Of Report	22/08/2019 11:28	
Date Of Accident	21/08/2019 04:25	
Exact Location Of Accident	ANG MO KIO AVE 5	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLQ15B	
Insured/Policyholder		
Name Of Registered Owner	M/S RENO BOX PTE LTD	
Co Reg No	198500568M	
Email Address	WILLIAM@RENOBOX.COM.SG	
Mobile Phone No		
Alternative Phone No	OFFICE-67897338	
Vehicle Particulars		
Manufacturer	MERCEDES-BENZ	
Model	E300 AMG	
Exact Purpose for which vehicle was being used at time of accident	t PRIVATE USE	
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	DMPCSN3068251800	
Cover Note Number	-	
Driver		
Name of Driver	TAN WEI HOCK WILMER	
NRIC No	S9547773I	
Date Of Birth	23/12/1995	
Occupation	INDOOR	
Date Of Driving Pass	19/11/2014	
Driving Experience	4 YEARS AND 9 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-97211139	
Fax Number		
Contact Number		
EMail Address	WILMERTWH@HOTMAIL.COM	

Address 15 KAMPONG SIREH

Postcode 53712

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

Insurance Company of Driver's Own Vehicle

-

NO

YES

NO

2

NO

NO

General Information of the Accident

Type Of Accident COLLISION - CROSS JUNCTION

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?

Was any injured conveyed to hospital by

ambulance?

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

ger 1 NAME: : PERRY

GENDER: : MALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

PLEASE REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

WITH DRIVER

Remarks/ Reasons: Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SHB3575H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

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

eno

Driver's Signature

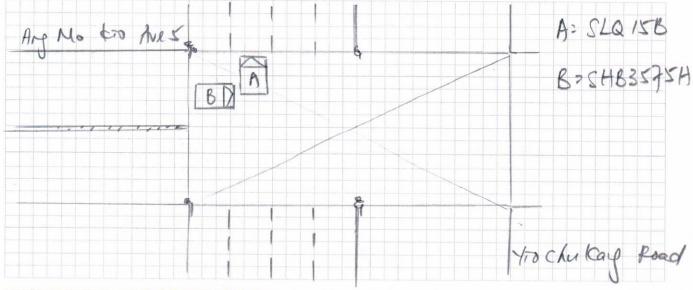
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCOMSTANCES OF THE ACCIDENT
on 21/08/2019 @ 0425 HRS, I was travelling along Yio Chu Kang Road towards Jalan Kayu
direction. While I was travelling half way in the middle of the junction of You chu kang Road and
Ang Mo Kio Ave 5, a Taxi (SHB3575H), travelling along Ang Mo Kio Ave 5 came towards me
at a fast speed, colliding into my vehicle (A: SLQ15B)'s, left lear portion. It should be noted
that the fraffic light of the mad I was travelling on was green in my favour, and that I was
in the right of the way, as can be seen per the video attached. There were no injuries arising
from this accident

**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.:

REPUBLIC OF SINGAPORE DRIVING LICENCE Licence Number S 9 5 4 7 7 7 3 1 TAN WEI HOCK, WILMER Birth Date: 23 Dec 1995 Issue Date 19 Nov 2014

For LKK/NAC Use On

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$95477731

Name





TAN WEI HOCK, WILMER

陈 福

CHINESE Date of birth 23-12-1995

SINGAPORE

Country of birth

395477731

4513307

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

EFFECTIVE DATE

Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg

For LKK/NAC Use

Date of issue 19-01-2010

15 KAMPONG SIREH SINGAPORE 537127

NP 428A





CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MX4E N SN AN0650A COMPREHENSIVE

# 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)

Engine No : 27492031074005 DMPCSN3068251800 CERTIFICATE No. Chassis No: WDD2383482F010707 1. Index Mark and Registration SLQ15B Number of Vehicle 2. Name of Policy Holder M/S RENO BOX PTE. LTD. 3. Effective date of the Commencement of Insurance for 29 NOVEMBER 2018 the purposes of the Regulations, Ordinance or Enactment IN ADDITION TO NAMED DRIVERS EX: EX SECT. I - AGE <= 25......\$\$3,000.00 4. Date of Expiry of Insurance 28 NOVEMBER 2019 \* AGE AS AT DATE OF ACCIDENT EX ON WINDSCREEN......\$\$100.00 5. Persons or Classes of Persons entitled to drive \*

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.

#### 6. Limitations as to use: \*

USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS / THEFT) WILL BE DOUBLED.

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.

HIRE PURCHASE CO. : HONG LEONG FINANCE 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.

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

