

NATIONAL Assessment Centre Services.

[ver 1 Jan 00]

MAA1191/2660

Date In: 26/08/2009 18:26	Job description	Date & Time Completed	Done by
Ref No: NBA/21P/09/15005/Y	SAS e-filing		
Veh No: SLX9565E	E-mail (to Julia Stier, AIC 2hrs)		
D.O.A: 24/08/2009 16:35	I-Motor Claim Form		
OD: TP: Reporting Only	I-Motor W/O (within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: ( ) Tel: ( ) Fax: ( )

TP Particulars: Vch No: UNKNOWN BIKE 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%. P: 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 repolar.
- ( ) Total Loss Case: to e-mail Insurer URGENTLY.
- Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Conditions (use appropriate code)

- 1) Apply for Transport Allowance ( ) / Courtesy Car ( )
- 2) QC Check / Post Repair Inspection ( )
- 3) Upload Resurvey Photo [Repair Cost > \$3000] ( )

Injury: \_\_\_\_\_

Date	Activity

MAA1906481

Driver/Owner:	1) AL: Accident Reporting (\$30)	
Contact No:	2) DA: Damage Assessment (\$100)	INC (\$10)
Damaged Portion:	3) TP: Towing Fee	\$40/\$45
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey	\$120
	5) FT: Follow-Through Survey (Resurvey)	\$30
Auditor's Comments:	For claiming against INC Only (ver 10 Jan 2003)	
	6) TR: Re-inspection	\$75
Tel. 1:	7) NI: Idao DA + SMRT Survey	\$160
	8) NTUC Additional Services:	
Tel. 2:	9) NI: Idao Mobile	\$0
	*NS: Courtesy Car / Tpl Allowance	\$5
	*N6: Repair Co-ordination	\$10
	*N7: Post Repair Inspection	\$25
	*N8: DV / Collect Excess Coordination	\$5
	*N9: TP (Nil); TP (In INC) against INC	\$10
		\$0
	Invoice dated	Fee Charged
	Invoice dated	Fee 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	26/08/2019 18:26
Date Of Accident	24/08/2019 16:35
Exact Location Of Accident	ALONG BEDOK NORTH AVENUE 1
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX9565J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	VINCAR LEASING AND RENTAL PTE LTD
Co Reg No	-
Email Address	MIAOWCLAIRE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91689808
Alternative Phone No	OFFICE-91689808
<b>Vehicle Particulars</b>	
Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	PRIVATE HIRE
<b>Insurance Company</b>	
Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD19V09328/VPZ/R00
Cover Note Number	
<b>Driver</b>	
Name of Driver	TEO LING ZHEN, CLARICE
NRIC No	S8209671Z
Date Of Birth	27/03/1982
Occupation	OUTDOOR
Date Of Driving Pass	19/06/2002
Driving Experience	17 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91689808
Fax Number	
Contact Number	OTHERS-91689808
E Mail Address	MIAOWCLAIRE@GMAIL.COM

Address	BLK 700A ANG MO KIO AVENUE 6 #14-310
Postcode	561700
Was driver an employee of the Insured's Company	NO
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

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)	4
Passenger 1	NAME: : PASSENGER GENDER: : FEMALE
Passenger 2	NAME: : PASSENGER GENDER: : FEMALE
Passenger 3	NAME: : PASSENGER GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK POLICE DIVISIONAL HQ (G DIVISION)
Police Station Address	<b>ROAD:</b> 30 BEDOK NORTH ROAD , <b>POSTCODE:</b> 469676 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2440000 - <b>FAX NO:</b> 64443009
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT G/20190824/7041

#### 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	UNKNOWN
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

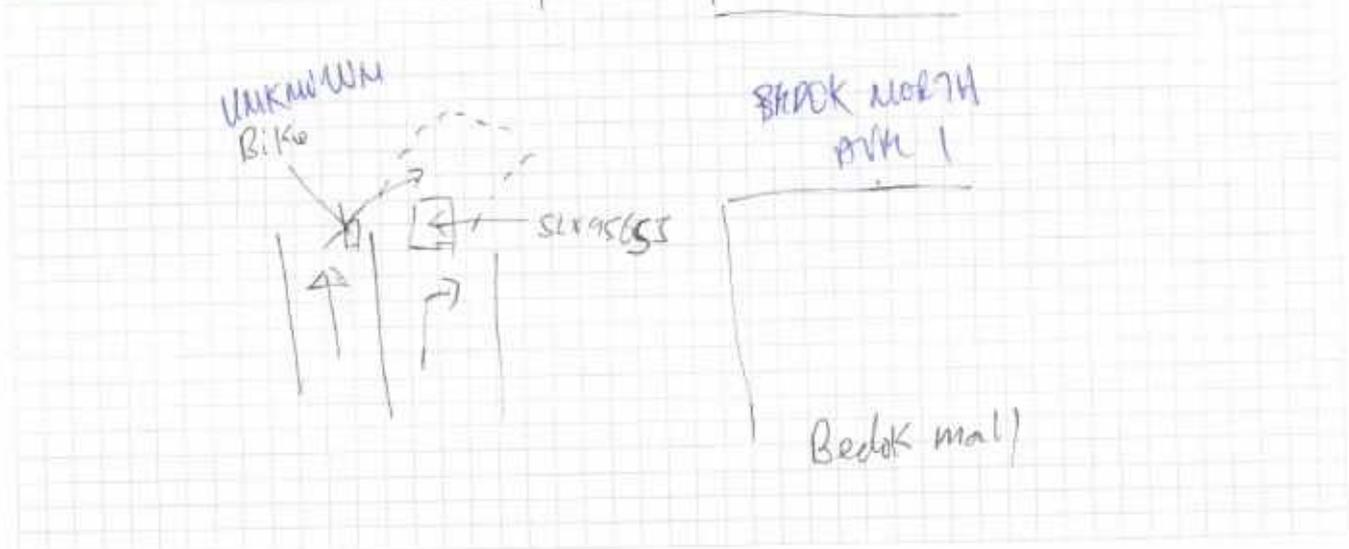
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*Polis trafik 20 Jalan Karpura  
 17090824 / 2041*

DECLARATION

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

Policyholder's Signature  
 Date & Time:



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

*[Signature]*  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**



G/20190824/7041

1 of 2

**POLICE REPORT (NP299)**

Report No. G/20190824/7041

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No:1800-2440000

Date/Time Report Made 24/08/2019 23:41	Vide Report No.	Station Diary No.
Name Of Informant TEO LING ZHEN CLARICE	Address APT BLK 700A ANG MO KIO AVENUE 6 #14-310 SINGAPORE 561700	
ID Type / ID No. NRIC NO / S8209671Z	Contact No. Home/Office:	Mobile: 91689806
Nationality SINGAPORE CITIZEN	Email Address clarice8.sg@gmail.com	
Occupation Business development manager	Sex Female	Age 37
Institution/School Name	Date of Birth 27/03/1982	Race Chinese
Date/Time Of Incident 24/08/2019 16:35 - 24/08/2019 16:35	Location Of Incident BEDOK NORTH AVENUE 1	

**Brief details.**

Report filed for record purposes only.

Incident involved my vehicle (SLX9565J) and a motorbike with probation triangle, at the above named junction with only one right turn lane.

My vehicle was stopped behind the stop line within the right turn lane, awaiting for the light to turn green. As soon as the light turn green, a motorbike cut into my lane from the left side lane which is a go-straight

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/08/2019 23:41
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20190824/7041

lane. Upon seeing this, I jammed my brake at low speed. The motorbike carried on into the right turn pocket and rode away at the earliest possible opportunity. After completing the turn, I alight to check for damage. Minor damages on the car were noted. Non of my passengers are injury. No other any road user is involved. The rider with no pillion did not fall off from the bike, and the rider did not stop after executing the right turn.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/08/2019 23:41
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

(USA)

# ACCIDENT STATEMENT

ACCIDENT DATE: (24, 08, 2017) (DD/MM/YYYY), TIME: (14:35) (HH:MM)

LOCATION: Right turn lane of New upper Chang Road & Bedok North Ave 1

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLX9565
- b) INSURANCE COMPANY: LIBERTY
- c) POLICY NUMBER: \_\_\_\_\_
- d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
- e) MAKE & MODEL: Honda Vezel
- f) TYPE: (SAOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
- g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
- h) PURPOSE OF USING AT ACCIDENT TIME: GPATZ
- 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: \_\_\_\_\_ (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_
- c) ADDRESS: \_\_\_\_\_

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

### DRIVER

- a) NAME: Teo Ling Zhen, Clerk (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: SF207671/2 CONTACT: 91687808
- c) ADDRESS: JULIA ANG MIA KIO AVE C #14-02

\*d) DATE OF BIRTH: (27/05/1982) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 29/6/2002

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: #1/CAK

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS dry)

b) ROAD SURFACE: (DRY / WET / OTHERS dry)

6. WAS ANYBODY INJURED (YES / NO)

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

IF YES, PLEASE STATE WHICH POLICE STATION: Online Report

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_
- b) DRIVER'S NAME: \_\_\_\_\_
- c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_
- e) DRIVER'S NAME: \_\_\_\_\_
- f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

Page 2 of 1 (M)

No of passenger (including driver) (4)

No of passenger (including driver) ( )

No of passenger (including driver) ( )

MIAOWCLARE@GMAIL.COM

Email = miaowclare miaowclaire@gmail.com  
VIDEO miaowclare@gmail.com  
TATCT

MIAOW

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8209671Z



For LKK/NAC Use Only

TEO LING ZHEN CLARICE

張凌禎

Race  
CHINESE  
Date of birth  
27-03-1982  
Sex  
F  
Country of birth  
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8209671Z

Name

TEO LING ZHEN CLARICE

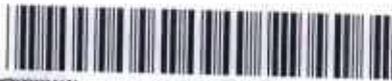
For LKK/NAC Use Only

Birth Date: 27 Mar 1982

Issue Date: 11 Mar 2013



483843



NRIC No S8209671Z



For LKK/NAC Use Only

Date of issue  
22-02-2013

Address  
APT BLK 700A ANG MO KIO AVENUE 6  
#14-310  
SINGAPORE 561700

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

EFFECTIVE DATE

Class 2B	Motorcycles $\leq$ 200 cc	25 Mar 2004
Class 3	Motor Cars $\leq$ 2000kg with $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles $\leq$ 2500kg	19 Jun 2002

For LKK/NAC Use Only

NP 428A



## 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)

<b>Certificate No</b>	SD19V09328 /VPZ /R00
<b>Form</b>	MZ406C
<b>Date Of Issue</b>	22-JUL-2019
<b>1.Index Mark and Registration No. of Vehicle:</b>	SLX9565J
<b>2.Chassis number of Vehicle:</b>	RU31265346
<b>3.Name of Policyholder:</b>	VINCAR LEASING AND RENTAL PTE LTD
<b>4.Effective date of Commencement of Insurance for the purpose of the Act:</b>	19-JUL-2019 00:00 AM
<b>5.Date of Expiry of Insurance:</b>	18-JUL-2020 23:59 PM
<b>6.Persons or Classes of Persons entitled to drive*:</b>	
<p>Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.</p> <p>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> <p>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.</p>	
<b>7.Limitations as to use*:</b>	
<p>A) Use for carriage of passengers or goods in connection with the Policyholder's business.</p> <p>B) Use for social, domestic, pleasure and business purposes of any person to whom the vehicle is hired.</p> <p>C) Use for the carriage of passengers for hire or reward under Private Hire Vehicle (PHV) by the person to whom the vehicle is hired.</p>	
<b>8.Policy does not cover:</b>	
<p>A) Use for racing, pace-making, reliability trial or speed-testing.</p> <p>B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.</p> <p>*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>	
<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).</p>	
<p>For and on behalf of <b>LIBERTY INSURANCE PTE LTD</b> Approved Insurers</p> 	
<p>_____ Authorised Signature</p>	
<b>For Information only:</b>	
<b>COVERAGE :</b>	Comprehensive, Unlimited Windscreen, PHV Extension (Geographical Area: Singapore only)
<b>SUM INSURED:</b>	MARKET VALUE AT THE TIME OF LOSS
<b>EXCESS:</b>	Section I S\$2000, Section II S\$2000, Windscreen Excess S\$100
<b>FINANCE COMPANY:</b>	MAYBANK SINGAPORE LTD
<b>PRODUCER NAME:</b>	AETNA INSURANCE BROKERS PTE LTD

PLSLI-/22-JUL-19

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22-JUL-19