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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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.
- 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.
- 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.

SECTION AND ASSESSMENT OF THE PARTY OF THE P	ACCIDENT STATEMENT
Date Of Report	23/10/2019 15:12
Date Of Accident	23/10/2019 07:45
Exact Location Of Accident	ALONG EAST COAST ROAD
Country/State of Loss	SINGAPORE
and the state of the state of D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	GBA3771J
Insured/Policyholder	
Name Of Registered Owner	TKF TRADING
Co Reg No	53361848K
Email Address	HOCK2133@GMAIL.COM
Mobile Phone No	(LOCAL) +65-85692198
Alternative Phone No	OFFICE-85692198
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	HIACE
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO.
Policy Number	5110202086
Cover Note Number	
Driver	
Name of Driver	TAY SOON HOCK (ZHENG SHUNFU)
NRIC No	S7129084J
Date Of Birth	23/08/1971
Occupation	OUTDOOR
Date Of Driving Pass	09/10/1991
Driving Experience	28 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85692198
Fax Number	AAC BO
Contact Number	OTHERS-85692198

HOCK2133@GMAIL.COM

Address

BLK 111 EDGEFIELD PLAINS

#15-400

Postcode

820111

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

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

NO 3

involved in the accident

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)

2

Passenger 1

NAME:

: WIFE

GENDER:

: FEMALE

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

Vehicle Registration Number

SJG6321D

Vehicle Make/Model/Colour

HONDA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

LEE CHER CHIANG BRENT

DETAILS OF OTHER VEHICLE PROPERTY 1

NRIC/Passport Number

S7703059Z

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLG6448Z

Vehicle Make/Model/Colour

BMW

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

CHUA SZE YONG

NRIC/Passport Number

S7710478Z

Contact Number

2011 0 2011 0 201

Address

83333578

Address

Postcode

Insurance Company Name

No. Of Passenger (Including Driver)

Nature Of Damage

2

Passenger 1

NAME:

GENDER:

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.
- 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.
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- 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, 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:
 - 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 faw 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.

Policyholder¹s Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 23

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN	plous	FAST	COAS	ROA	B			
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	Date &	Time: 23/10	0/19		(MRIC/	FIN No.:	040 W	100

ACCIDENT STATEMENT

	DETAILS OF LITTLE
12	a) VEHICLE NUMBER: 68A 3 77/5
	DINSURANCE COMPANY: ATKC
180	C)POLICY NUMBER: 51/0202086
	O)POLICY TYPE: (COMPREHENSIVE NTHIRD PARTY) THIRD PARTY FIRE &THEFT)
¥.	
6	[]TYPE:(SALOON / COUPE / MPV / VANY LORRY / MOTORCYCLE, / OTHERS)
W	9) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
	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: TRY SOOM HOCK (MALE / FEMALE)
	DINRIC/FIN/PASSPORT: 571290345 CONTACT: 85692/98
	CIADDRESS: 111 Edge Flew Plains # 15-400
WIFE.	Singapore 326,771.
wine A	* CONTINUE TO 3.d IF DRIVER ALSO POUCY HOLDER
#Ho of passonga	DRIVER THE TRADING
Cincluding driver	a) NAME: (MALE / FEMALE)
(2)	STANGET INTERSPORT
-	c)ADDRESS:
	"d) DATE OF BIRTH: (23) 68/ (977) (DD/MM/YYYY) .
	eloccupation: (INDOOR / OUTDOOR) a long so
	DUSTE OF DRIVING PASC 69 10 200 1991.
4.	WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES /(NO)
	IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: 6 WALKE
5.	G) WEATHER CONDITION: (CLEAR) RAINING / OTHERS
	D) WEATHER CONDITION: (CLEAR) RAINING / OTHERS
6.	D) ROAD SURFACE: (DRY) WET / OTHERS
6.	D) ROAD SURFACE: (DRY) WET / OTHERS WAS ANYBODY INJURED (YES / NO) C) REPORTED TO POLICE (YES / NO)
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. 6. 7.	D) WEATHER CONDITION: (CLEAR) RAINING / OTHERS
6. 7. The of passonaer	G) WEATHER CONDITION: (CLEAR) RAINING / OTHERS b) ROAD SURFACE: (DRY) WET / OTHERS WAS ANYBODY INJURED (YES / NO) G) REPORTED TO POLICE (YES / NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE G) VEHICLE NUMBER: 5-14 6321 D MODEL: Hondon
6. 7. White of passonger ("Including absorb)	D) WEATHER CONDITION: (CLEAR / RAINING / OTHERS D) ROAD SURFACE: (DRY / WET / OTHERS D) WAS ANYBODY INJURED (YES / NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE D) VEHICLE NUMBER: 5-14 6321 D MODEL: Handa B) DRIVER'S NAME: Lee Cher Charge Brent
6. 7. The of passonaer	G) WEATHER CONDITION: (CLEAR / RAINING / OTHERS
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the of passinger ()	G) WEATHER CONDITION: (CLEAR) RAINING / OTHERS b) ROAD SURFACE: (DRY) WET / OTHERS WAS ANYBODY INJURED (YES / NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE G) VEHICLE NUMBER: 5-46 6321 D MODEL: Honda C) NRIC/FIN/PASSPORT: 577030572 CONTACT: THIRD PARTY VEHICLE G) VEHICLE NUMBER: 5-46 6448 Z MODEL: BMW C) DRIVER'S NAME: Chica 528 NODEL: BMW
6. 7. White of passinger ("Including divious)	G) WEATHER CONDITION: (CLEAR) RAINING / OTHERS b) ROAD SURFACE: (DRY) WET / OTHERS WAS ANYBODY INJURED (YES / NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE G) VEHICLE NUMBER: 5-46 63210 MODEL: Handa C) NRIC/FIN/PASSPORT: 577030572 CONTACT: THIRD PARTY VEHICLE G) VEHICLE NUMBER: 5-46 64482 MODEL: BMW C) DRIVER'S NAME: Char 5-28 Years
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the of passinger (Including dison)	G) WEATHER CONDITION: (CLEAR / RAINING / OTHERS b) ROAD SURFACE: (DRYY WET / OTHERS WAS ANYBODY INJURED (YES / NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE G) VEHICLE NUMBER: 519 63210 MODEL: Honda b) DRIVER'S NAME: Lee Cher Chang Brent c) NRIC/FIN/PASSPORT: 5770 30572 CONTACT: THIRD PARTY VEHICLE d) VEHICLE NUMBER: 516 64482 MODEL: RMW e) DRIVER'S NAME: Chua 622 Yeag

email = HOCK 2133 @ GMAL . 60M

rsbm

From:

Gamer72C ChosenGames <hock2133@gmail.com>

Sent:

Wednesday, 23 October, 2019 10:53 AM

To:

rsbm@lkkauto.com

Subject:

Fwd: iShop@ACRA - Info Services (Receipt/ARN No.: ACRA190607018463)

----- Forwarded message -----

From: <ACRA BIZFILE@acra.gov.sg>

Date: Sat, 8 Jun 2019, 11:51

Subject: iShop@ACRA - Info Services (Receipt/ARN No.: ACRA190607018463)

To: <HOCK2133@gmail.com>

Dear Sir/Mdm,

CONGRATULATIONS! YOUR TRANSACTION(S) HAS/HAVE BEEN FILED SUCCESSFULLY.

Please download your free Business Profile(s) by 15/06/2019 11:48:37 by clicking here.

A summary of your free Business Profile(s) is as follows:

TRANSACTION NAME	ENTITY NAME	UEN	PRODUCT DESCRIPTION	AMOUNT PAID (SGD) ORDER TX. NO
RENEWAL OF BUSINESS REGISTRATION	TKF TRADING	53361848K	FREE BUSINESS PROFILE (BIZ) WITH RENEWAL	0.00 F190147546

Action Required:

Please download your free Business Profile(s) within 7 days from the date of this email. There will be no replacement or refund after the link expiry date.

Useful Information:

- This email is also available in your message box upon login at https://www.bizfile.gov.sg.
- Transaction Status:

View your transaction status at iShop Homepage > Type of Business Information > Useful eServices > Transaction Status Enquiry.

Requestor's

: TAY SOON HOCK

Name

: XXXXXX084J

Lodger's ID

Date of

: 07/06/2019

Lodgement

3. For more information on other iShop products, please visit https://www.tis.bizfile.gov.sg.

Yours sincerely

Accounting and Corporate Regulatory Authority (ACRA)

This is a system-generated email. Please do not reply to this email.

For more information, please visit our website at www.acra.gov.sg or use our interactive virtual assistant, AskJamie@ACRA.

· Claim Handling

ccident HT/1048205							
witty No.	E110202086	Vehicle No.	G8A37741		GST Registration No.		
ertificate No.							
elicyhulder Name	TRF TRADING	26072245			Policyholder NRIC	\$3361848A	
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P GI Driver Info	Unnamed Driver	Driver Type	Unnamed Driver				
Linnamed driver Name	TAY SOON HOCK	Driver NRIC	571290947		Driver DOS	23/08/1971	
Register Date of Driver License	09/10/1991	Driver Age	40		Driving Experience	29	
Contact No.(Mittida)	85002199	Contact No.(Office)			Contact hou[Home]		
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NAC_BURIT_MERAH_BODGTG(NATIONAL ASS S (BURIT MERAH)) IN 23 Oct	SESSMENT CENTRE GERVICE 2019 15:37	Photoe	100	sormal			
NAC_BURIT_MERAH_BUR676(NATIONAL ASS S (BURIT MERAH)) IN 22 Oct	SESMENT CENTRE SERVICE 2019 15:37	Photos	*	kgrimak			
THAC_BURIT_MEXAH_SCORTE(NATIONAL 455) 6 (BURIT MERAH)) on 23 Oct	ESSMENT CENTRE SERVICE 2019 15:37	Photos.	:04	larmet .			
AND MATERIAL ASSE	PSSHENT CENTRE SERVICE	Photos	No	process.	Physics 20	19-10-23	
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AC_BURTT_MERAH_BODGTS(WATIONAL ASSES S (BURTT_MERAH)) on 33 Oct 20	SEMENT CENTRE SERVICE 019 15/37	Plotis.	Non	mal	Photos 201	9-10-23	
AC_SUNTT_MERAH_800038/, NATIONAL ASSES 5 (BUNIT MERAH)) on 23 Oct 20	SMENT CENTRE SERVICE 19 15:37	Photos	1900	ruel.	Photos 2011	9:10-73	
NC_BURTT_METAH_800678/ NATIONAL ASSESS S (BURTT MERAH)) on 23 Dec 20	SMENT CENTRE SERVICE 19 19:37	Phytoe	Name	rine :			
E BLBIT MERAN BUOKTN RATIONAL ASSESS S (BURIT MERAN)) on II Oct 201	SMENT CENTRE SERVICE 19 15:39	Michael	North	rail			
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