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Owner / Driver: (	4 1319)		Tel:		)	
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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.
- 3. Information provided must be as <u>truthful and accurate</u> 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	29/11/2019 17:37
Date Of Accident	28/11/2019 20:05
Exact Location Of Accident	JUNC OF JLN PEMIMPIN & JLN BINCHANG
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJT8849S
Insured/Policyholder	
Name Of Registered Owner	ONG KWEE HOCK
NRIC No	S1251584G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91114350
Alternative Phone No	OFFICE-91114350
Vehicle Particulars	
Manufacturer	HONDA
Model	AIRWAVE
Exact Purpose for which vehicle was being used at time of accident	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 HIRE
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MS011938
Cover Note Number	
Driver	
Name of Driver	ONG KWEE HOCK
NRIC No	S1251584G
Date Of Birth	28/09/1957
Occupation	OUTDOOR
Date Of Driving Pass	05/01/1984
Driving Experience	35 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91114350
Fax Number	
Contact Number	OFFICE-91114350

NOEMAIL

Address

BLK 367 YISHUN RING RD #02-1536

Postcode

760367

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 - CROSS JUNCTION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

NO 2

involved in the accident

YES

Was any body injured in the Accident?
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?

YES

If Yes, Please state which Police Station

Police Station Name

YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-8529999 - FAX NO: 68522299

Was notice of intended Prosecution given?

If Yes, against whom?

NO

### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20191129/2045

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

SMA1310P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 18

## **DETAILS OF INJURED PERSON 1**

Name

ONG KWEE HOCK

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SJT8849S

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

### 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 <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>.
- 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, 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 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:
  - 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

Museek

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Invock

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No :

A: S5T88495	+	
B: SMA 1310P		
B: 2MH DIGI		
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Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signatu

# ACCIDENT STATEMENT

ACCID	ENT DATE 18	1/ 19 )(DD/MM/YY	YY), TIME: 20 05 (HH:MM
		W Jalan Pemimp	
			pri brienary
	DETAILS OF VEHICLE		
		DT 88495	
		PANY: Tokio maviv	ne
	CIPOLICY NUMBER;		
	alborick tabs: (co	MPREHENSIVE / THIRD PA	ARTY / THIRD PARTY FIRE &THEFT)
114	D)MAKE & MODEL:_	Honda Alruave	
1	TYPE: (SALGON / CO	DUPE / MPV /V AN / LOR	RY / MOTORCYCLE / OTHERS)
Ş	VEHICLE CATEGOR	RY: (PRIVATE / COMMERC	CIAL (MOTOPOVOLE)
ŕ	IPURPOSE OF USING	AT ACCIDENT TIME:	This Light
11	ARE YOU CLAIMING	UNDER YOUR OWN INSI	UD LUCE DE LA COL
0.0	IF NO PLEASE STATE	THIRD BASTY CLASS	URANCE (YES/NO)
2. 11	SURED / POLICY HO	THIRD PARTY CLAIM / R	EPORTING ONLY)
	INRIC/FIN/PASSPOR	ng knee Hock T: S12515846	[MALE / FEMALE]
		7 Yishun Plan not	#02-1536 ω)760367
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in prostanger of	NAME:		
the state of the s	NRIC/FIN/PASSPORT		(MALE / FEMALE)
	ADDRESS:	<u> </u>	CONTACT:
	(DD(C33		
****	DATE OF RIPTH : 15	19 /1957 1100/1	
eld	OCCUPATION: (INDO	100/1	MM/YYYY)
ĐΥ	EARS OF DRIVING EX	(BSEDIEVICE)	
4. WA	S DRIVER AN EMP	OVER OF THE INCHAS	ED'S COMPANY? (YES / 6)
IF I	NO, RELATIONSHIP	OF THE DRIVER WITH	HINSURED: Owner
5. alv	VEATHER CONDITION	N: (CLEAR / RAINING / C	TINSURED: DUMEN
blR	OAD SURFACE IND	Y / WET / OTHERS	DIHERS
6. WA	S ANYBODY INJURE!	WELL OTHERS	
7. alk	PORTED TO POLICE	WE WILL	377
IF.	EPORTED TO POLICE	(VE8 / NO)	Yishum North N.P.C.
R THIS	O DADTY WELLIGIE		Tishan NOMA N.F.C
the of passanger al	VEHICLE NUMBER	Sma13100	
Inducting driver) b)	DRIVER'S NAME:	Office (3.0)	MODEL: Honda City
/ ) cl	NRIC/FIN/PASSPOR	r.	COUTLOT
9. THIRI	PARTY VEHICLE	Y	_CONTACT:
	VEHICLE NUMBER: _		
1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	DOUTEDIA LILLE		_MODEL:
Induding driver) 11	DRIVER'S NAME:		
( ) 1	VRIC/FIN/PASSPORT		_CONTACT:
1		A STATE OF THE PARTY OF THE PAR	Manager Committee Committe

|mai| = rico60 autosurvices @gmail.com|fax| = 6286 7060





1 of 3

Report No. T/20191129/2045

Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/11/2019 10:33		Vide Report No.:	Station Diary No. 45			
Informa	nt's Partic	ulars				
	f Informant: NEE HOCK		Address: APT BLK 367 YISHUN RING ROAD #02-1536 SIN 760367			
College Colleg	/ ID No.: O / S12515	84G	Contact No.: Home/Office:	Mobile: 91114350		
Nationality: SINGAPORE CITIZEN		Email:				
Sex: Age: Date of Birth: Male 62 28/09/1957			Type of Informant: Driver			
Race: Chinese		Language: Institution / School Na English				
Occupation: GRAB DRIVER		Driving Licence Information: Class: 3 Date of Expiry:				

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/11/2019 20:05	Type of Location: X-Junction	
Location: Along Road 1 JALAN PEMII JALAN BINCI Cross junctio	MPIN HANG	PIN and JALAN BINCH	ANG towards Bishan Ro	pad	
Weather: Road		Road Surface: Dry	F	Road Speed Limit: 40 Km/h	
CIECI		Diy	The state of the s		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Fraffic Volume:	

Details of Vehicle Involved							
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger	
SJT8849S	Car	HONDA	AIRWAVE 1.5M A	Silver	Seriously Damaged	NOW A	
SMA1310P	Car	HONDA	CITY 1.5 SV CVT	Silver	Seriously Damaged		

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			
SJT8849S	TOKIO MARINE INSURANCE SINGAPORE LTD.	MS011938	16/11/2019	15/11/2020			





Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999 2 of 3 Report No. T/20191129/2045

### CONTINUATION OF REPORT

<b>Details of Perso</b>	n Involved		Base III			
Any Pedestrian I	nvolved: No					
No. of Pedestrian	s Injured: NIL		Use of Peo	destriar	Cross	sing: NA
Driver						
Name	ONG KWEE HOCK			ID No		S1251584G
Related Vehicle	SJT8849S (Car)			Conta	ict No.	91114350
Hospital/Clinic	KHOO TECK PUAT HOSPITAL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	28/11/2019 Date Di			narge	28/11	/2019
	ted Medical Leave	03	Degree of		Sligh	

### **Brief Details.**

- 1. On 28 November 2019 at about 20001 hrs, I was driving vehicle registration No: SJT8849S along Jalan Pemimpin, This is a one lane road. Upon reaching the cross junction of Jalan Pemimpin and Jalan Binchang suddenly in a fast manner my vehicle registration No: SJT8849S front side collided onto the right driver side of vehicle registration No: SMA1310P. The impact caused my vehicle to swerve to the opposite lane.
- 2. I believed the driver of vehicle registration No: SMA1310P had driven fromJalan Binchang and did not check for oncoming vehicle and did not stop at the stop line at Jalan Binchang. I had the right of way at the point of accident. The accident had resulted in me sustaining pain at my chest area and also stiff neck. The driver of vehicle registration No: SMA1310P was not injured and his female (Indian) passenger was not injured. Ambulance and Police was not called in. No government property was damage.
- 3. I had consulted a doctor of the same day at Khoo Teck Puat Hospital and received 3 days medical leave period (28 November 2019 to 30 November 2019) MC No: KHANE191718118 and X-ray reveled no fracture except for my lung not functioning normally due to trauma. I have a follow up appointment which will be scheduled a week from now.
- Damage assessment as follow:
- (a) SJT8849S (my vehicle)
- Front side seriously damage and cannot be driven forward and only can reverse.

(b) SMA1310P (other party) Name: Mr Liau Yee Xiang NRIC No: S9144068G Contact: 96457350

- Right side seriously damage





Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

3 of 3 Report No. T/20191129/2045

CONTINUATION OF REPORT

# Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: L / SSI ANDY LUCAS	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/11/2019 10:33
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
Authentication Stamp NP168	

# Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T. (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



### Certificate of Insurance

FORM MX1 H

Account No: 2538DDA

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)

Policy No.: MS011938 (Private Car)

 Index Mark and Registration Number of Vehicle

SJT8849S

Chassis No.: GJ11306348

2. Name of Policyholder

ONG KWEE HOCK

Effective date of the Commencement of Insurance for the purposes of the Act

16/11/2019 (00:00:00)

4. Date of Expiry of Insurance

15/11/2020

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

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.

Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired. The Policy does not cover:-

1) Use for racing, pace-making, reliability trial or speed-testing.

2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

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

ADDITIONAL INFORMATION

\* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles. (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance

#### IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio. Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that leffect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation).

insurance Plan:	Comprehensive		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims Additional Excess for Unnamed Driver(s)	SGD 2,000.00 SGD 500.00	(Original Excess : SGD 2,000.00)
	Additional Excess for Young or Inexperience Driver(s)	SGD 1,500.00	
	WindScreen Excess Excess-Third Party (Sect II)	SGD 100.00 SGD 2,000.00	
Financial Interest:	SGCARMART FINANCIAL SERVICE	CES PTE. LTD	
Additional Terms:	Unnamed Driver Excess is not a     Vehicle is licensed for private hir     Only named drivers with private     YID excess applied on Section 1	pplicable e by LTA and can be hire licences can use & Section 2 separate contrary in the policy	lly. MC19 Waiver of Excess is NOT applicable

Approved workshop plan only

TOKIO MARINE INSURANCE SINGAPORE LTD.

**Authorised Signature** 

User ID: 2538DDA

Page 1

Printed: 14-11-2019 17:33:56

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, 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.