

MCGM19159647 / Chew Goon Motor - AMK ENTRY DATE & TIME: 03/12/2019 16:47 SUBMITTED BY: Liu Yan Jing

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 comparies 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 evailable 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.	
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Date Of Report	03/12/2019 16:47
Date Of Accident	03/12/2019 14:10
Exact Location Of Accident	JUNCTION OF RAFFLES LINK & RAFFLES BLVD
Country/State of Loss	SINGAPORE
STATE OF THE STATE OF THE	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKQ772K
Insured/Policyholder	
Name Of Registered Owner	LAU CHEE CHEW
NRIC No	S0108914E
Email Address	LAUCHEECHEW@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90121088
Alternative Phone No	OTHERS-90121088
Vehicle Particulars	
Manufacturer	NISSAN
Model	SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5114324118
Cover Note Number	

Driver

 Name of Driver
 LAU CHEE CHEW

 NRIC No
 \$0108914E

 Date Of Birth
 23/08/1954

 Occupation
 OUTDOOR

 Date Of Driving Pass
 19/04/1974

Driving Experience 45 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90121088

Fax Number

Contact Number OTHERS-90121088

EMail Address LAUCHEECHEW@GMAIL.COM

BLK 88 HILLVIEW AVEUNE #09-09 Address

669590 Postcode

Was driver an employee of the Insured's Company NO

OWNER If No, Relationship of the Driver with the Insured

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

2

NO

NO

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 NO 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) 1

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

I WAS TURNING RIGHT FROM RAFFLES LINK TO RAFFLES BLVD. I STOPPED TO WAIT FOR CLEARANCE ON RAFFLES BLVD BEFORE PROCEEDING TO MAKE THE TURN. AT THIS MOMENT MY VEHICLE WAS HIT AT THE REAR BY THE VEHICLE BEHIND.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC2644T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver MOHD SINARI BIN ABDUL RAHMAN

NRIC/Passport Number S1722419J Contact Number 90619593

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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 aforesald.
- 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)
 - 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 me 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 cortain 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 wehicle(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.

Palicyhalder's Signature

Date & Time: 3 Dec 19

Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

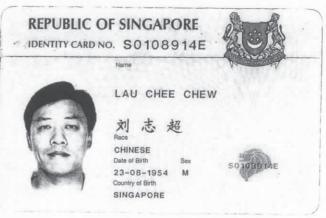
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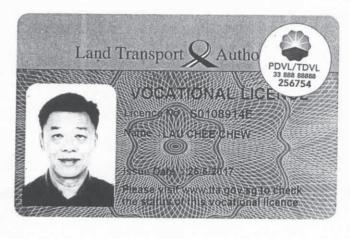
NRIC/FIN No.:

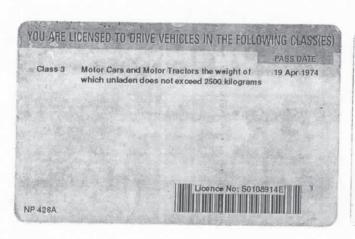
Sketch Plan #2

SKETCH PLAN		
	Call les & B	A: Skon12
	Call Call	A: SC0772 B: SHC2644 7
	Kalfles Blv	d
DESCRIBE CIRCUMSTANCE		
Was turn	ing right from Ratelles !	ink to Raffles Blvd. I stoppe
to wait for cl	earrance in kouster Rland	Lettre mucochin to asil
THE TOTAL FITT THE	s moment my vehicle was	s hit at the read by the
vehide behind.		
CLARATION		
CLARATION Te declare the foregoing particle	ulars are true in every respect	Ω
Mar	and the second s	LATE.
icyholder's Signature to & Time: 3DEC 19	Oriver's Signature (If driver's not the policyholder) Date & Tane:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:











This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type Description Issue Date

102 TAXI VL 25/05/2017

103 BUS VL 13/08/2014

104 BUS ATTENDANT 13/08/2014





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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA) MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5114324118 Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder

Effective Date of Insurance

4. Expiry Date of Insurance

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her 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.

: SKO772K

: MNTBBAB17Z0020865

: LAU CHEE CHEW

: 29 Nov 2019

: 28 Nov 2020

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliabil ty trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

 EXCESS (SECTION 1)
 : \$\$2,000

 EXCESS (SECTION 2)
 : \$\$1,500

 WINDSCREEN EXCESS
 : \$\$100

 ADDITIONAL EXCESS
 : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO
INSURE WITH COE : YES
NCD PROTECTION : NO
TRANSPORT ALLOWANCE : NO
EXCESS WAIVER : NO

PRIMARY DRIVER : LAU CHEE CHEW

NAMED DRIVER (1) : N/A
NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : SING INVESTMENTS & FINANCE LTD
SUM INSURED : MARKET VALUE OF INSURED VEHICLE.

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: B.A.S. INSURANCE AGENCY (00000573236)

Date of Issue

: 28 Nov 2019 14:24 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	914E
Vehicle Details	
Vehicle No.:	SKQ772K
Vehicle to be Exported:	Yes
Intended Deregistration Date:	03 Dec 2019
Vehicle Make:	NISSAN
Vehicle Model:	SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	HR16950729B
Chassis No.:	MNTBBAB17Z0020865
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$15,603.00
Original Registration Date:	31 Oct 2014
First Registration Date:	31 Oct 2014
Transfer Count:	2
Actual ARF Paid: Intended PARF Rebate Details	\$10,603.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 Oct 2024
PARF Rebate Amount: Intended COE Rebate Details	\$7,422.00
COE Expiry Date:	30 Oct 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$63,990.00
COE Rebate Amount:	\$31,392.00
Total Rebate Amount:	\$38,814.00
ne information contained berein is correct as at 02 D - 2042	

The information contained herein is correct as at 03 Dec 2019