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	Assessment/Surv	rey Report			** ****
TP Insurer:	Ass't Report by	Fax/Handle C	Ovner/Wksp		- margani
Professed Wkep / INC Assign Wksp / Q	W: (1011	Fax:)
TP Particulars: Veh No	GBF 1877A	, INC(,)/Non-INC().		
Owner / Driver: (·			Tel:	',	
Policy No: () Period: (Cover Type: (
Confirmed by : (·	Dates,	Times	100%]	
Insured/Driver Liability: (%) [Note-Est. Status (W		6; P: 21-79%. P: 80	-10074	
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 companies is not an admission of policy liability on the part of the insurance companies.

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.

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30/12/2019 18:23 Date Of Report 29/12/2019 20:55 Date Of Accident

BLK 288B BUKIT BATOK ST 25 MSCP DECK 1 LOT 3 Exact Location Of Accident

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

SLJ6315H Vehicle Registration Number

Insured/Policyholder

FONG WENG WOH Name Of Registered Owner

SXXXX549B NRIC No

MICHAELFONG788@GMAIL.COM Email Address

(LOCAL) +65-90273450 Mobile Phone No. OTHERS-90273450 Alternative Phone No

Vehicle Particulars

MAZDA Manufacturer

Model

Exact Purpose for which vehicle was being used at CAR WAS PARKED

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

THIRD PARTY

If No, Please state action to be taken

PRIVATE CAR

Insurance Company

Vehicle Category

UNITED OVERSEAS INSURANCE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

DHOM120038311800 Policy Number

Cover Note Number

Driver

FONG WENG WOH Name of Driver

SXXXX549B NRIC No 30/08/1955 Date Of Birth INDOOR Occupation 19/08/1977 Date Of Driving Pass

42 YEARS AND 4 MONTHS **Driving Experience**

MALE Gender

(LOCAL) +65-90273450 Mobile Number

Fax Number

OTHERS-90273450 Contact Number

MICHAELFONG788@GMAIL.COM FMail Address

Address

BLK 289G BUKIT BATOK STREET 25

#03-108

Postcode

656289

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

NO

involved in the accident

Was any body injured in the Accident? Was any injured conveyed to hospital by NO

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)

0

Details of Police Action

Was the accident reported to the police?

YES

NO

If Yes, Please state which Police Station

Police Station Name

BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-6659999 - FAX NO: 66655793

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20191229/2085

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 Vehicle Make/Model/Colour

GBF1877A

Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category

MR. WONG

Name of Driver

NRIC/Passport Number Contact Number

82801177

Address

Postcode

Insurance Company Name

Page 2 of 17

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.
- 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:
 - (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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No

Policyholder's Signature Date & Time:

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

Reporting Centre

Name:

NRIC/FIN No.:





1 of 4

Report No. T/20191229/2085

Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE

659840

Tel No: 1800-6659999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Vide Report No.: Station Diary No.: 29/12/2019 20:54

Informant's Particulars Address: Name of Informant: APT BLK 289G BUKIT BATOK STREET 25 #03-108 FONG WENG WOH SINGAPORE 656289 Contact No.: ID Type / ID No.: Mobile: 90273450 Home/Office: NRIC NO / S1178549B Email: Nationality: SINGAPORE CITIZEN Type of Informant: Date of Birth: Sex: Age: Driver 30/08/1955 64 Male Institution / School Name: Language: Race: Chinese Driving Licence Information: Occupation: Date of Expiry: Class: 2B,2A,2,3 SOLE PROPRIETOR

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/12/2019 19:00	Type of Location: Car Park
	I OK STREET 25 Batok St 25 MSCP Dec	Road Surface:	F	Road Speed Limit:
Clear Traffic Flow: Two Way		Traffic Control: Not Controlled	111111	raffic Volume:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBF1877A	Van			Silver		0
SLJ6315H	Car	MAZDA	MAZDA2 5- DOOR HATCHBAC K 1.5L SP.6EAT	Grey	Slightly Damaged	0





Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE 659840

Report No. T/20191229/2085

2 of 4

Tel No: 1800-6659999

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SLJ6315H	UNITED OVERSEAS INSURANCE LIMITED	DHOM1200383118 00	19/12/2018	18/12/2020	

Any Pedestrian Ir	nvolved: No					
No. of Pedestrian	Use of Pedestrian Crossing: NA					
Driver						
Name	MR WONG			ID No.		NIL
Related Vehicle	GBF1877A (Van)			Contact No.		82801177
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	
Driver						
Name	FONG WENG WOH			ID No.		S1178549B
Related Vehicle	SLJ6315H (Car)			Conta	ct No.	90273450
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days granted Medical Leave NIL			Degree of Injury NIL			

Brief Details.

On 28/12/2019 at about 1830hrs, I parked my vehicle bearing the registration plate SLJ6315H at B/288 Bukit Batok ST 25 MSCP Deck 1 Lot 3. Everything was intact. At that point of time, I notice a silver van bearing the registration plate GBF1877A parked beside my car at Lot 4 and the head of the van was inside the parking lot. I took a photo of the van as I estimated that the van might hit onto my car while reversing out given that it is a long vehicle.

On 29/12/2019 at about 0800hrs, I went down to the MSCP to collect my car and realized that there was some scratches and dents at the bumper above the left front wheel. However the silver van was no longer parked beside; a white car bearing the registration plate SJL3231Z was parked beside instead. I went to inspect the white car however there was no damages or scratches seen on the car. I then decided to contact a number on the silver van (65650002) and spoke to the person over the phone who informed that the driver of the van is her boss namely Mr Wong, HP: 82801177. I called Mr Wong and he informed that he shifted his car in the morning about 5 plus and he mentioned that he might have accidentally knocked onto my car while reversing out as he was in a rush. As I will be at work today, therefore I liaised a timing with him to meet him.





3 of 4

Report No. T/20191229/2085

Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE 659840

Tel No: 1800-6659999

CONTINUATION OF REPORT

At about 1900hrs, I met Mr Wong at the carpark. He denied to be the one who accidentally grazed onto my car. When I inspect the van, I observed that there was some scratches on the left frontal side of the van which was at the same height to the scratches seen on my car. However Mr Wong informed that the scratches was an incident last year. I also asked if he remember how he reversed out however he do not remember. We did not reached to a personal settlement therefore I decided to make a Police report. My in camera was switched off when my engine is off.





4 of 4

Report No. T/20191229/2085 ~

Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE 659840

Tel No: 1800-6659999

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 J / Sgt 2 YEO YULIN	The Report:	Signature Of Informant:		
Signature Of Interpreter: Not applicable		Date/Time: 29/12/2019 20:54		
Officer In Charge Of Case:		Classification Of Case:		
SI KALESWARI PALANI / Contact No.: 65476902 /	SINGAPORE POLICE FORLE			
Authentication Stamp NP168	Sic	inature .		

. AGCIDENT'STATEMENT

LOCATION: BLK B 288 BUKIT BATOK 'ST 25 MSCP Deck 1 LOT3

	1.	DETAILS OF VEHICLE	A
		a) VEHICLE NUMBER: SLJ	6315 H.
		DINSURANCE COMPANY:	
		CIPOLICY NUMBER: DHOM 12	0038311800
		d) POLICY TYPE: (COMPREHENSIVE / TH	HIRD PARTY / THIRD PARTY FIRE &THEFT)
		OMAKE & MODELL MAZDA	2
		I)TYPE: (SALOON / COUPE / MPV /VAN	I / LORRY / MOTORCYCLE. / OTHERS)
e e		9 VEHICLE CATEGORY (PRIVATE / CO	MMERCIAL / MOTORCYCLE)
		h) PURPOSE OF USING AT ACCIDENT TH	ME: CAR WAS PARKED
		I) ARE YOU CLAIMING UNDER YOUR OF	WN INSURANCE (YES/NO)
87		IP NO, PLEASE STATE (THIRD BARTY OL	AIM / REPORTING ONLY)
	2.,	INSURED / POLICY HOLDER	E-11
		ANAME FONG WENG W	MALE / FEMALE)
		DINRIC/FIN/PASSPORT: 11 185491	BCONTACT: 90273450
		CIADDRESS: BLK 289G BATOK	801-50 # - 25 TS XOT-108
1.0			
Man A		ONTINUE TO 3,d IF DRIVER ALSO PO	DUCY HOLDER
4 No of poisson	1900	DRIVER AN AC ABO	14
Concluding del	ver)		(MALE / FEMALE)
(Q)	500	c) ADDRESS!	CONIACII
. &		0/100/1140	
		'd) DATE OF BIRTH: (30) 8 / 193	JIDD/MM/YYYY)
		BOCCUPATION: (INDOOR / OUIDOC	
		FIDATE OF DRIVING PASC I	9/08/1977
	4.	WAS DRIVER AN EMPLOYEE OF THE	INSURED'S COMPANY? (YESYNO)
	25.85	IF NO, RELATIONSHIP OF THE DRIV	
.*	5.	a) WEATHER CONDITION! (QUEAR / RA	INING / OTHERS
		b) ROAD SURFACE! (DRY / WET / OTHE	RS
9	6,	WAS ANYBODY INJURED (XES/ (10)	
*	7.	a) REPORTED TO POUCE (VE) / HO)	STATION BUKI BEFOR LIPE
		IF YES, PLEASE STATE WHICH POLICE	STATION TOWN TOWN AUTC
A He of passang	8,	THIRD PARTY VEHICLE	14 MODEL XA TOYOTA HOCK
		DI VEHICLE NUMBER: 18 WOW	The state of the s
(Including dri	(A.M.")	c) NRIC/FIN/PASSPORT!	CONTACT: \$201177
()	0	THIRÖ PARTY VEHICLE	OOMACI
	656	d) VEHICLE NUMBER:	MODEL! "
* No of passa		AL DRIVER'S NAME	
(Industing d	three"	1) NRICYFIN/PASSPORTI	CONTACTU
r 3		The state of the s	VVIII IVII
		±1 0F	

email: michaelfong 788@gmail.com



United Overseas Insurance Limited

Call 1955 of 6954 Call 1955 of 6954 C. Don (61,7 mg)** Co Region (Service)

62227733

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)

ORIGINAL

CERTIFICATE NO.

DH0M120038311800

Excess:

\$750/-NAMED DRIVERS - OPTION 2 \$1500/-OTHERS

COMPREHENSIVE

\$3000/-APPL TO <25 YRS & OR <3YRS EXP

Vehicle Number

\$100/-WINDSCREEN DAMAGE CLAIM

Type of Cover

SLJ6315H

Name of Insured

FONG WENG WOH

Restricted Driver(s)

NOT APPLICABLE

Period of Insurance 19 December 2018 to 18 December 2020

Engine# P520347411

Chassis# JM6DJ2HAA01100788

Hire Purchase

HONG LEONG FINANCE LIMITED

PRIVATE CAR - INDIVIDUAL OWNERSHIP [MX 1]

AUTHORISED DRIVER

(1) The Insured

(3)

- Any other person who is driving on the Insured's order or with his permission
 In the event of the death of the Insured
 (a) any member of the Insured's family or a paid driver who has been driving the car during the lifetime of the Insured and permission to drive had not been withdrawn prior to the death of Insured and
 (b) any other person who has been given permission to drive the vehicle prior to the death and such
- permission had not been withdrawn by the Insured

LIMITATIONS AS TO USE

Use only for social domestic and pleasure purposes and for the Insured's business
THE POLICY DOES NOT COVER
Use for hire or reward or racing pace-making reliability trial or speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purposes in connection with the Motor Trade

The carriage of passengers pursuant to car pooling arrangements and payments or any of them made by the passengers thereunder towards the running expenses of any vehicle described in the Schedule shall not be deemed to constitute use for hire or reward

Provided that the person 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

*Limitation 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).

UNITED OVERSEAS INSURANCE LTD

For the Company

FCLAS

11

Date: 07/12/2018