



1, Kaki Bukit Avenue 6 Blk C #01-34/#01-61, Singapore 417883 Tel: 6747 8064, 6746 5519 Fax: 6743 4896 H/P: 9666 9680

Reg. No.: 254678/00M



Your Ref : SLR 76245

Our Ref : 5MQ3193M

23.04.2020 Date:....

Alt Asia Pacific Insurance Pte Ltd.

Attn: Motor Claims Dept

ACCIDENT ON 27.12.2019 INVOLVING VEHICLE SMQ 3193 M & SLR 7624 S ALONG JUNCTION OF PASIR RIS DR 4 TWDS PASIR RIS DR 3

With regards to the above, we are writing on behalf of the registered owner of vehicle SMQ 3193 M which was involved in the above mentioned accident.

We are informed that the above accident was caused solely by the negligence of your insured vehicle SLR 7624 S.As a result of the accident, our client's vehicle was damaged and our client had instructed us to submit his claims for loss and expenses, particulars of which are follows:

1) Repair cost

2) Loss of use-\$120 X 05 days

3) LTA search

\$	3,907.49
\$	7.49
\$	600.00
\$	3,300.00

d) Owner / Driver NRIC & Driving License

We hereby enclosed herewith the following documents for your consideration of the above claim.

a) Final Repair Bill Of SMQ 3193 M

c) LTA SEARCH

Total

b) GIA report 並

明 喧 HUA MENG SPRAY PAINTING WORKSHOP AUTOBAY@KAKI BUKIT 1 KAKI BUKIT AVE 6 #01-34 SINGAPORE 417883

TEL: 6747 8064, 6746 5519 FAX: 6743 4896

Yours faithfully,

HUA MENG SPRAY PAINTING WORKSHOP





1, Kaki Bukit Avenue 6 Blk C #01-34/#01-61, Singapore 417883
Tel: 6747 8064, 6746 5519 Fax: 6743 4896 H/P: 9666 9680

Reg: No.: 254678/00M



Your Ref:

Our Ref :

22/4/2020

Date:

VEHICLE NO

MAKE / MODEL

:SMQ 3193 M :TOYOTA NOAH

NAME ADDRESS :SOH ZHI HUI

:77 JALAN SONGKET

S 537448

FINAL REPAIR BILL FOR VEHICLE NO:SMQ 3193 M

TO SUPPLY AND REPLACE PARTS, LABOUR CHARGES FOR REPAIRING, KNOCKING, WELDING AND TO RESPRAY PAINTING (LUMPSUM REPAIR)

\$ 3,300.00

SINGAPORE DOLLARS: THREE THOUSAND THREE HUNDRED ONLY

MSME19170695 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 28/12/2019 13:32 SUBMITTED BY: Wen Ying

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 <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	28/12/2019 13:32
Date Of Accident	27/12/2019 10:55
Exact Location Of Accident	JUNCTION OF PASIR RIS DR 4 TWDS PASIR RIS DR 3.
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMQ3193M
Insured/Policyholder	
Name Of Registered Owner	SOH ZHI HUI
NRIC No	SXXXX013A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91820282
Alternative Phone No	OFFICE-91820282
Vehicle Particulars	
Manufacturer	TOYOTA
Model	NOAH
Exact Purpose for which vehicle was being used a ime of accident	ıt
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f 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
Гуре Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5113968938
Cover Note Number	
Driver	
Name of Driver	TAN LONG JIE

Name of Driver TAN LONG JIE

NRIC No SXXXX564D

Date Of Birth 31/10/1991

Occupation INDOOR

Date Of Driving Pass 21/02/2013

Driving Experience 6 YEARS AND 10 MONTHS

Gender MALE

Mabile Number (LOCAL) +65-91763306

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 246 SERANGOON AVE 3 #05-204

Postcode 550246

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured OT

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - FIANCE

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

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? YES

Was any injured conveyed to hospital by

ambulance?

YES

YES

Was any other material or property damaged?

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

SERANGOON NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 50 SERANGOON AVE 2 #01-02, POSTCODE: 556129, COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 1800-4880999 - FAX NO: 64883561

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO POLICE REPORT NO.T/20191228/2003.

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 SLR7624S

Vehicle Make/Model/Colour

Details Of Properties

VEH B

Vehicle Category Name of Driver PRIVATE CAR

NRIC/Passport Number

CHEW CHEE KHUAN

MINION assportivum

SXXXX985J

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (including Driver)

DETAILS OF INJURED PERSON 1

Name

TAN LONG JIE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SMQ3193M

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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. 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
- 7. 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)

Lunderstand, acknowledge, agree and consent that:

- 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)
 - (i) 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
- 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.
- 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.
- 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.:

Accident Sketch Plan Pg. 1

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Police Station Of Origin: Serangoon N.P.C

59 Serangoon Avenue 2 #01-02 SINGAPORE

556129

Tel No: 1800-4880999

REPORT OF A TRAFFIC ACCIDENT

1 of 3 Report No. T/20191228/2003

Vide Report No.: Station Diary No.: Date/Time Report Made: G/20191227/0202 8 28/12/2019 02:45 Informant's Particulars Address: Name of Informant: TAN LONG JIE APT BLK 246 SERANGOON AVENUE 3 #05-204 SINGAPORE 550246 Contact No.: ID Type / ID No.: Mobile: 91763306. NRIC NO / S9140564D Home/Office: : Email: Nationality: SINGAPORE CITIZEN Date of Birth: Type of Informant: Sex: Age: Driver 28 31/10/1991 Male Institution / School Name: Race: Language: English Chinese Occupation: Driving Licence Information: Date of Expiry: DRIVER Class: 3,4

Type of Accident:	Injury Conveyed By Ambula	Drink nce Drive: No	Date/Time of Accident: 27/12/2019 22:55	Type of Location: T-Junction
Location: Along Road 1 PASIR RIS D				
Weather:		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way	i i	Traffic Control: Policeman Contro	lled	Traffic Volume:
	Anyone conveyed by			

Details of Ve	ahicle involved					200
Vehicle Nos	Type	Wales in	Matter	Colors	Condition	No of Passenger
SLR7624S	Car	TOYOTA	VIOS 1.5E CVT			0 -
SMQ3193M	Car	TOYOTA	NOAH HYBRID 7- SEATER 1.8X CVT		Seriously Damaged	0





2 of 3

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE

Report No. T/20191228/2003

556129

Tel No: 1800-4880999

Details of Perso	n Involved			en de	数表表						
Any Pedestrian II	nvolved: No		=								
No. of Pedestriar	s Injured: NIL		Use of Pedestrian Crossing: NA								
Driver ***	A Comment	7 - 70			grave.	P OSTED PERSONS SAND					
Name	TAN LONG JIE			ID No		S9140564D					
Related Vehicle	SMQ3193M (Car)			Conta	ct No.	91763306					
Hospital/Clinic	CHANGI GENERAL	HOSPITAL		Class Drivin Liceni	g ce &	Class: 3,4 Date of Expiry: NIL					
Date Treatment	NIL		Expiry Date Date Discharge NiL								
	ted Medical Leave	03	Degree of								

CONTINUATION OF REPORT

Brief Details.

On 27.12.2019 at about 2258hrs, I stop my vehicle (SMQ3193M) at the middle lane of Pasir Ris Dr 4 when the traffic light still red. The middle lane shows I can go straight and turn left. There was a vehicle (SLR7624S) on the left lane. That lane shows it can only turn left. As the traffic light turns green, I proceed and making left turn to Pasir Ris Dr 3. Out of sudden the vehicle (SLR7624S) on the left lane went straight and hit onto my vehicle. I alighted from my vehicle to check on the driver who hit onto my vehicle. The driver argue and saying that he was on the middle lane and denied that his on the left lane. There was scratches and dent on the left passenger door due to the impact.

Ambulance and Traffic Police were at scene. I was then conveyed to Changi General Hospital as my back pain and my leg felt numbress. I was given 3 days of MC. I was told to lodge a Traffic Accident Report by 10 Bei Feng, In-Card Memory was seized by Traffic IO when I was in hospital,

CONTINUATION OF REPORT





Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 3 of 3 Report No. T/20191228/2003

Tel No: 1800-4880999

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 <u>report number</u> as reference.

- M.
Date/Time: 28/12/2019 02:45
Classification Of Case:
-

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$9413013A





Name

SOH ZHI HUI

苏 芝 慧 Race CHINESE



CHINESE Date of birth 12-04-1994

olrth -1994

Country/Place of birth SINGAPORE 59413013A

6091687



NRIC No. S9413013A



Date of Issue 13-12-2018

Address 77 JALAN SONGKET SINGAPORE 537448

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$9140564D



Name __

TAN LONG JIE

杰

陳

CHINESE Date of birth 31-10-1991

⊕ __ ≅9140664⊓

Country of birth SINGAPORE



Date of issue 22-11-2006

APT BLK 246 SERANGOON AVENUE 3 #05-204 SINGAPORE 550246

NEVALORE DRIVING LICENCE ucence Number: \$ 94 4 0 5 6 4 D TAN LONG JIE Birth Date: 31 Oct 1991 Issue Date 21 Feb 2013

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES &

EFFECTIVE DATE

Class 3

Class 4

Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg

Licence No: S9140564D

NP 428A



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

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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)

Certificate Number: 5113968938 Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : SMQ3193M

Chassis Number : ZWR800395497

Name of Policyholder : SOH ZHI HÜI
 Effective Date of Insurance : 08 Nov 2019

4. Expiry Date of Insurance : 07 Nov 2020

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.

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, reliability 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 : SOH ZHI HUI
NAMED DRIVER (1) : TAN LONG JIE

NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : GUAN MOTOR LEASING PTE, LTD.

SUM INSURED : 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 : GOSHEN FINANCIAL PTE. LTD. (00000573171)

Date of Issue : 08 Nov 2019 14:29 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer
Chief Executive

Enquire Vehicle & Owner Information (Vehicle No. SLR7624S As At 27 Dec 2019 / 10:55:00)

Law Firm Search Details

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

H47 (SMQ3193M)

Current Owner Details

Owner ID Type:

Company

Owner ID:

199608195Z

Owner Name:

POPULAR RENT A CAR PTE LTD

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 501

Registered Street Name:

GUILLEMARD ROAD

Registered Unit No.:

Registered Building Name: -

Registered Postal Code:

399840

Current Vehicle Details

Vehicle No.:

SLR7624S

Make Description/Model: TOYOTA / VIOS 1.5E CVT

Insurance Company Name: AIG ASIA PACIFIC INSURANCE PTE, LTD.