NATIONAL Assessment Centre	Services purt samos.	MWA 120027791	
Date In 3/3/20 14:06	Jeb description	Date &Time Completed	Done by
Kerilli MAI CTI 2000 3482/44	SAS c-filing		
Veh No SLP 6598 B	E-mail (sepida anas, AtC abrs)		
2/3/20 21:30.	I-Motor Cinim Form		
	I-Motor W/O (Within: OD 2)	ors, TP (hrs)	
(11) - (P) Reporting Only	I-Photo Uplonded		
	Assessment/Survey Report		
"If hisurer!	Ass't Report by Fax / Hand	to Owner/Wksp	
Proformal Wksp / INC Assign Wksp / QW: (House make a strain and a strai	Tol: Fa	x:)
	36 185 P. INC	.)/Non-INC()	
Owner/Driver: (77 1037	Tcl:)
Policy No: () Perio	od: ()	Cover Type: ()
Confirmed by : (Date:	Time:)
Insured/Driver Liability: (%) [No	te-Est. Status (WO): N: 0-2	20%; P: 21-79%. P: 80-10	00%]
Year of Registration: (') W	arranty: YES ()/NO ()	
Excess: (\$) Loading: \$1,000	()/\$2,000()		• •
General Kenny Karles Santa Control		是是深层的心态。	30% P. 1. 3
() Walk-In Customer: Customer's Inform	ation strictly Confidential & S	trictly NO refer of repairer.	
() Total Loss Case : to e-mail Insurer	URGENTLY.	,	
Drive-In ()/ Towad-In (); Invoice:	YES() / NO();	rowing Co: (
Translate Francisco Commission State Commission Commiss		The stants of the San S	Aste Thone by
A STATE OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PARTY O	ntesy Car ()		
2) QC Check / Post Repair Inspection	.(·)		31 Ali
3) Upload Resurvey Photo [Repair Cost > \$300	10] ()		
Injurý:			
	Hazara (D. Calinamia NON), proper Joseph Astronov.	Maidansarsarsarsarsarsars	Page - Transcal and
Datorrang crycholists, States and States			BORDAN IF

	.1		
TO STOLEN OF THE SECOND	Section of the sectio		(* Zna (s)) (* And Dill
	o 1767	AND LINE AND DESCRIPTION OF THE PROPERTY OF THE PERSON OF	30.00
Channells Particulars of the agent of the confer	2) DA : Damego	Assessment (\$100); INC (\$30)	
Driver/Owser:	3) TF : Towing 1 4) FT : Follow-T	brough Survey \$1	20
Contact No:	5) PT : Pollow-1	hrough Survey (Resurvey) 5 gainst INC Only (waf 10 Jan 2005)	30
	6) TR: Re-Inspe	ution 3	75
Damaged Portion:	7) NI : Idao DA 8) NTUC Additi	+ Olvini out +uj	
(10° Charlest by Course In Charge)	OD.		53
QC Checked by (Engr-In-Charge):	• NG: Repair C	Su-ordination 5	25
Auditors Communiss	*N7; Post Rej	Ment Expection	33
Cal. Li	TP (NII) : TI	(Non INC) against INC 5	30
	9) N12: Ideo Mo Involve dated	Fae Charged	MARY AND
1.1.1.1.35	Involce dated	Fee Charged	PARTITION

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.
- 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.

aioresaid.	
A Marie Service Service Service (Const.)	ACCIDENT STATEMENT
Date Of Report	03/03/2020 14:06
Date Of Accident	02/03/2020 21:30
Exact Location Of Accident	TPE EXIT LOYANG AVE
Country/State of Loss	SINGAPORE
Company of the Compan	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLP6598B
Insured/Policyholder	
Name Of Registered Owner	KWEK SIAM NGUAN
NRIC No	SXXXX090J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97513648
Alternative Phone No	OFFICE-97513648
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER EX
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 CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1922911900
Cover Note Number	
Driver	
TO ALL COLOR TO AN AND AND AND AND AND AND AND AND AND	

Name of Driver RONNY WIJAYA ALAMSYAH

 NRIC No
 SXXXX137A

 Date Of Birth
 06/07/1993

 Occupation
 INDOOR

 Date Of Driving Pass
 24/11/2011

Driving Experience 8 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-82980073

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 663C JURONG WEST ST 65 #04-247

Postcode 643663

Was driver an employee of the Insured's Company NC

If No, Relationship of the Driver with the Insured OTHER - SON IN LAW

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

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

NO

2

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES
I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : UNKNOWN

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

Circumstances of Accident

I STOP AT THE SLIP RD FROM TPE EXIT TO LOYANG AVE, AFTER THE TRAFFIC WAS CLEAR, I JUST STARTED TO MOVE, SUDDENLY I FELT AN IMPACT FROM BEHIND, AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED A BIKE HIT ONTO MY VEH REAR PORTION.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH DRIVER

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBG185P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name 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.
- 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 Date & Time: Oriver's Signature

(If driver is not the policyholder)

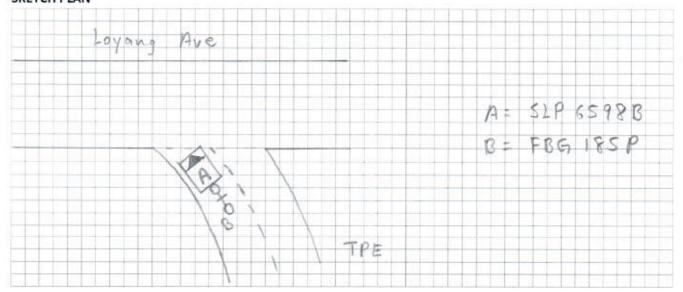
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

	3 OF THE ACCIDEN		
Refer	+3	Statement	
100 100	1		
		1	
		<i>T</i>	

DECLARATION

I/We declare the foregoing particulars are true in every respect.

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.:



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Cal Ham by Commonwhate

MXIF N 5N ANDS864 Cov.Type: C

MOTOR PRIVATE LAR

CERTIFICATE OF INSURANCE

Motor Venores (Thru-Perty Roses and Compensation) Act (Chapter 189)
Mulor Venores (Thro-Party Rose and Compensation) Rules, 1960
Rose Transport Act, 1967 (Malaysia)
Motor Venores (Trins-Porty Rose) Rules, 1959 (Malaysia)

ORIGINAL

Engine No :4A92CN1025

	RTIFICATE No.	DMPCSN1922911900	Chano: 3MYSRCY1AGU006369
	ntiles Mark and Registration Number of Venice	SLP6598B	AUTOSAFE
	Name of Policy Holder	KWEK SIAM NGUAN	
	Effective cone of the Communications of Department of the plottopers of the Pletto Octobroice or Executive of	14 June 2019	Named Drivers Ex Sect. 1
10. 1	Date of Expiry of Instinance	13 June 2020	EX Sect. I - Age >= 26
	Pietona or Casses of Pistonia entitled		
	(a) The Policybolder.		
	(b) Any other person who I	s driving on the Policyho	der's order or with his permission.
	regulations to drive the M	otor Vehicle or has been :	cordance with the licensing or other laws or so permitted and is not disqualified by order of a stion in that behalf from driving the Motor Vehicle.
	regulations to drive the M	otor Vehicle or has been :	so permitted and is not disqualified by order of a
	regulations to drive the M	otor Vehicle or has been :	so permitted and is not disqualified by order of a
5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	regulations to drive the M court of Law or by reason of mitators entouse." Use for social, domestic as the policy does not cover a	otor vehicle or has been a of any enactment or regula and pleasure purposes and to use for hire or reward to carriage of goods other ti	or the Policyholder's business. Tion driving test racing pace-making, reliability can samples in connection with any trade or business.
5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	regulations to drive the M court of Law or by reason of mitators en to use." Use for social, domestic as the policy does not cover of trial, speed-testing, the or use for any purpose in	otor vehicle or has been of any enactment or regula and pleasure purposes and fuse for hire or reward to carriage of goods other to connection with the Motor	or the Policyholder's business. Tion driving test racing pace-making, reliability can samples in connection with any trade or business.
6 3m	regulations to drive the Micourt of Law or by reason of Law or by reason of the formulations and the policy does not cover or inal, speed-testing, the portuge for any purpose in excess whichever is applicable to doubled.	otor vehicle or has been a of any enactment or regula and pleasure purposes and fouse for hire or reward tur- carriage of goods other the connection with the Motor able for losses occurring for the first \$\$500 will a	Trade. outside Singapore (Constructive Total Loss/Theft) upply to the Insured and Named Drivers in the event

provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

HO LI HWA IRENE
Hauthonsed Officer

Authorised Signalory