

NATIONAL Assessment Centre Services

(wef 1 Jan 05)

NA 20035488

Date In: 23/3/10 - 11:16	Job description	Date & Time Completed	Done by
Ref No: NA 20035488	SAS e-filing		
Veh No: 12634336	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 21/3/10 - 11:30	i-Motor Claim Form		
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: JFE 360M

INC () / Non-INC ()

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured/Driver Liability: () % [Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:

(INC hotline: 6788 6616)

Date & Time Completed

Done by

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time

Actions

NA 20035488

Invoice Preparation Checklist

Ant (\$)
In Bill

Ant (\$)
Add Bill

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Ref 1:

Ref 2/3:

- 1) AR: Accident Reporting (\$30);
- 2) DA: Damage Assessment (\$100); INC (\$80)
- 3) TF: Towing Fee \$40/\$45
- 4) FT: Follow-Through Survey \$120
- 5) FT: Follow-Through Survey (Resurvey) \$30
- For claiming against INC Only (wef 10 Jan 2005)
- 6) TR: Re-inspection \$75
- 7) N1: Idac DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- QD*
- *N5: Courtesy Car / Tpt Allowance \$5
- *N6: Repair Co-ordination \$10
- *N7: Post Repair Inspection \$25
- *N8: DV / Collect Excess Coordination \$5
- TP (N11): TP (N11) against INC \$20
- 9) N12: Idac Mobile 30

Invoice dated

Fee Charged

Invoice dated

Fee Charged

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 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. 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	23/03/2020 12:16
Date Of Accident	21/03/2020 11:30
Exact Location Of Accident	MCE TWDS CITY BEFORE MAXWELL EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL3477G
Insured/Policyholder	
Name Of Registered Owner	CHEW YONG LI
NRIC No	SXXXX590D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82824647
Alternative Phone No	OFFICE-82824647

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER 1.6 A
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MS011312
Cover Note Number	

Driver

Name of Driver	CHEW YONG LI
NRIC No	SXXXX590D
Date Of Birth	05/12/1988
Occupation	OUTDOOR
Date Of Driving Pass	11/11/2009
Driving Experience	10 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82824647
Fax Number	
Contact Number	OFFICE-82824647
EEmail Address	NOEMAIL

Address	BLK 315A PUNGGOL WAY #04-647
Postcode	821315
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 - 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?	NO
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.	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	TECK GHEE NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 321 ANG MO KIO STREET 31 , POSTCODE: 560321 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4599999 - FAX NO: 64574478
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - F/20200321/2060.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFE360M
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

No. Of Passenger (Including Driver)

2

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.
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)**

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:
 - (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
- (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.:

①

②

Veh B: SFE360m

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

Report No. : F/2020/0321/2060

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

2 *chex*

chey

Personnel's Sign: _____

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Vehicle No.	SJL3477G		Model / Make	Mitsubishi Lancer
Date of Accident	21/3/2020			
Time of Accident	1130	HRS		
Location of Accident	Along mce tuds City before Maxwell Exit			
Exact purpose use during accident	Private use			
Name of Owner	Chew Yong Li			
Telephone No.	H/P : 82824647	Home :	Office :	
NRIC	S8848590D			
Address	BLK 315A Punggol Way #04-647 S(821315)			
Claim type	OD	THIRD PARTY	REPORTING ONLY	
Insurance Company	Tokio Marine			
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft	
Policy No.	MS 011312			
Name of Driver	As Above If No,			
NRIC	Any Passengers : -			
Date of birth	5/12/1988			
Occupation	Outdoor	/	Indoor	
Driving License Pass Date	11/11/2009			
Gender	Male	/	Female	
Contact No.	H/P :	Home :	Office :	
Address				
Driver have any own vehicle	No,	If yes, Reg No.		
Relationship	Employee,	If no, state Owner		
Weather condition	Clear	Raining	Other	
Road Surface	Dry	Wet	Other	
Any Injuries	No,	If Yes, Who?		
Name And Contact No.				
Name And Contact No.				
Police Report	No,	If Yes, Where?	Teck Ghee NPP	
Vehicle B No.	SFE360m	Any Passengers : 1		
Name of Driver	Contact No. :			
Vehicle C No.	Any Passengers :			
Vehicle D No.	Any Passengers :			
Vehicle E no.	Any Passengers :			
Vehicle F No.	Any Passengers :			
Vehicle G No.	Any Passengers :			
Witness Name	Witness Contact :			
Accident Portion	Front left portion			
Camera Recorder	Yes / No			
Email Address	demonster8400@hotmail.com			
PARTICULAR WORKSHOP	Twincar Automotive Pte Ltd			
CONTACT NO.	6842 0051 / 6744 0510			
CONTACT PERSON	Zi Ting			
FAX NO	6741 0510			
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg			



**SINGAPORE
POLICE FORCE**



F/20200321/2060

1 of 2

POLICE REPORT (NP299)

Report No. F/20200321/2060

Police Station Of Origin
Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

Date/Time Report Made 21/03/2020 16:01	Vide Report No.	Station Diary No. 29
Name Of Informant CHEW YONG LI	Address APT BLK 315A PUNGGOL WAY #04-647 SINGAPORE 821315	
ID Type / ID No. NRIC NO / S8848590D	Contact No. Home/Office Mobile 82824647	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Management consultant	Sex Male	Age 31
Institution/School Name	Date of Birth 05/12/1988	Race Chinese
	Language	
Date/Time Of Incident 21/03/2020 11:30 - 21/03/2020 11:30	Location Of Incident MARINA COASTAL EXPRESSWAY SINGAPORE Before Maxwell Exit, in the tunnel	

Brief details.

On 21.03.2020 at about 11.30am, I was driving on the extreme right lane along Marina Coastal Expressway when I saw a car, SFE360M, coming at a very fast speed from the rear. I then decided to enter into the 2nd lane so as to give way to him. As I was entering the second lane, I felt an impact from the left front side of my vehicle. My car was hit by the driver of vehicle SFE360M who had abruptly entered into my lane. After the collision, the driver gestured to me to stop at the side.

Signature Of Officer Recording The Report:

F / Staff Sgt NOOR RAMDAN BIN JOBRI

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
F / Ang Mo Kio South N.P.C /
Staff Sgt NOOR RAMDAN BIN JOBRI
Contact No.: 64519999

Signature Of Informant:

Date/Time:
21/03/2020 16:01

Classification Of Case:

Authentication Stamp





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20200321/2060

Upon stopping, the said driver was behaving in a hostile manner and accused me of hitting his car. He was shouting and gesticulating in a hostile manner towards me. He even challenged me to call the Police. I did not retaliate back as I felt threatened by his presence. We then drove off to make our own way without exchanging any particulars. No assault or threat had taken place. The collision caused damaged on the front left side of my vehicle while the other vehicle has damage on the rear right side of the vehicle. I am lodging this report for my own record purpose to aid me with my insurance claim. I have footage of the incident and will submit it to the Traffic Police for their follow up action for the way the driver had drive.

No government property was damaged in the event.

Signature Of Officer Recording The Report:

F / Staff Sgt NOOR RAMDAN BIN JOBRI

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
F / Ang Mo Kio South N.P.C /
Staff Sgt NOOR RAMDAN BIN JOBRI
Contact No.: 64519999

Signature Of Informant:

Date/Time:
21/03/2020 16:01

Classification Of Case:

Authentication Stamp



CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that Chew Yong Li, NRIC S8848590D, has reported to the Police a non-injury traffic accident which occurred along Marina Coastal Expressway before Maxwell exit at 11.30am on 21.03.2020 involving the following vehicles:

1. One White Vehicle with plate number SJL3477G (driven by Chew Yong Li)
2. One Grey vehicle with plate number SFE360M

- 2 If this accident was reported to the Police within 24 hours of its occurrence,
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SSgt Neo Rander

Date: 21/03/2020 Time: 1604hrs

S/D Ref: 30

Police Post/Unit: _____

Teck Ghee NPP
Blk 321 Ang Mo Kio St 31
Singapore 560321
Tel: 1800 - 459 9999

Original – to be issued to informant
Duplicate – to be submitted to Traffic Police

CONFIDENTIAL

Version as of 15 Jan 2002

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

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

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

Certificate of Insurance

FORM MX1 H

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.: MS011312 (Private Car)

- | | | |
|--|-----------------------|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SJL3477G | Chassis No.: JMYSTCS3A8U009617 |
| 2. Name of Policyholder | CHEW YONG LI | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 23/10/2019 (00:00:00) | |
| 4. Date of Expiry of Insurance | 24/11/2020 | |

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.

* 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.

6. Limitations as to use*

* 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 effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION		Account No: 2324DDA
Insurance Plan:	Third Party Fire & Theft	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Excess-Third Party (Sect II)	SGD 1,500.00
Financial Interest:	HONG LEONG FINANCE LTD	
Additional Terms:	<ol style="list-style-type: none">1. Vehicle is licensed for private hire by LTA and can be used for private hire limousine services.2. Only named drivers with private hire licences can use car for private hire.3. Additional YID excess of SGD 1,500 applied on Section 2.4. Notwithstanding anything to the contrary in the policy, MC19 Waiver of Excess is NOT applicable.5. Private Hire Usage Vehicle Endorsement is applicable.	

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature