

NATIONAL Assessment Centre Services

(wef 1 Jan 05)

MYAMORISIS

Date In: 6/12/19/27	Job description	Date & Time Completed	Done by
Ref No: HA/M36722565724	SAS e-filing		
Veh No: 5267367P	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 18/6/18 - 19/32	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:

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)

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

2) QC Check / Post Repair Inspection ()

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

Injury:

Date/Time Actions

Invoice Preparation Checklist

Am't (\$)

Am't (\$)

Int Bill

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:-

ON*

*N5: Courtesy Car / Tpt Allowance \$3

*N6: Repair Co-ordination \$10

*N7: Post Repair Inspection \$25

*N8: DV / Collect Excess Coordination \$3

TP (N11): TP (Non INC) 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	06/05/2020 17:27
Date Of Accident	18/06/2018 19:30
Exact Location Of Accident	MARINE DR NEAR BLK 79 MARINE DR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL7367P
Insured/Policyholder	
Name Of Registered Owner	E-KARZ RENTAL PTE LTD
Co Reg No	2XXXXX381M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68425988

Vehicle Particulars

Manufacturer	HONDA
Model	FIT 1.3G A
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	A28927339MKF
Cover Note Number	

Driver

Name of Driver	SEAH CHU SIONG, ALEX (XIE ZIXIONG)
NRIC No	SXXXX333J
Date Of Birth	14/03/1987
Occupation	INDOOR
Date Of Driving Pass	23/08/2011
Driving Experience	6 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98354447
Fax Number	
Contact Number	OFFICE-98354447
Email Address	NOEMAIL

Address	BLK 15 MARINE TERRACE #15-18
Postcode	440015
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PEDESTRIAN
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	1
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	KAMPONG KEMBANGAN NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 112 LENGKONG TIGA #01-215 , POSTCODE: 410112 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7489999 - FAX NO: 67454676
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180831/2062. VEHICLE HAS BEEN SCRAPPED.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

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.

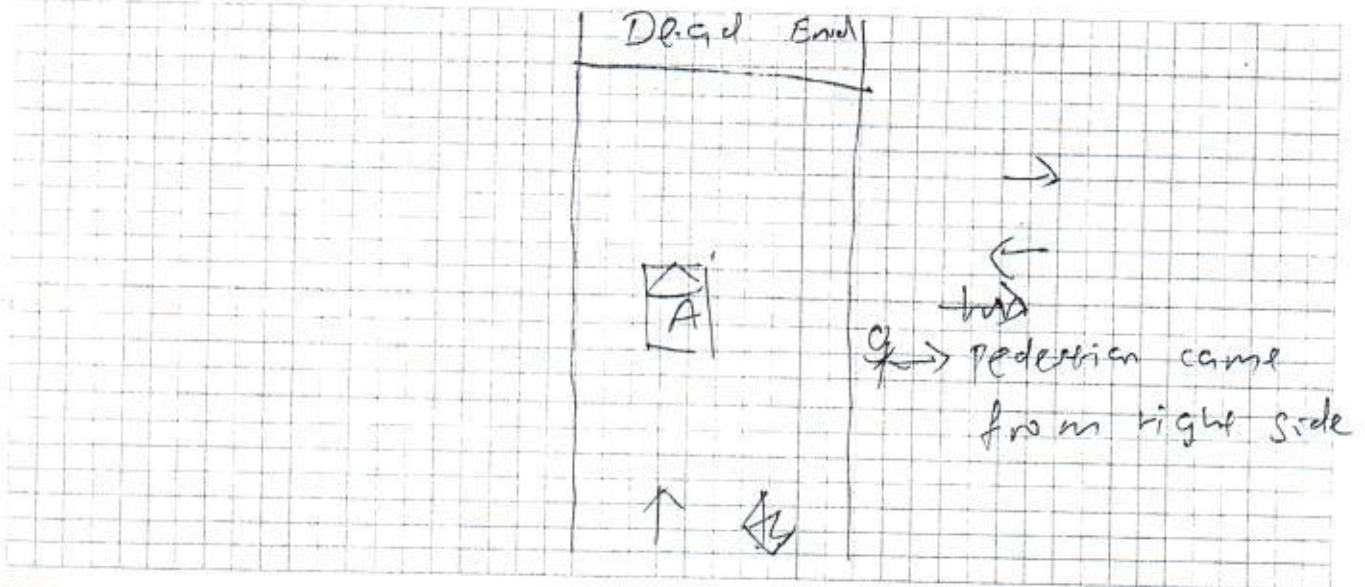


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 05/05/20

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

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: 05/05/20

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

ACCIDENT STATEMENT

ACCIDENT DATE: (18 / 06 / 2018) (DD/MM/YYYY), TIME: (19 : 30) (HH:MM)

LOCATION: Along Road 1 Marine Drive near to BIK 79 Marine Drive

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJL 7367 P
 b) INSURANCE COMPANY: MSIG
 c) POLICY NUMBER: 28927339 MEF
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Honda Fit 1.3 GA
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Working
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: E-KARZ Rental Pte Ltd (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: 9388 5988 | 6842 5988
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Seah Chu Seng Alex (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: SPT06333J CONTACT: 98354447
 c) ADDRESS: 15 Marine Terrace #15-18 594W15

*d) DATE OF BIRTH: (14 / 03 / 1987) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 89

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hiree

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS clear)

b) ROAD SURFACE: (DRY / WET / OTHERS dry)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Kampung Kembangan NPP

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
 (Including driver)
(1)

* No of passenger
 (Including driver)
()

* No of passenger
 (Including driver)
()

email =

fax =

video =



SINGAPORE POLICE FORCE



T/20180831/2062

1 of 3

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengong Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

Report No. T/20180831/2062

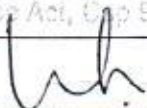
REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/08/2018 14:13	Vide Report No.:	Station Diary No.: 11
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Informant's Particulars

Name of Informant: SEAH CHU SIONG, ALEX			Address: APT BLK 15 MARINE TERRACE #15-18 SINGAPORE 440015		
ID Type / ID No.: NRIC NO / S8708333J			Contact No.: Home/Office: Mobile: 98354447		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 31	Date of Birth: 14/03/1987	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: IT TECHNICIAN			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 18/06/2018 19:30	Type of Location: Car Park
Location: Along Road 1 MARINE DRIVE				
Along Marine Drive, near to Block 79 Marine Drive			Certified True Copy	
Weather: Clear	Road Surface: Dry	pursuant to Sec. 73 of the Evidence Act, Cap 97.		Road Speed Limit:
Traffic Flow:	Traffic Control: Not Controlled			Traffic Volume:
Type of Collision: Moving Vehicle Against - Pedestrian	Siti Rahnayah Kasmani (M) Traffic Police Date : 31/08/2018		Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJL7367P	Car	HONDA	Fit	Black	No Damage	0

Details of Person Involved

Any Pedestrian Involved: Yes	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: Not Available



**SINGAPORE
POLICE FORCE**



T/20180831/2062

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengkok Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

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Report No. T/20180831/2062

CONTINUATION OF REPORT

Driver			
Name	SEAH CHU SIONG, ALEX	ID No.	S8708333J
Related Vehicle	SJL7367P (Car)	Contact No.	98354447
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL


Brief Details.

On the 18/06/2018 at about 1930 hours, I was driving a rental car bearing the registration plate number SJL7367P along Marine Drive. I was making a right turn, heading towards Block 79 Marine Drive when suddenly, a Chinese lady, about in her thirties, suddenly appeared from my right. I immediately braked. However, I still knocked onto her.

Upon realizing that I had knocked onto her, I immediately got out of the car to help the said lady up after which I asked if she required any medical attention. However, the lady brushed it off and said that she only got some minor abrasions. As such, I exchanged my contact details with the lady before driving off.

I wish to state that the rental car did not have in-car camera installed. Also, there was no damages on the car.

Certified True Copy
pursuant to Sec. 73 of the
Evidence Act, Cap 97.


Officer-in-Charge (Investigating)
Traffic Police
Date: 09 APR 2020



**SINGAPORE
POLICE FORCE**



T/20180831/2062

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengkok Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

3 of 3

Report No. T/20180831/2062

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 The Report:
G /
Sgt 3 MUHAMMAD SYAHIDIN BIN MATNIN

Signature Of Interpreter:
Not applicable

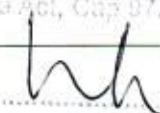
Officer In Charge Of Case:
TP / AEIT /
SI ANG YI TING, STEPHANIE
Contact No.: 65476414

Authentication Stamp
NP168

Signature Of Informant:

Certified True Copy
pursuant to Sec. 78 of the
Evidence Act, Cap 97.

Date/Time:
31/08/2018 14:13


SRI BEAUVEN KOSMANI (MX)
Traffic Police
Date :

Classification Of Case: 09 APR 2020

10 Sin Ming Drive Singapore 575701
www.lta.gov.sg

**DETAILS OF DEREGISTERED VEHICLE
REPUBLIC OF SINGAPORE**

This is to certify that vehicle no. SJL7367P has been deregistered.

1. Vehicle No.	: SJL7367P
2. Effective Date Of Ownership	: 17 Jan 2018
3. Original Registration Date	: 10 Dec 2008
4. First Registration Date	: 10 Dec 2008
5. Vehicle Type	: Motor Car
6. Attachment 1	: No Attachment
7. Attachment 2	: -
8. Attachment 3	: -
9. Vehicle Make	: HONDA
10. Vehicle Model	: FIT 1.3G A
11. Year Of Manufacture	: 2008
12. Primary Colour	: Black
13. Secondary Colour	: -
14. Passenger Capacity	: 4
15. Chassis No.	: GE61138001
16. Trailer Chassis No.	: -
17. Propellant	: Petrol
18. Engine No.	: L13A4153078
19. Motor No.	: -
20. Engine Capacity (cc)	: 1339
21. Power Rating (kw)	: -
22. Unladen Weight (kg)	: 1010
23. Maximum Laden Weight (kg)	: 1285
24. No. Of Transfers	: 2
25. De-registration Date	: 06 Dec 2018
26. Remarks	: -

Note :

1. Data is not available or not applicable for fields with "-".
2. You may also download the details of the deregistered vehicle using the vehicle no. (SJL7367P) and business transaction reference no. (20200506151340344220) at www.onemotoring.com.sg > **Digital Services > Retrieve deregistered vehicle details** by 05 Nov 2020.

ISSUED BY REGISTRAR OF VEHICLES

DISCLAIMER

The information contained herein is provided "as is" and is extracted from particulars furnished to the Land Transport Authority as at 06 May 2020. Whilst every endeavour is made to ensure that the information provided is updated and correct, the Land Transport Authority disclaims all liability for any damage or loss whether special, indirect, direct, consequential damages or economic loss arising out of or in connection with the use of information. The Land Transport Authority does not warrant the accuracy, adequacy or completeness of the information or that it is fit for a particular purpose and expressly disclaims all liability for any errors or omission in the information. This disclaimer shall take effect to the fullest extent permitted by law.



MSIG

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807

Tel +65 6827 7888, Fax +65 6827 7800

Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.2.400
Cars for Hire

COMMERCIAL VEHICLE - FLEET
Third Party

Certificate No. A 28927339 MKF

Excess: SGD1,500

1. Index Mark and Registration Number of Vehicle

SJL7367P

2. Name of Policyholder

E-Karz Rental Pte Ltd

3. Effective Date of the Commencement of Insurance for the purposes of the Act

04/04/2018

4. Date of Expiry of Insurance

03/04/2019

5. Persons or Classes of Persons entitled to drive*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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*

Use for the carriage of passengers or goods in connection with the Policyholder's business.

Use for social domestic and pleasure purposes.

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.

* 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.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers


for Chief Executive Officer