

# CHOO MOTOR SPRAY PAINTER

1 Kaki Bukit Ave 6 #01-39 Autobay  
Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

Date : 04.09.2020

India International Insurance Pte Ltd  
64 Cecil Street  
#04-05 IOB Building  
Singapore 049711

Attn: Motor Claim Department

Dear Sir/Madam,

**ACCIDENT INVOLVING VEHICLES : SMQ 8630K / SKJ 4715L ON.13.08.2020**

We are the authorized repair workshop for the owner of motor vehicle no: **SMQ 8630K**, which was involved in the captioned accident with your insured vehicle no: **SKJ 4715L**. The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1) Cost of Repair	\$ 7,700.00
2) Loss of Rental	\$ 900.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 8,602.00</u>

We enclosed herewith the following documents to support the claims:

- |                                  |                                    |
|----------------------------------|------------------------------------|
| a) Final Repair Invoice          | b) Car Rental Invoice / Agreement  |
| c) GIA Search Result             | d) Letter of Authorisation , etc.. |
| e) GIA Report                    | f) Police Report                   |
| g) I/C & Driving License         | h) Insurance Certificate           |
| i) Vehicle Registration Log Card |                                    |

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,

Tang Jun Zhong  
For Choo Motor Spray Painter

## TAX INVOICE

### **CHOO MOTOR SPRAY PAINTER**

1 Kaki Bukit Ave 6 #01-39 Autobay

Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

India International Insurance Pte Ltd

64 Cecil Street

#04-05 IOB Building

Singapore 049711

Attn : Motor Claim Department

Tax Invoice : 21928,

Date : 04.09.2020,

Vehicle No : SMQ 8630K,

Make/Model : Toyota Noah Hybrid,

Chassis/Eng# :

Accident Date : 13.08.2020,

Claim No :

Reference : 0820 -21928,

Policy No :

Amount

To proceed on lump sum repair

S\$

7700.00

E. & O. E.

Total : S\$

7700.00

  
for CHOO MOTOR SPRAY PAINTER

# DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay

Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: WILLSON ANG WEI SHENG

Invoice : DCR-2020-08-19

Date : 18.08.2020

Agreement No : 21371

Payment Terms : LOD

DESCRIPTION	AMOUNT
Rental charges for vehicle : <u>SLJ 5059D</u> ( 0820-21928 )	\$ 900.00
Rental Period from <u>13.08.2020</u> to <u>18.08.2020</u> .	

E. & O. E.

Total \$ 900.00

JENNY LAW

for Dynamic Car Rental



# Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

## RENTAL TERMS AND CONDITIONS

No. **21371**

Name <b>Willson Ang Wei Sheng</b>			REG. No. <b>SLJ509P</b>		MAKE MODEL:	
ADDRESS <b>Blk 432D Yishun Avenue 1</b>			DIESEL		PETROL	E 1/4 1/2 3/4 F
#05-565			KM IN		DATE & TIME IN <b>18.08.2020 @ 1.02pm</b>	
Singapore 764432			KM OUT		DATE & TIME OUT <b>13.08.2020 @ 6.55pm</b>	
NAMED DRIVER			KM DRIVEN		TIME USED	
DRIVING LICENCE NO <b>S8133405F</b>	DATE OF EXPIRY	PLACE OF ISSUE	HOURS		@SS	
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	<b>5</b> DAYS		@SS <b>180.00 \$ 900.00</b>	
ADD NAMED DRIVER			WEEKS		@SS	
DRIVING LICENCE NO			MONTHS		@SS	
DATE OF EXPIRY			BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)		SUB-TOTAL	
PLACE OF ISSUE						
DATE OF ISSUE					TOTAL RENTAL <b>\$ 900.00</b>	
PLACE OF ISSUE					DELIVERY FEE	
IMPORTANT NOTES:					COLLECTION FEE	
This vehicle is licenced to carry 04 passengers only. No refund will be given for vehicle returns early. No refund will be given for period left in vehicle. Hirer is liable to pay first \$4000 under section I & II in any accident plus loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking fee and traffic summonses.			<b>X</b>			
Vehicle return during office hour only. No Service on Public Holiday and Sunday.			PER DAY \$		PER WEEK \$	
EXCESS:			PER MONTH \$			
*Sec I - Used in S'pore Only :SGD2000			BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)			
*Sec II - Used in S'pore Only :SGD2000			<b>X</b>			
*Sec I - Used Outside S'pore Only :SGD4000			PER DAY \$		PER WEEK \$	
*Sec II - Used Outside S'pore Only :SGD4000			PER MONTH \$			
W/screen Excess In S'pore: SGD100			PREPAYMENT		TOTAL CHARGE	
W/screen Excess Outside S'pore: SGD200			CHECK		DEPOSIT	
ADDITIONAL CONDITIONS:			CASH			
* Geographical areas: Singapore & West Malaysia.			RECEIPT NO.		NETT CHARGE	
* Driver must be:						
a) 18 years old and above;			AMOUNT DUE / REFUND			
b) holding a valid relevant class of driving license.						
* Additional Own Damage Excess of S\$1,000 is applicable for any named/unnamed drivers who:						
a) age 22 to 23 years old;						
b) age 66 to 70 years old;						
c) with driving experience of 1 year to less than 2 years in Singapore on the relevant classes of driving license.						
* Additional All Claims excess of S\$2,000 is applicable for any named/unnamed drivers who:						
a) is 18 years old to 21 years old and/or						
b) is 71 years old and above and/or						
c) with driving experience of less than 1 year on the relevant classes of driving license.						
* Upon returning the replacement vehicle, you must ensure that all expensive and important items to be removed away from this replacement vehicle. We/I will not be responsible for any reporting of such losses.						
* Hirer is liable to pay first \$4000 under section I & II in any accident plus loss of earning while damage vehicle is under repair.						

Hirer is responsible for Additional \$4,000.00 Excess to the THIRD PARTY DAMAGE / INJURY claims.

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THEREOF.

SIGNED BY THE PARTIES HERETO ON THE ..... DAY OF .....

**X**

DYNAMIC CAR RENTAL

**X**

RENTER'S/DRIVER'S SIGNATURE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**Third Party Insurer Enquiry**

Our Ref No: GR-20-094480  
Date of Request: 13/08/2020

Your Ref No: Online Purchase

Kim Chwee Auto Pte Ltd  
1 Kaki Bukit Avenue 6 #01-48  
AutoBay@Kaki Bukit  
Singapore 417883

Dear Sir/Madam,

Enquiry Date 13/08/2020  
Enquiry By Tang Kok Wee, Allan  
Vehicle No. SKJ4715L  
Accident Date 13/08/2020

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKJ4715L	India International Insurance Pte Ltd	08/04/2020-07/04/2021	63476100

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.





RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

**TAX INVOICE**

Our Ref No: GR-20-094480

Date of Request: 13/08/2020

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd  
1 Kaki Bukit Avenue 6 #01-48  
AutoBay@Kaki Bukit  
Singapore 417883

Dear Sir/Madam,

Enquiry Date 13/08/2020  
Enquiry By Tang Kok Wee, Allan  
Vehicle No. SKJ4715L  
Accident Date 13/08/2020

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ [X] GIRO ☐ [ ] Cash ☐ [ ] Cheque

DATE : 13.08.2020

TO : India International Insurance Pte Ltd

RE : ACCIDENT INVOLVING VEHICLE NO. SMA 8630 K / SKJ 4715 L

ALONG Bedok North Rd Turf Tampines Ave 10

ON 13.08.2020

I/We, Willson Ang Wei Sheng  
of (NRIC No./ROC No.) S 8133 405 F  
of Blk 432 D Yishun Avenue 1 #05-565 Singapore 764432  
owner of vehicle no. SMA 8630 K in consideration of M/s CHOO MOTOR SPRAY  
PAINTER repairing my/our vehicle SMA 8630 K at my/our instruction and hereby  
authorise M/s CHOO MOTOR SPRAY PAINTER to demand claim settlement whatever  
amount settled/payable by the Insurance Company and/or third party or to commence legal  
proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,  
etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and  
all claimed and/or settled shall belong to them absolutely.

I/We further agree and undertake to indemnify them against the above-mentioned claim cost  
which may arisen therewith.

Signature of Owner : 

Name of Owner : Willson Ang Wei Sheng



## 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	14/08/2020 09:20
Date Of Accident	13/08/2020 17:10
Exact Location Of Accident	BEDOK NORTH RD TWRD TAMPINES AVE 10
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMQ8630K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WILLSON ANG WEISHENG
NRIC No	SXXXX405F
Email Address	WILLSONANG1981@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96473034
Alternative Phone No	OTHERS-96473034

### Vehicle Particulars

Manufacturer	TOYOTA
Model	TOYOTA / NOAH HYBRID 7-SEATER 1.8X CVT
Exact Purpose for which vehicle was being used at time of accident	
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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5114315315
Cover Note Number	

### Driver

Name of Driver	WILLSON ANG WEISHENG
NRIC No	SXXXX405F
Date Of Birth	03/11/1981
Occupation	OUTDOOR
Date Of Driving Pass	21/06/2003
Driving Experience	17 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96473034
Fax Number	
Contact Number	OTHERS-96473034
Email Address	WILLSONANG1981@GMAIL.COM



Address	BLK 432D #05-565 YISHUN AVENUE 1 VISTA SPRING @ YISHUN
Postcode	764432
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 - 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
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by 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)	5
Passenger 1	NAME: : GRAB PASSENGER GENDER: : FEMALE
Passenger 2	NAME: : GRAB PASSENGER GENDER: : MALE
Passenger 3	NAME: : GRAB PASSENGER GENDER: : MALE
Passenger 4	NAME: : GRAB PASSENGER GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER ATTACHED;

#### 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	SKJ4715L
Vehicle Make/Model/Colour	KIA / CERATO FORTE 1.6(A)SX HATCHBACK
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

INDIA INTERNATIONAL INSURANCE PTE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name

WILLSON ANG WEISHENG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SMQ8630K

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

Address

BLK 432D #05-565 YISHUN AVENUE 1 VISTA SPRING @ YISHUN

Postcode

764432



## Accident Sketch Plan

### 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:

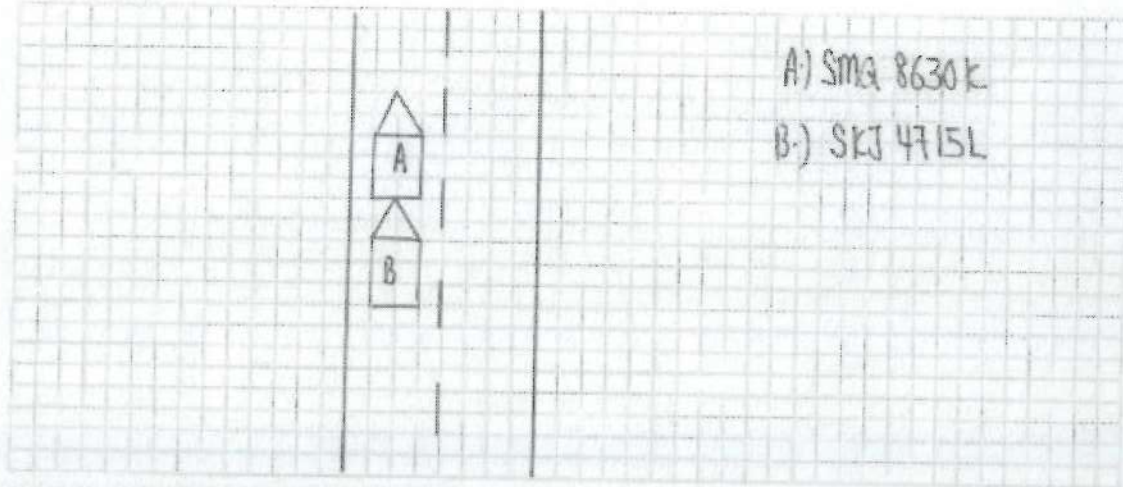
  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

**IDAC KAKI BUKIT (VAC)**  
23 Kaki Bukit Ave 4 #02-02  
Singapore 415933  
Tel: 67416697 Fax: 67492305  
Email: [vackb@vicom.com.sg](mailto:vackb@vicom.com.sg)

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.: 14 AUG 2020

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 13-08-2020 at about 5.10pm, I was travelling along Bedok North Road Towards Tampines Avenue 10, I Stopped at the Red traffic light. When the traffic light turn green i started to move, Suddenly i was violently hit from behind by red colour kia car number SKJ 4715L. I came down from my car and found back portion of Toyota Noah 7-seater car number SMA 8630K was badly damage. I also suffered injury to my neck and lower back. There were 4 other passengers in my vehicle.

## 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:

IDAC KAKI BUKIT (VAC)  
23 Kaki Bukit Ave 4 #02-02  
Singapore 415933  
Tel: 67416697 Fax: 67492305  
Email: vackb@vlcom.com.sg

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No: 14 AUG 2020





# SINGAPORE POLICE FORCE



T/20200814/2033

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

1 of 3

Report No. T/20200814/2033

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/08/2020 12:24		Vide Report No.:		Station Diary No.: 55	
<b>Informant's Particulars</b>					
Name of Informant: WILLSON ANG WEISHENG			Address: APT BLK 432D YISHUN AVENUE 1 #05-565 SINGAPORE 764432		
ID Type / ID No.: NRIC NO / S8133405F			Contact No.: Home/Office: Mobile: 96473034		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 38	Date of Birth: 03/11/1981	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3,4,5 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/08/2020 17:10	Type of Location: Flyover
Location: BEDOK NORTH ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 45 Km/h	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKJ4715L	Car	KIA	CERATO FORTE 1.6(A)SX HATCHBACK	Red	Slightly Damaged	1
SMQ8630K	Car	TOYOTA	NOAH HYBRID 7-SEATER 1.8X CVT	Black	Seriously Damaged	4





**SINGAPORE  
POLICE FORCE**



T/20200814/2033

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

2 of 3

Report No. T/20200814/2033

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMQ8630K	NTUC Income Insurance Co-Operative Limited	5114315315	05/12/2019	04/12/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	stephanus	ID No.	NIL
Related Vehicle	SKJ4715L (Car)	Contact No.	91853667
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	WILLSON ANG WEISHENG	ID No.	S8133405F
Related Vehicle	SMQ8630K (Car)	Contact No.	96473034
Hospital/Clinic	FAMILY CARE CLINIC PTE LTD	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	14/08/2020	Date Discharge	14/08/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

on the 13/08/2020 at about 1715hrs, I was travelling along bedok north road towards Tampines avenue 10. I stopped at the red traffic light. when the traffic light turns green I started to move, suddenly I was violently hit from behind by a red color kia car plate number (SKJ 4715L). I came down from my car and found the back portion of my Toyota noah 7 seater car plate number (SMQ 8630K) badly damaged. I wish to state that I suffered an injury to my neck and lower back and later was diagnosed as an acute whiplash injury. The clinic that I went to was the family care clinic at bukit batok and was given 3 days medical leave. There was 4 passengers in my vehicle at the point of accident. none of my passengers or the other party driver and his passengers was injured in the accident. no police or ambulance was present at the scene. I am lodging this report for insurance purposes.





**SINGAPORE  
POLICE FORCE**



T/20200814/2033

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

3 of 3

Report No. T/20200814/2033

**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:

J /

Sgt 2 Muhammad Barri Bin Osman

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI MOHAMAD ZULFAZDLI BIN ABDULLAH

Contact No: 689286

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

14/08/2020 12:24

Classification Of Case:

SIGNATURE

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8133405F



Name  
WILLSON ANG WEISHENG

洪伟胜

Race  
CHINESE

Date of birth  
03-11-1981

Sex  
M

Country of birth  
SINGAPORE

S8133405F

For Insurance Reporting And  
Claim Purposes Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8133405F

Name  
WILLSON ANG WEISHENG

Birth Date 03 Nov 1981

Issue Date 31 Jan 2012



002038703J

*[Handwritten signature]*

4818719

For Insurance Reporting And  
Claim Purposes Only



NRIC No. S8133405F



Date of issue  
31-01-2012

APT BLK 432D YISHUN AVENUE 1 #05-585  
SINGAPORE 764432


NRIC No: S8133405F Date: 12/01/2015

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor Cars $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles $\leq$ 2500kg	21 Jun 2003
Class 4 *Motor vehicles which are constructed to carry load or passengers and the unladen weight $>$ 2500kg	13 Nov 2007
Class 5 *Motor vehicles which are not constructed to carry load and the unladen weight $<$ 7250kg	12 Aug 2008
Motor vehicles not constructed to carry any load and the unladen weight $>$ 7250kg	

NP 428A

Licence No: S8133405F





For Insurance Reporting And  
Claim Purposes Only

Land Transport Authority



### VOCATIONAL LICENCE

Licence No : S8133405F

Name : WILLSON ANG WEISHENG

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check  
the status of this vocational licence

For Insurance Reporting And  
Claim Purposes Only

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

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	14/08/2018



## 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)  
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number:** 5114315315

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SMQ8630K**  
 Chassis Number : ZWR800417574
2. Name of Policyholder : WILLSON ANG WEISHENG
3. Effective Date of Insurance : 05 Dec 2019
4. Expiry Date of Insurance : 04 Dec 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)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: S\$1,500
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	: ANG WEI SHENG WILLSON
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: SKYWAY CREDIT & 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 : AMGF (SB) INSURANCE AGENCY (00000573731)  
 Date of Issue : 04 Dec 2019 12:12 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	405F
<b>Vehicle Details</b>	
Vehicle No.:	SMQ8630K
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Aug 2020
Vehicle Make:	TOYOTA
Vehicle Model:	NOAH HYBRID 7-SEATER 1.8X CVT
Primary Colour:	Black
Manufacturing Year:	2019
Engine No.:	2ZR0E75749
Chassis No.:	ZWR800417574
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$33,447.00
Original Registration Date:	05 Dec 2019
First Registration Date:	05 Dec 2019
Transfer Count:	0
Actual ARF Paid:	\$28,826.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	04 Dec 2029
PARF Rebate Amount:	\$21,619.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	04 Dec 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$41,805.00
COE Rebate Amount:	\$38,911.00
<b>Total Rebate Amount:</b>	<b>\$60,530.00</b>

The information contained herein is correct as at 13 Aug 2020

OK