NATIONAL Assessment Centre	1		e & Time Comple	eted Done	by.
Date In: 01/09/20	Job description	1,511	6 % Lillie Comba		-
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Preferred Wksp / INC Assign Wksp / QW: (То		Fax:	
TP Particulars: Yeli No: 2	SLV7346Z	. INC(,)	Non-INC ()	
Owner / Driver: (:1:		
	iod: () Cov	er Type: (
Configured by 1 (0.77	ate:	Time:)	
Insured/Driver Liability: (%) [1	Note-Est. Status (WO)		P: 21-79%. F	: 80-100%]	
Year of Registration: () V	Varranty: YES ()	/NO()			
	00 () / \$2,000 ()			-
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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

foresaid,		
A SECTION OF SECTION O	ACCIDENT STATEMENT	
Date Of Report	01/09/2020 16:26	
Date Of Accident	31/08/2020 19:10	
Exact Location Of Accident	BLK 166 BUKIT BATOK WEST AVE 8 CARPARK LOT 64	
Country/State of Loss	SINGAPORE	
D	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	GT310S	
Insured/Policyholder		
Name Of Registered Owner	ONG CHUAN SENG ELECTRICAL TRADER	
Co Reg No	5XXXX662X	
Email Address	NOEMAIL	
Mobile Phone No		
Alternative Phone No	OFFICE-96610449	
Vehicle Particulars		
Manufacturer	TOYOTA	
Model	DYNA	
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE	
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	COMMERCIAL VEHICLE	
Insurance Company		
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	DMCVSN19370119000	
Cover Note Number		
Driver		
Name of Driver	COACH ONG MING KHANG	
NRIC No	SXXXX823J	
Date Of Birth	05/06/1987	
Occupation	OUTDOOR	
Date Of Driving Pass	12/07/2006	
Driving Experience	14 YEARS AND 1 MONTH	
Gender	MALE	
Mobile Number	(LOCAL) +65-96610449	
Fax Number		
Contact Number		
EMail Address	NOEMAIL	

BLK 111 GANGSA ROAD Address #04-71 670111 Postcode Was driver an employee of the Insured's Company YES If No. Relationship of the Driver with the Insured Vehicle Registration Number of Driver's Own Vehicle Insurance Company of Driver's Own Vehicle General Information of the Accident COLLIDED INTO PARKED VEHICLE Type Of Accident CLEAR Weather Conditions DRY Road Surface Other Information Was any foreign vehicle involved in this accident? NO Number of vehicles (including own vehicle) 2 involved in the accident NO Was any body injured in the Accident? Was any injured conveyed to hospital by NO ambulance? YES Was any other material or property damaged? I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. Number of Passengers (Including Driver) **Details of Police Action** NO Was the accident reported to the police? If Yes, Please state which Police Station Was notice of intended Prosecution given? NO If Yes, against whom? Circumstances of Accident PLS REFER TO THE ATTACHED STATEMENT. Attachment(s) Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO NO Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1 SLV7346Z Vehicle Registration Number Vehicle Make/Model/Colour Details Of Properties PRIVATE CAR Vehicle Category Name of Driver NRIC/Passport Number Contact Number Address

Postcode

Insurance Company Name

No. Of Passenger (Including Driver)

Nature Of Damage

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ONG CHUAN SENG ELECTRICAL TRADER
Bit 166 BLAK Batck West Ave 8 #01-248
Singapore ES0166 Tel: 6563 6811 自
Email: ongchuanseng@gmail.com

elyn 01/09/20

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RIK 166 BUKIT BATOK WEST AVE 8

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		-++	(B)-SLV7346Z
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Email_cogctuanseng@gmail.ce

Crisis Spinis e (Server a notice of the other) This Silver

Name NEW NAME OF

SINGAPORE ACCIDENT STATEMENT

Accident Date: 31/08/2020 Time: 1910 (hh:num) 24 hr format
Location BIK 166 Bukit Batok West Ave 8 corporale Lot 64
Location Dik 160 Boki T Butok Stor 1700 Store
Vehicle Number 673165
Insured Name Ong Chuan Seng Electrical Trader
NRIC/FIN 53 400662 × Contact Number 9661 0449
NRICIPIN 55 400662 x connections
Make Toyota Model Dyna
Are you claiming under your own insurance policy for repair to your vehicle?
() Yes If No.Pls select: () Third Party () Reporting
Insurance Company China Taiping
Type of Policy () Comphensive () Third Party Fire & Theft () TP Only
Policy Number 6001 5855 DM CVSN 19370119000
Name of Driver Dong Ming Khong ()Same as Insured
NRIC / FIN 58720823 J Contact Number 9661 0449
Date of Birth 05/06/1987
Driving Pass Date 12/07/2006
Occupation () Indoor (/) Outdoor
Cardon (C) Vola () Female
Email Address ongchuonseng@gmail.com ()NO EMAIL
Address of Driver Bik III Gangsa Road #04-71 5(670111)
Address of Prival Big In Good St. Feet
Was driver an employee of the Insured's Company? () Yes () No
If No. Relationship of the Driver with the Insured Employee
() Owner () Spouse () Friend () Relative () Children () Sibling
Does the Driver Own Any Other Vehicle ? (V) Yes (1No
If Yes , Vehicle Registration Number of Driver's Own Vehicle SKZ87H
Insurance Company of Driver's Own Vehicle NTUC
Weather Conditions () Clear () Reining () Others
Road Strikes (V) Day () West 10 thers
Was any forcign vehicle involved in this accident? () Yes () No
Wes any folding in whe needed min? (1) Yes (2) No
if yes, injured demil
Was there any video captured by Car Camera? () Yes () No
Was the Accident reported to the Police? () Yes () No If yes attach police reported to the Police?
DETAILS OF 310 party None / Nric Contact
Veh B 5LV 7346 Z
Veh C
Velt 12
Veh E
Veh F
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中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

SN N

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 (Mallaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

AN0633A Cov. Type:C

CERTIFICATE No.

DMCVSN19370119000

Engine No.: 1KD2852239

Cha. No.: KDY2318038275

1. Index Mark and Registration

GT310S

AUTOSAFE

Number of Vehicle 2. Name of Policy Holder

ONG CHUAN SENG ELECTRICAL TRADER

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

16/09/2019

Excess Sect I.

S\$350.00

EX ON WINDSCREEN .

\$\$100.00

4. Date of Expiry of Insurance

15/09/2020

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their 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:
- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

(1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.

(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: UNITED OVERSEAS BANK LIMITED AS HP OWNER

* 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.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Chua Suat Lay Sally Authorised Officer

Authorised Signatory