

ASSIGNMENT

From _____ Date _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No. **29138602AVW**
 Claims No. **628889**
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)
 Remark: The veh had commenced its
 repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____
 IDAC Accident Rport: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: **6** days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: **SLB4026Y** Yr Regn: **2016 April**
 Type: (M.Car) M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: **Honda Shuttle Hybrid.c.c 1496**
 Colour: **White** A/C: **Insured / Std / NI / NA**
 Sp Reading: **107158** T/Radio: **Insured / Std / NI / NA**
 Eng/No: _____
 C/No: **G?71015219.**
 Gen. Cond: (Good) / Fair / Poor / Burnt
 Steering: (Inorder) / Jammed / Leaked / Burnt or _____
 Brake: (Inorder) / Jammed / Leaked / Burnt or _____
 Mod: **Nil / S/Rim / (STD A/Rim)** or _____
 Tyre Size: F: **185/60R15**
 R: **185/60R15.**
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **Pirelli**
 Front _____ Rear _____
 R/Bal. **06** mm R/Bal. **06** mm
 L/Bal. **06** mm L/Bal. **06** mm
 D.O.A. _____ D.O.I. **23/09/20**
 Survey held at **Sin Yu Sin**
 Des. of Damages: Frt / (Rear) / O/S / N/S / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	TP MSG.

24/09/20@9.40am Informed Katherine Wong, we are pending for estimate from repairer.
 13/10/20@2pm revised to Katherine Wong via Merimen.

MV :
 PV :
 Nett :
 LS \$5850, 6 days (Red \$4851.20, 45%)

Date/Time, File Pass to? : Preli. Report

1)13/10 Typist : Final Report

Date/Time, File Return to?

2)

Days Of Repair: **6**

Resurvey No. of Trip: **1**

Survey Fee:

Transportation:

S + PS. SI

Photos

Other

TOTAL

Arbit Fee: : Site Insp (\$)

: Interview (\$)

: Tech. Insp (\$)

: Meet and (\$)

Report Formed **MER-TP**

Amount **5850**

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	21/09/2020 17:18
Date Of Accident	19/09/2020 16:00
Exact Location Of Accident	AMK AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB4026Y
Insured/Policyholder	
Name Of Registered Owner	JONG ENTERPRISE
Co Reg No	5XXXX702E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92337497
Alternative Phone No	OFFICE-92337497

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE HYBRID-1.5 (A)
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	QUEK HWI JONG
NRIC No	SXXXX409C
Date Of Birth	25/08/1986
Occupation	OUTDOOR
Date Of Driving Pass	14/01/2010
Driving Experience	10 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92337497
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address BLK 596B AMK ST52 #16-323
 Postcode S562596
 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

Type Of Accident CHAIN COLLISION
 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 3
 Was any body injured in the Accident? YES
 Was any injured conveyed to hospital by ambulance? YES
 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) 2
 Passenger 1 NAME: : ONG JIA YIN CAROL
 GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 POLICE STATION NAME [OTHER] ONLINE
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN AND POLICE REPORT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMQ5688P
 Vehicle Make/Model/Colour VOLKWAGON
 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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJT3909K

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)

DETAILS OF INJURED PERSON 1

Name

QUEK HWI JONG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

DETAILS OF INJURED PERSON 2

Name

ONG JIA YIN CAROL

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

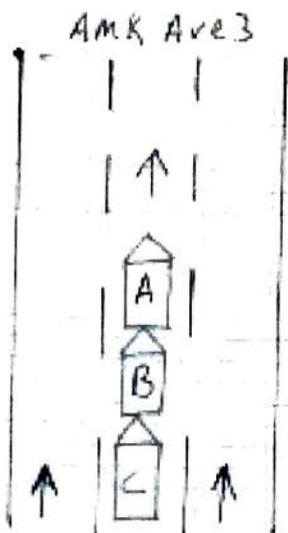
Was this injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan

SKETCH PLAN



A - SLB4026Y
 B - SMA5688P
 C - SJJ3909K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

DECLARATION

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

JONG ENTERPRISE
UEN: 53404702E

Policyholder's Signature
Date & Time:

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



Reporting Centre Personnel's Signature
Name: TONY
NRC/FIN No: S 97457010

Sketch Plan #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 willful misrepresentation or withholding of material facts may allow insurance companies to **rescind 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 lodging of this report to the insurers, you hereby consent to the archiving of this report at the centre and in 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 based 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.

JONG ENTERPRISE
UEN: 53404702E

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personal's Signature

Name: TOM

NRIC/FN No.: S9342576B



POLICE REPORT (NP299)

Report No. F/20200920/7038

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No:1800-2180000

Date/Time Report Made 20/09/2020 22:00	Vide Report No.	Station Diary No.	
Name Of Informant QUEK HWI JONG	Address 596B ANG MO KIO STREET 52 #16-323 SINGAPORE 562596		
ID Type / ID No. NRIC NO / S8625409C	Contact No. Home/Office:	Mobile: 92337497	
Nationality SINGAPORE CITIZEN	Email Address HWIJONG@HOTMAIL.COM		
Occupation Real estate agent	Sex Male	Age 34	Date of Birth 25/08/1986
Institution/School Name	Race Chinese		
Date/Time Of Incident 19/09/2020 16:00	Language English		
	Location Of Incident ANG MO KIO AVENUE 3		

Brief details.

I was driving along Ang Mo Kio Ave 3 in my white Honda Shuttle with car plate number SLB4026Y, heading eastward, at around 4pm on 19 September 2020. My wife, Ong Jia Yin, Carol NRIC number S8803959I, was seated in the front passenger seat of the car. We were both wearing seat belts.

I came to a stop as the traffic light was red at that time. A brown Volkswagen Tiguan with car plate number SMQ5688P, driven by William Yap Weidian NRIC number S8202285F, was stopped behind me. A black Mercedes-Benz C180 with car plate number SJT3909K, driven by Tok Chui Yian Joyce NRIC

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/09/2020 22:00
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20200920/7038

number S6903412H, failed to stop and collided into the rear of Volkswagen behind me, and the impact caused the Volkswagen to collide into the rear end of my car.

The passenger in the Volkswagen was injured and an ambulance was called, and the passenger was conveyed to hospital in the ambulance. A traffic police officer SSGT Noah later arrived at the scene. He took down my particulars and I told him my account of the incident. I also handed the memory card of my car camera to him for investigation. He instructed that I could leave and that I will need to lodge a police report.

Later in the evening, both my wife and I experienced pain in our necks as a result of whiplash caused by the collision. We visited a clinic near our house and were both given medication and 3 days of MC each.

Subjects Involved			
Victim			
Person Name	QUEK HWI JONG		
ID Type	NRIC NO	ID No	S8625409C
Gender	Male	Age	34
Race	Chinese	Language	English
Occupation	Real estate agent	Address	596B ANG MO KIO STREET 52 #16-323 SINGAPORE 562596
Mobile No	92337497	Is Informant A Victim?	Yes
Person Name	Ong Jia Yin, Carol		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/09/2020 22:00
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20200920/7038

ID Type	NRIC NO	ID No	S8803959I
Gender	Female	Age	32
Race	Chinese	Language	English
Address	596B Ang Mo Kio St 52 #16-323 SINGAPORE 562596	Mobile No	94898550
Relation To Informant	Wife		
Person Name	QUEK HWI JONG (Informant)		

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

20/09/2020 22:00

Classification Of Case:

Authentication Stamp