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Veh No. RMW 269 C	E-mail (bjale ster, AtC 2	lus)	
001 36 100000 18:00	I-Motor Claim Form		· ·
	I-Motor W/O (Withlat C	DD 2hrs, TP 4hrs)	*
OD (TP)! Reporting Only	I-Photo Uploaded		:
	Assessment/Survey Rep		· · · · ·
TP Insurer:			
Proformed Wkep / INC Assign Wksp / QW: (Ass't Report by Pax/H	Tol:	Fax:
TP Particulars: Veh Nor CM	DIEGIL P)
Owner / Driver: (1 12810	Tel: ·	, , , ,
	riod: () Cover Type: (
Confirmed by : (· Dates)
		: 0-20%; P: 21-79%. P:	80-100%]
	Warranty: YES ()/NO		
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MNA4200B4365 / National Assessment Centre Services - Bukit Merah ENTRY DATE & TIME: 27/10/2020 16:04 SUBMITTED BY: ROSLI BIN ABDUL WAHAB

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 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.
- 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.

By the lodgement of this report to the insurers, yeaforesaid.	ou hereby consent to the archiving of this report at the centre and to copies of the report being made avail	able
2000年11日本	ACCIDENT STATEMENT	District Co.
Date Of Report	27/10/2020 16:04	AS II
Date Of Accident	26/10/2020 18:00	
Exact Location Of Accident	MARINA COUNTRY CLUB CARPARK	
Country/State of Loss	SINGAPORE	
· · · · · · · · · · · · · · · · · · ·	DETAILS OF OWN VEHICLE	Davis
Vehicle Registration Number	SMU269C	3 18 17
Insured/Policyholder		
Name Of Registered Owner	ONG CAI PING, JOVAIL	
NRIC No	SXXXX715J	
Email Address	ADMIN@MYCAR.SG	
Mobile Phone No	(LOCAL) +65-91289623	
Alternative Phone No	OTHERS-91289623	
Vehicle Particulars		
Manufacturer	MEDGEDEG DENZ	

Manufacturer	MERCEDES-BENZ

Model GLB200 AMG LINE PREMIUM PLUS AUTO

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 PRIVATE CAR

Vehicle Category

Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number

Cover Note Number MPC202000427CN

Driver

Name of Driver HU HARPENG NRIC No SXXXX350J Date Of Birth 18/09/1984 Occupation INDOOR Date Of Driving Pass 11/04/2017

Driving Experience 3 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91289623

Fax Number

Contact Number OTHERS_01280623 Address

BLK 128 BEDOK RESERVOIR ROAD

#08-1303

Postcode

470128

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

SPOUSE

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)

2

involved in the accident

NO

Was any body injured in the Accident? 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)

1

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

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SMP1581U

Vehicle Make/Model/Colour

TOYOTA ALTIS

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)

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 aforesald.
- 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)
 - (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 fincluding their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- 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:

ONLY PRODUCE A CO.

Driver's Signature (if driver is not the policyholder)

Date & Imie:

Name

HIRCH IN The

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT On the stated atme and date, I was travelling on my vehicle at maring country club carport. While I was driving straight on my vehicle, Suddenly vehicle B care revening out of the capaix tot and alimided onto my vehicle. DECLARATION We decline the foregoing particulars are true in every respect.	SKETCH PLAN	MARINA COU	wary aug	CARPORK	
on the stated ittme and date, I was travelling on my vehicle at maring country club carpart. While I was driving straight on my vehicle, suddenly vehicle B came reversing out of the corpark for and collided onto my vehicle.					P) SMU 2696 \$25MP 1581 U
maring country club carport: while I was driving straight on my vehicle, Suddenly vehicle B came reversing out of the corpore for and collided onto my vehicle.					Section Committees Telephone (Fig. 1)
Suddenly rehicle B came reversing out of the corpore for and collided onto my vehicle.	on the sta	ted itime and o	late, I was	travelling on m	y vehicle at
DECLANATION	Suddenly severe				
DECLANATION		15 came reverting	g out of the c	arpank lot and coli	ided onto my
Tolicyholder's Signature Driver's Signature Uli driver is not the policyholder) Union & Time: Uli driver is not the policyholder) Union & Time:	We declare the foregoing parameters of the foregoing param	Dever's Signature	t	Bayberne Contro P	21/19/2017

Date of Accident	26 Oct 20 20 Accident Time: 18:01 (24-HR-Format)
Accident Place	: Marina Ray
Vehicle Reg. No. (Car Plate No.)	SMU 269 C
Vehicle Make/Model	:_ Merz GILBZOO
Insurance Company	Chira Taiping Policy No.
Owner or Company Name /IC No.	: Ong caiping Jovail \$8703715]
Owner or Company Contact No.	:Owner's HpCompany Tel
DRIVER'S Name / IC No.	: Hu Harpeng S8465350]
DRIVER'S Date Of Birth	18 8 ep 1984 DRIVER'S License Pass Date 11/04/2017
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others:
DRIVER'S Address	: BIK 128 Bedok Reserveir Rd #08-1303 .
DRIVER'S Contact No./ Alt No.	:1) 9128 9623 2)
DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address	: Admin @ my car. sg
Weather & Road Surface	: CLEAR & DRY \RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including D	niver):
Was there any video Captured by co Exact purpose for which vehicle wa	ar camera. YESANO as being used at the time of accident: Private use \ Work purpose
Other !	Party Driver's Particular (if auv)
Vehicle Reg. No: SMP1581U	Vehicle Reg. No:
Vehicle Make Model: Toyota A	Vehicle Make\Model:
Name Driver:	
IC No. Driver;	IC No. Driver:
Driver's Contact & Add:	Driver's Contact & Add

. .



Vehicle Registration Details

Current Propellant	PREMIUM PLUS AUTO Chassis Na.	Vehicle Type
Vehicle No. SMU269C	Make/ Model MERCEDES BENZ /GLB200 AMG LINE	Vehicle Scheme

Owner's Details

Owner Name:

ONG CAI PING, JOVAIL

NRIC/Passport/Company Cert No.:

S8703715J

Mailing Address:

Owner ID Type:

Singapore NRIC

Registered Address

APT BLK 128 BEDOK RESERVOIR ROAD

#08-1303 SINGAPORE 470128

Birth Date

06 Feb 1987

Registration Details

Previous Vehicle No.:

Effective Date of Ownership:

24 Sep 2020

Original Registration Date:

24 Sep 2020

No. of Transfers:

Registration Date:

24 Sep 2020

IU Label No.:

1220068357

Vehicle Specifications

Engine No.:

28291480306982

Chassis No.:

W1N2476872W034656

Year of Manufacture:

Primary Colour:

2020

White

Secondary Colour: Passenger Capacity: Engine Capacity / Power Rating: Maximum Power Output: 1332 cc/-120.0 kW (160 bhp) Max Unladen Weight: Maximum Laden Weight: 1555 kg 2285 kg Vehicle Attachment 1: Vehicle Attachment 2: No Attachment Vehicle Attachment 3: Additional Registration Fee (ARF) and COE Information Additional Registration Fee Rate: Open Market Value: First \$20,000.00 (100%), next \$25,125.00 \$45,125.00 (140%)Actual ARF Paid: Vehicle Lifespan Expiry Date: \$55,175.00 No Lifespan OPC Cash Rebate Eligibility: QP during COE Bidding Exercise: No \$38,802.00 COE No.: COE Expiry Date: 2020090103001087W 23 Sep 2030

COE Category:

B - Car above 1600cc or 97kW (130bhp)

Quota Premium (QP) / Prevailing Quota Premium:

\$38,802.00 / -

QP (Regn Cat): \$38,802.00

PARF Rebate Details

PARF Eligibility:

Yes

Minimum PARF Benefit:

\$27,587.00

COE Registration Category:

B - Car above 1600cc or 97kW (130bhp)

Actual QP Paid

\$38,802,00

PARF Eligibility Expiry Date:

23 Sep 2030

Vehicle Emissions Details

CO2 Emission:

CEV/VES Rebate Utilised Amount:

134.00 (g/km)

2

CO Emission:

HC Emission:

0.131300 (g/km)

0.022400 (g/km)

NOx Emission:

PM Emission:

0.018300 (g/km)

0.000000 (mg/km)

Message:

To renew the COE, the Prevailing Quota Premium payable is that of Category B.

Printed on 12 Oct 2020 15:33:42

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ORIGINAL

MOTOR COVER NOTE

COVER NOTE NO .:

MPC202000427CN

AGENT CODE:

AN0687A

The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 183) Republic of Singapore; or

The Road Transport Act 1987 of Malaysia; or

The Agreement between the Minister of Finance (Singapore) and the Motor Insurers Bureau of Singapore dated 72 February 1975, or

The Agreement between the Minister for Transport (Melaysia) and the Motor Insurer's Bureau of West

Malaysia dated 30 North 1992;

And any subsequent revisions to the above Acts and Agreements.

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule is hereby HELD COVERED under the terms of the Company usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which cases the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

A STATE OF THE STA	
INSURED	ONG CAI PING, JOVAIL
MAKE/MODEL OF VEHICLE	Mercedes Benz GLB 200 AMG (7-SEATER)
YEAR OF MANUFACTURE	2019
YEAR OF REGISTRATION	2020
ENGINE NO.	28291480306982
CHASSIS NO.	W1N2476872W034656
ENGINE CAPACITY/TONNAGE	1332
TYPE OF COVER	Comprehensive
SUM INSURED	MARKET VALUE
PERIOD OF INSURANCE	FROM: 24/09/2020 TO: 23/09/2021
EXCESS	Named Drivers Ex Sect. I : 3\$500.00
AUTHORISED WORKSHOPS	NO NO
HIRE PURCHASE CO.	UNITED OVERSEAS BANK LIMITED

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)

Not valid unless counter signed by Authorised Agent CHINA TAIPING INSURANCE (SINGAPORE) FIE. LTD.

CREDENCEL INSURANCE AGENCY

Agent Name & Date

Authorised Signature

PREMIUM PAYMENT WARRANTY

Per Individual Customer: Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid

For Non-Individual Costomer

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within Andays on inception/renewal/endorsement. For all other cases, the premium is full should be paid before incoption.

IMPORTANT NOTICE: THIS COVER NOTE IS VALID FOR JODAYS FROM 23-09-2020

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 🛱 3 Anson Road #16-00 Springleaf Tower Singapore 079909

C63896111

6222 1033

@www.sg.cntaiping.com