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TP Particulius: Veh No:	577 85°3 P.	INC (	)/Non-INC( - )	1000	
Owner / Driver: (	001 830211		Tel:	· ,	
Policy No: ( ) Po	criod: (	)	Cover Type: (		
Confirmed by : (		Date:	Time:	)	
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	Warranty: YES (	)/NO( )			
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SN0920CL000F / National Assessment Centre Services [408933] ENTRY DATE & TIME: 21/12/2020 15:45 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (21/12/2020 15:45 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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 aforesaid.

## **ACCIDENT STATEMENT**

Date of Submission	21/12/2020 15:45 (SGT)
Date of Accident	20/12/2020 17:20 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE B4 THOMSON EXIT
Country/State of Loss	Singapore

# **DETAILS OF OWN VEHICLE**

Toyota

Vehicle Registration Number	SJT7757E
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	OW BOON LEONG
NRIC No	SXXXX114B
Email Address	LEONGTULIU@GMAIL.COM
Mobile Phone No	(Phone) +65-97308763
Alternative Phone No	+65-97308763

## VEHICLE PARTICULARS

Manufacturer

Model	ALTIS
Variant	1
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire

#### INSURANCE COMPANY

Name of Insurance Company	Tokio Marine
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	20-MJ001886-R01
Cover Note Number	

#### DRIVER

Name of Driver	OW BOON LEONG
NRIC No	SXXXX114B

Date Of Driving Pass	29/03/1979
Driving experience	41 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97308763
Alt. Phone Number	+65-97308763
Email Address	LEONGTULIU@GMAIL.COM
Address	
	BLK 115 BEDOK NORTH RD #09-287
Address complement	*
Postcode	460115
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	•
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
	•
Insurance Company of Other Vehicle Owned by Driver	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions	DRIZZLING
Road Surface	Dry
	3312
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s)	3
soliciting/offering accident claims assistance?	No
PASSENGER 1	
Name	UNKNOWN
Gender	Female
CONTROL	Terriale
PASSENGER 2	
Name	UNKNOWN
, 1 <u>. 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 </u>	Female
Gender	remale
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	
ii yes, against wildin:	
CIRCUMSTANCES OF ACCIDENT	
REFER TO STATEMENT.	
ATTACHMENT(S)	
VI VIS. S. NEWSCHIE HAS UN NEW	
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	R VEHICLE PROPERTY 1
Vehicle Registration Number	SJT8503P
Vehicle Manufacturer	
Vehicle Model	

Vehicle Colour	
Vehicle Category	Private car
Name of Driver	
Contact Number	
Address	-
Address complement	
Postcode	: <u>₩</u> :
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	3 <b>4</b> 7
No. Of Passenger (Including Driver)	-

# INJURED PERSONS DETAILS

# INJURED 1

Name of injured person	OW BOON LEONG
Address	·
Address Complement	
Post Code	
Approximate Age Years Old	
Injuries Sustained	BODY
Injured person in which vehicle?	SJT7757E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

#### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel

Sketch Plan

| A = S3T 7757 E | B = S3T 8503 P | PIE B4 Thomson Exit.

# Describe Circumstances of the Accident

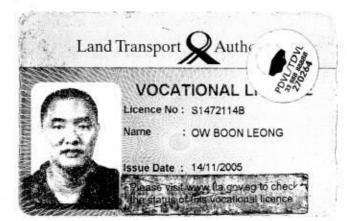
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## Declaration

We declare the foregoing particulars are true in every respect.

A





REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1472114B

Name





OW BOON LEONG

胡文良

CHINESE Date of Birth

13-05-1961 Country of Birth SINGAPORE

72114

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

PASS DATE

Class 2B Motorcycles not exceeding 200 cc Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

Class 4A Omnibuses

23 Sep 1980 29 Mar 1979

23 Sep 1980

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

Type

Description

Issue Date

02

TAXI VL

28/12/1995

Joence No: S1472114B

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1025088



NAC No. S1472114B



Blood Group Date of issue 13-06-1993



BIK 115 Bedok North Rd # 09-287

1.1 ...

# Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



# 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) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: 20-MJ001886-R01 (Private Motor Car)

1. Index Mark and Registration Number

SJT7757E

Chassis No.: MR053REH104544216

of Vehicle

2. Name of Policyholder

OW BOON LEONG

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

25/02/2020

4. Date of Expiry of Insurance

24/02/2021

5. Persons or Class of Persons entitled to drive\*

Any person who is driving on the Policyholder's order or with their permission.

The hirer.

Any other person who is driving on the hirer's order or with his/ 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

#### Limitations as to use\*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

# IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 2214DDA

Insurance Plan:

Comprehensive Approved Workshop Plan

Limit for total loss or theft:

Prevailing Market Value Own Damage Claims

SGD 2,000

Policy Excess:

Excess-Third Party (Sect II)

SGD 2,000

Young/Inexperienced Driver

SGD 1,500

(In Addition To Own Damage Claims Excess)

Financial Interest:

Windscreen Excess SGD 100 HENLY ENTERPRISES CO. PTE LTD

Tokio Marine Insurance Singapore Ltd.

# ACCIDENT STATEMENT

AC	CIDENT DATE: 20/12/20	_)(DD/MM/YYYY), TIM	NE: 17 . 20 1/HH:MM	
	CATION: PIE B4 +4	ousen Grit	) (*** ********************************	
	1. DETAILS OF VEHICLE	J. 4 -		
		SJT77576		
	b)INSURANCE COMPANY:	+ 1		
	C)POLICY NUMBER:	1 1		
	d)POLICY TYPE: (COMPREHEN	ISIVE / THIRD PARTY / T	'HÎRD PARTY FIRE &THEFT)	
	e)MAKE & MODEL: Toya	74 A1.3 1.6		
	f)TYPE:(SALOON / COUPE / MI g)VEHICLE CATEGORY:(PRIVA	TE / COMMEDCIAL /A	OTORCYCLE / OTHERS)	
	h)PURPOSE OF USING AT ACC	IDENT TIME:	MOTORCYCLE)	8
	I) ARE YOU CLAIMING UNDER Y	OUP OWN INSURANCE	E MESINOI	10 (
	IF NO, PLEASE STATE (THIRD P.	ARTY CLAIM / REPORT	ING ONLY)	
2.	INSURED / POLICY HOLDER			9
	AINAME: OW BOOK	Leong	(MALE / FEMALE)	
	b) NRIC/FIN/PASSPORT: c) ADDRESS:	cc	NTACT: 97308763	
	CJADDRESS			
	* CONTINUE TO 3.d IF DRIVER A	ISO POLICY HOLDER	· · · · · · · · · · · · · · · · · · ·	
tho of passanga	DRIVER	LIGOT OLICIT HOLDER		
(Including driver)	a)NAME: As A6	, ve	(MALE / FEMALE)	
(3)	DJAKIC/FIN/PASSPORI:		NTACT:	
	c)ADDRESS:			133
FF.	*d)DATE OF BIRTH: (/	/ Upp have no		
3.00	e)OCCUPATION: (INDOOR / OL	ITDOOR!	YY)	
	f) YEARS OF DRIVING EXPRERIEN	CE:	U 8	
4.	WAS DRIVER AN EMPLOYEE O	F THE INSURED'S CO	OMPANY? (YES / NO)	97
	IT NO, KELATIONSHIP OF THE	DRIVER WITH INCL	IDED.	
5.	GIWEATHER CONDITION: (CLEAR	R / RAINING / OTHERS	drizzling	
6.	b)ROAD SURFACE: (DRY / WET / WAS ANYBODY INJURED (YES / N	OTHERS		
7.	a) REPORTED TO POLICE (YES / N	O) Driver.		
	IF YES, PLEASE STATE WHICH PO	LICE STATION:	\$5	
dr. of by -	THIRD PARTY VEHICLE			
to of passenger	a) VEHICLE NUMBER: SJ	1 8203 B WOD	EL:	
Induding driver)	b) DRIVER'S NAME:  c) NRIC/FIN/PASSPORT:			
() 9. 1	HIRD PARTY VEHICLE	CON	ITACT:	
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VIDEO = Yes.