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TP Particulars: Veh No: SJT	8804 X		n-INC(-)		-
Owner / Driver: (Tel:)	6011803
Policy No: () Period:	() Cover	Гурс: ()	
Confirmed by : (Dat	e:.	Time:)	
Insured/Driver Liability: (%) [Note	-Est. Status (WO):	N: 0-20%; P:	21-79% P; 8d-1	00%]	
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2) QC Check / Post Repair Inspection				-	
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SN0920CL000M / National Assessment Centre Services [408933] ENTRY DATE & TIME: 21/12/2020 17:54 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (21/12/2020 17:54 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 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 17:54 (SGT)
Date of Accident	21/12/2020 11:30 (SGT)
Exact Location of Accident	537 Ang Mo Kio Ave 5, Block 537, Singapore 560537
Additional Location Information	
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number	 GBJ6916S	

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	THE DELIVERY SOLUTIONS PTE LTD
Company Reg No	2XXXXX306D
Email Address	BRYANBENG24@GMAIL.COM
Mobile Phone No	(Phone) +65-93875724
Alternative Phone No	+65-93875724

VEHICLE PARTICULARS

Manufacturer

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

INSURANCE COMPANY

Name of Insurance Company	MSIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	A 300332351 MKC
Cover Note Number	

DRIVER

Name of Driver	YEO TIAN SOON
NRIC No	SXXXX103Z

Date Of Driving Pass	16/09/2019
Driving experience	1 YEAR AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93875724
Alt, Phone Number	7
Email Address	BRYANBENG24@GMAIL.COM
Address	BLK 550 AMK AVE 10 #16-2212
Address complement	A CONTRACTOR CONTRACTOR IN CONTRACTOR CONTRA
Postcode	560550
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
(94.00)14(11)1(11)1(11)1(11)1(11)1(11)1(11)1	(¥)
Insurance Company of Other Vehicle Owned by Driver	8.48
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry
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)	1
Has the driver been approached by unknown person(s)	t.
soliciting/offering accident claims assistance?	No
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 within:	
CIRCUMSTANCES OF ACCIDENT	
REFER TO STATEMENT.	
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	R VEHICLE PROPERTY 1
Vehicle Registration Number	SJT8804X
Vehicle Manufacturer	-
Vehicle Model	190
Vehicle Variant	·
Vehicle Colour	(6)
Vehicle Category	Private car
Name of Driver	#
Contact Number	•
Address	-
Address complement	•
Postcode	•
(4.2)	

Nature Of Damage	*******************************	
Details of property damaged in accider	nt	
No. Of Passenger (Including Driver)		

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	YEO TIAN SOON
Address	92 5 0
Address Complement	(*)
Post Code	3. * 3
Approximate Age Years Old	
Injuries Sustained	BODY
Injured person in which vehicle?	GBJ6916S
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 Form must 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>.
- 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.
- 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.
- 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:
 - 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:
 - 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.

THE DELLAR SOUTH

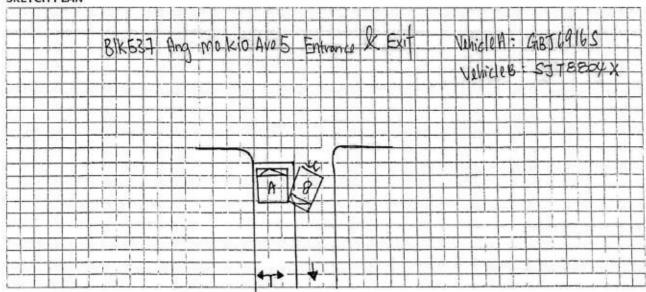
Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

Policyholder's Signature Date & Time:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

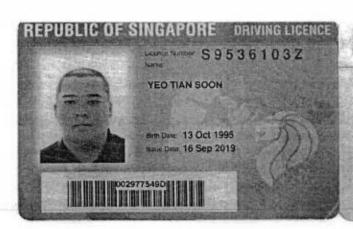
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beging particulars are true in every respect.

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

Reporting Centre Personnel's Signature

Name:



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$9536103Z





YEO TIAN SOON

順

杨 天 CHINESE 13-10-1995 Country of birth

895361037

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

Motor cars with unladen weight =< 3000kg with >< 7 16 Sep 2011 yehicles with unladen weight >< 2500kg

16 Sep 2019

26-03-2010

APT BLK 550 ANG MO KIO AVENUE 10 \$16-2212 SINGAPORE 560650

NP 428A





MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co.Reg No. 200412212G GST Reg. No. 20-0412212G
A Member of MS&AD INSURANCE GROUP

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

COMMERCIAL VEHICLE Comprehensive

Certificate No.

A 300332351 MKC

Excess: SGD600

Windscreen Excess: SGD100

- Index Mark and Registration Number of Vehicle GBJ6916S
- Name of Policyholder

The Delivery Solutions Pte. Ltd.

- Effective Date of the Commencement of Insurance for the purposes of the Act 17/07/2020
- Date of Expiry of Insurance 16/07/2021
- 5. Persons or Classes of Persons entitled to drive*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

*Provided that the person driving is permitted in accordance with the licensing or other laws or 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 *

Use in connection with the Policyholder's business. Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. Use for social domestic and pleasure purposes. The Policy does not cover

- (1) Use for hire or reward or for racing pace-making reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
- Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

Craig Ellis Chief Executive Officer

Date of Accident	: 3 1 12 30 Accident Time: 1136 hs (24-HR-FORMAT)
Accident Place	: BIK537 Ang Mo Kio Ave 5 Entrance K Exit
Vehicle Reg. No (Car plate No.)	: G1856916 S Vehicle Make/Model: Toyota Hiace
Insurance Company	Policy No. A 30033 2351 MKC
Name of Registered Owner	: Company/Individual The Delivery Solutions Pte. Ltd.
ID of Registered Owner	: Co Reg No: 361910306D Owner's NRIC No:
	: Co Contact No: Owner's Contact No:
DRIVER'S Name	: Yeo Tian Soon DRIVER'S NRIC No: 595361032
DRIVER'S Date of Birth	: 13 -10 - 1995 DRIVER'S License Pass Date 16 Sep 2019
Relationship bet, Owner & Driver	Q 101-
DRIVER'S Address	: APT BIK 550 Ang Mo Kio Avenue 10 # 16-2212 S (560550)
DRIVER'S Contact No./ Alt No	
DRIVER'S Occupation	: INDOOR \OKTOOR (eg. working inside or outside of an ofc)
Email Address	: bryan beng 24 @ gmail. com
Weather & Road Surface	: CLEAR & DRY RAINING & WET VAFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including	g Driver): 01 Passenger Name: Gender: M/F
	e was being used at the time of accident: Private use \ Work purpose
and the second	Other Party Driver's Particulars (if any)
Vehicle Reg No. 237	
Vehicle MakelModel;Hondo	
Name DRIVER:	
IC No. DRIVER:	
DRIVER'S Contact & add	DRIVER'S Contact & add:
1447 A F 644	Other Party Driver's Particulars (if any)
Vehicle Reg No:	
Vehicle Makel Model:	Vehicle Makel Model:
Name DRIVER	Nama DRIVER
M No DRIVER	IC No DRIVER
11 BELVER 15 Contact & said	DRIVER'S Context & edd