I I I I I I I A I A I A MANAGEMENT I I I I I I I I I I I I I I I I I I I	D 1011111111111111111111111111111111111		WO 2009000		
VATIONAL Assessment Centr	Jeb description	1 1 Jan 2001 ,	Date &Time Compl	eted ·	Done by
Date In:0 12 2020 14 5	SAS c-filling	•			
RET NO. 21811 (1) 200 (45 72/4	E-mail (Ajala san	AIC thu)		-	
Veh Nor (JA) ALOOK	I-Motor Claim				
001 08/0/2020 17/30	I-Motor W/O (W		TP (hrs)		
OD (TP)! Reporting Only					
	I-Photo Upload	10			· · ·
7/98 C	Assessment/Surv				
TP Insurer:	Ass't Report by I	7nx/Handl	Owner/Wish		
Proforced Wittp / INC Assign Wittp / QW: (Telt	Fax!	
P Particulars: Veh Nor S	KZ94634	. INC(.)/Non-INC(<u>). </u>	7
Owner/Driver: (Tel:	<u>. </u>	
Policy No: () Po	sriod: ()	Cover Type: (1
Confirmed by a (Dates.	Times	PO-100%	1
Insured/Driver Liability: (%)	Note-Est. Status (WC		0%; P: 21-79%. P	. 80-1007	
Year of Registration: ())\NO()		F 7 - 11 - 17
Excess: (\$) Londing: \$1,	000 ()/\$2,000 (THE PROPERTY OF THE PARTY OF TH	758 May	Comment
2000年1月1日1日日日本大学公司共和国共和国共和国	位为代码。在沙理和沙理的	医院为特别的	ACMOUNTACTOR OF	EX STORY	151.7
) Walle-In Customar : Customer's Inf	ormation strictly Confl	dential & St	Helly NO refer of ref		,
) Total Loss Case : to e-mail Yasu	er URGENTLY.		3, ", ,7	,	·)
Drive-In ()/ Towed-In (); Invoice	et VES()/NO	()(owing Co: (' .		
			The second secon	ATTENDED TO STATE OF THE PARTY	MATERIAL PROPERTY.
	TOTAL TOTAL STATE OF THE STATE				Allena Pro-
Apply for Transport Allowance ()/	Courtesy Car ()				Alegan py · ·
	Courtesy Car ()				e Vedenation
2) QC Check / Post Repuir Inspection	(·)				Canadia.
2) QC Check / Post Repuir Inspection	(·)				Mana V
() QC Check / Post Repuir Inspection	(·)				All Sand Da
OC Check / Post Repuir Inspection Opload Resurvey Photo [Repuir Cost > 1 Injury:	(·)				Mans by
OC Check / Post Repuir Inspection Opload Resurvey Photo [Repuir Cost > 1 Injury:	(·)				AND SAB DE LA CONTRACTION DE L
OC Check / Post Repuir Inspection Opload Resurvey Photo [Repuir Cost > 1 Injury:	(·)				Manu
) QC Check / Post Repuir Inspection) Upload Resurvey Photo [Repuir Cost > 1 Injury:	(·)				AND SALES
) QC Check / Post Repuir Inspection) Upload Resurvey Photo [Repuir Cost > 1 Injury:	(·)				
OC Check / Post Repair Inspection Opload Resurvey Photo [Repair Cost > 1 Opload Resu	(·)				
OC Check/Post Repair Inspection Upload Resurvey Photo [Repair Cost>] Injury:	(·) 3000] ()				
VA200076	(·) 3000] ()	AltiAssida	The porting (\$30);		
OC Check / Post Repair Inspection Outland Resurvey Photo [Repair Cost > 1 Injury:	(·) 3000] ()	AIL Acades	Illebording (220%) Americanist (2100) Americanist (2100)	THO (TIO)	
VA200016	(·) 3000] ()	All Asalder DAI Towing Tri Follow	I limporting (330); Asserment (3100); Free	100 (cdo) Se0743 1110	
VA200016 Well-out Resurvey Photo [Repuir Cost > 1 Out of the control of the con	(·) 3000] ()	All Academ DAI Dane PT: Follow PT: Follow	t Reporting (330); Asserment (5100); Fireough Survey (Resurvey transit Unit Only (Wall to	100 (110) \$40/210 \$110 \$100 \$100 \$100 \$70	Manual A twoley
VA200016 Well of the control of the	(·) 3000] ()	ARI Academi DAI Dannis PT: Follow- Fornialmina OTR: Re-lam	The Sarvey (Reservey through Survey (Reservey) (Reserve) pilons & EMRT Survey	100 (cdo) Se0743 1110	Manual A twoley
VA200016 Well of the control of the	(·) 3000] ()	All Assider DA I Danner DF: Follow- For realmine TR: Re-lasp NI: Idas DA NFUC Addit	t Reporting (330); Asserment (5100); Fireough Survey (Resurvey transit Unit Only (Wall to	\$60,245 \$40,245 \$110 \$40,245 \$110 \$150 \$20,245 \$110 \$75 \$160	Manual A twoley
VA200016 WA200016 Well-report Report Inspection MA200016 Well-report Report Inspection Well-report Report Inspection WA200016 Well-report Report Report Inspection WA200016 Well-report Report Report Inspection WA200016 Well-report Report Report Inspection WA2000016 Well-report Report Report Inspection WA200016 Well-report Report Report Inspection WA200016 Well-report Report Report Report Inspection WA200016 Well-report Report	(·) 3000] ()	All Academ DAIL Academ DAIL Academ DAIL Tollow- PTI Follow- FOI Balling OTH Re-larp NI 1 Idas DA DNI 1 Caurles	t Reporting (330); Asserment (5100); Firedigh Survey (Resurvey intend the Control (1911); Intelligible of the Control (1911); Intelligible	UNG (210) S 4075 (310) S 4075 (310) Jen 2000) 77) , 3160	ALIESS ATAME
NA2(00076 Injury: MA2(00076 Injury: Interiores we require the pair Cost > 1 Injury: Interiores we require the pair to pa	(·) 3000] ()	All Academ All Academ DAI Danny Pri Follow- For walning OTR: Re-lamp ON: Idae DA ON: Courter No: Repely	The porting (330); Asserment (3100); Free Through Eurycy (Resurvey); Island INC Only (Yall 10); Island Sarvices; y Car/Tpt Allowance Consultation	Jan 2000) 3100 3100 3100 3100 3100 3110 3110	Tahu Vadil
2) QC Check/Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost> \$ Injury: Delegions CA (pr)	(·) 3000] ()	All Academ All Academ DA I Dame OFF: Follow- For vialmine () TR: Re-larp () NI: Idae DA I) hruc Addi Oh; NS: Courter NS: Uspeli	The porting (330); Asserment (3100); For through Survey (Resurvey trainal INC Dairy (Waf 10 islies) **SMRT Survey (Resurvey trainal INC Dairy (Waf 10 islies) **SMRT Survey (Resurvey islanal Survices) **Conf Tpi Allowanus Consultation pair luspection	100 (210) \$40/243 \$1120 \$10	Tahu Yadil
MA2(00076 West Owner: Outstanding the property of the proper	(·) 3000] ()	All Academ All Academ DA I Dame OFF: Follow- For vialmine () TR: Re-larp () NI: Idae DA I) hruc Addi Oh; NS: Courter NS: Uspeli	The state of the s	100 (210) \$40/243 \$1120 \$10	And I had I

SN0820C90006 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 09/12/2020 14:57 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (09/12/2020 14:57 (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
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

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. 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

09/12/2020 14:57 (SGT) 08/12/2020 17:50 (SGT) Bedok South Ave 3, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBA6400K

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No. Alternative Phone No

Yes D.T. TRANSPORTER 5XXXX145B dt_transporter@yahoo.com.sg (Phone) +65-98322506 +65-98322506

VEHICLE PARTICULARS

Manufacturer Model Variant 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? Vehicle Category

Volkswagen TRANSPORTER 2.0 TDI AT 7EH137

Employment

No - Claiming third party Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

China Taiping Insurance Comprehensive DMCVSNW00026272009

DRIVER

Name of Driver NRIC No

TAN YEOW SIANG SXXXX588E

Date Of Driving Pass	16/01/2003				
Driving experience	17 YEARS AND 11 MONTHS				
Gender	Male				
	(Phone) +65-98322506				
Alt, Phone Number Email Address					
	dt_transporter@yahoo.com.sg BLK 30 #30-332				
Address					
Address complement	GHIM MOH LINK				
Postcode	272030				
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					
	*				
Insurance Company of Other Vehicle Owned by Driver	*				
GENERAL INFORMATION OF THE ACCIDENT					
T	THE RESIDENCE OF THE PROPERTY				
Type of Accident	Collision - Head to Rear				
weather Conditions	DRIZZLING				
Road Surface	Wet				
OTHER INFORMATION					
Was any foreign vehicle involved in the accident?	No.				
Number of vehicles involved in the accident	No.				
	2				
Was anybody injured in the Accident?	No				
Was any injured conveyed to hospital by ambulance?					
Was any other material or property damaged?	Yes				
Number of Passengers (Including Driver)	1				
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No				
DETAILS OF POLICE ACTION					
Was the accident reported to the police?	No				
Was notice of intended Prosecution given?					
If yes, against whom?	No				
ir yes, against whom?	ē				
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?	No				
Was there any audio recorded?	No				
DETAILS OF OTHE	R VEHICLE PROPERTY 1				
SWEWS 122 H W DOS W					
Vehicle Registration Number	SKZ9963U				
Vehicle Manufacturer	Hyundai				
Vehicle Model	In Commence.				
Vehicle Variant					
Vehicle Colour					
Makinia Calanana					

Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category
Vehicle

Insurance Company Name
Nature Of Damage
Details of property damaged in accident
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 <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.
- 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.
- 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 (If driver is not the policyholder) / Date
Time

Sketch Plan

Driver's Signature (If driver is not the policyholder) / Date
8 Time

Towas V

NEW UPPER CHANSI ED.

GRACHOOK

RESTORATION

GRACHOOK

RESTORATION

GRACHOOK

RESTORATION

GRACHOOK

RESTORATION

GRACHOOK

GRACHOOK

RESTORATION

GRACHOOK

GRA

Describe	Circumstances of the Accident	

THE TALK SECTION
IT IS A WET ROAD AFTER A RAINING DAY.
I WAS TRAVIUMG TOWARD HEW UPPER CHANGE RD.
FRUNK BEDOK SOUTH AWE 3. I WAS STATIONARY POSTION
AS IT IS RED LIGHT AND WAITING FOR THE TRAFFIC
FIGHT TO TUPN GREEN. AS I WAS WAITING 7 CHECK
MY BUND SPOTS AND REAR VIEW HILBROR T HOTELS
A WHITE CAR SKZ9963U WAS HAVING HIGH REAM ON
AND THERE IS NO SIGHT OF THE CAR STANDING THOUSE
AS UYON SEEING I THIS HAPPENING T PREPARS TO YELF END
A BACK COLLISION FROM SKZ 9967U. T HAVE CHECK INT.
THE DRIVER OR SKZ 99634 WEATHER HE ANY INTLOY IND
ME IS PERFECTICT PINE. SO WE PROCEED WITH EXCHANGE
of DEIAICS.
SAFee Safe Safe Safe Safe Safe Safe Safe Sa

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time 09 12 20

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

MITHRS.

Mitnessed by Reporting Centre Personnel

1117HRS.

ACCIDENT STATEMENT

ACCIDENT DATE: (08 112 2000) (DD/MM/YYY), TIME: (17:50) (HH:MM) LOCATION: BEDOK SOUTH AVE 3 TRAFFIC 1. DETAILS OF VEHICLE GRA GOOK a) VEHICLE ·NUMBER: DINSURANCE COMPANY: CHINA CIPOLICY NUMBER: DMCVSNW 000 26272009 d)POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT) e)MAKE & MODEL: YOUKSWAGEN TRANSPURTER I)TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS) g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE) h)PURPOSE OF USING AT ACCIDENT TIME: WORKING I) ARE YOU CLAIMING UNDER YOUP OWN INSURANCE (YESTNO) IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY) 2. INSURED / POLICY HOLDER
AJNAME: DT TRANSPORTER CONTACT: 983225 bjnric/fin/passport: 530181458 TAH CHING ROAD 610322 CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER 4 Ho of passanger DRIVER DINAME: TAN YEUW SIANIG (Including driver) MALE / FEMALE) bINRIC/FIN/PASSPORT: 574165888 CONTACT: 98322506 30 GHIM MOH HMK 272030 "d) DATE OF BIRTH: (24/05/1974)(DD/MM/YYYY) e)OCCUPATION: (INDOOR / OUTDOOR) JAN 2003 FLOATE OF DRIVING PASS 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES! NO) IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: 5. a) WEATHER CONDITION; (CLEAR / RAINING / OTHERS_ b) ROAD SURFACE: (DRY / WET / OTHERS 6. WAS ANYBODY INJURED (XEST NO) 7. a) REPORTED TO POUCE (YES / NO) + IF YES, PLEASE STATE WHICH POLICE STATION: 8. THIRD PARTY VEHICLE 4 Ho of passenger a) VEHICLE NUMBER: SKZ9963U b) DRIVER'S NAME: DAVID LES MODEL: HUND (Including driver) c) NRIC/FIN/PASSPORT: 588017113 THIRD PARTY VEHICLE d) VEHICLE NUMBER: * No of passanger e) DRIVER'S NAME:

(Including driver)

f) NRIC/FIN/PASSPORT

email = DT_TRANSPORTER @ YAHOO. COM. SG

CONTACT



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Commercial

MZ300/C

SN

CERTIFICATE OF INSURANCE ter Vehicles (Test-Party Risks and Compensation) Act (Chapter 199) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1967 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

AN0421A

R

Cov. Type:C

GERTIFICATE No.

DMCVSNW000262720L9

Engine No.: CAA149524 Cha. No.:WV1ZZZ7HZBH098686

Index Mark and Registration

GBA6400K

Number of Venicle

AUTOSAFE

2 Name of Policy Holder

D.T. TRANSPORTER

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

12/05/2020

Excess Sect 1.

\$\$400.00

EX ON WINDSCREEN

\$\$100.00

4 Date of Expiry of Insurance

11/05/2021

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

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.

(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 1967 (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 roverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Issued By: VITESSE SOLUTIONS Authorised Officer

Authorised Signatory

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

\$6389.6111

₱6222 1033

www.sg.cntaiping.com