

Date In: 4/11/21 17:52	Job description	Date & Time Completed	Done by
Ref No: NAIMSG 21000087164	SAS e-illing		
Veh No: SLZ 9041T	E-install (within 3hrs, A/C 2hrs)		
DDA: 311/21 10:30	I-Motor Claim Form		
(1) (TP) Reporting Only	I-Motor W/O (within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksn		

Profund Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Vch No: SHD 6920P. INC () / Non-INC ()

Owner / Driver: () Tel: ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % [Note-Est Status (WO): N: 0-20%; P: 21-79%; P: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:

() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repolier.

() Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks	Done by
1) Apply for Transport Allowance () / Courtesy Car ()	
2) QC Check / Post Repair Inspection ()	
3) Upload Resurvey Photo [Repair Cost > \$3000] ()	

Injury: _____

Claimants Particulars	Invoice/Information Checked	Amount	Available
Driver/Owner:	1) AR: Accident Reporting (\$30)		30
Contact No:	2) DA: Damage Assessment (\$100)	INC (\$30)	
Damaged Portion:	3) TP: Towing Fee	\$40/\$45	
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey	\$120	
Auditors Comments:	5) FT: Follow-Through Survey (Resurvey)	\$30	
Est. It:	6) TR: Re-inspection	\$75	
	7) NI: Idao DA + SMRT Survey	\$160	
	8) NTUC Additional Services:		
	OP:		
	*NS: Courtesy Car / Tpt Allowance	\$5	
	*NG: Repair Co-ordination	\$10	
	*NT: Post Repair Inspection	\$25	
	*NB: DV / Collect Excess Coordination	\$5	
	TE (NIL): TP (Non INC) against INC	\$20	
	9) NI2: Idao Mobile	\$0	

Invoice dated _____ Fee Charged _____

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 Submission	04/01/2021 17:52 (SGT)
Date of Accident	03/01/2021 10:30 (SGT)
Exact Location of Accident	Teck Whye Ave, Singapore
Additional Location Information	TWDS BUKIT BATOK RD B4 JLN TECK WHYE EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ9041T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HITACHI CAPITAL ASIA PACIFIC PTE LTD
Company Reg No	1XXXXX399N
Email Address	JASONKCAPL@GMAIL.COM
Mobile Phone No	(Phone) +65-67341222
Alternative Phone No	(Office) +65-67341222

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Shuttle
Variant	-
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 - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	MSIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	G 300315982 MCY
Cover Note Number	-

DRIVER

Name of Driver	KWER TIAN SONG
NRIC No	SXXXX987A
Date Of Birth	30/09/1981
Occupation	Indoor

Date Of Driving Pass	08/04/2008
Driving experience	12 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97573403
Alt. Phone Number	-
Email Address	JASONKCAPL@GMAIL.COM
Address	BLK 610 SENJA RD #02-26
Address complement	-
Postcode	670610
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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 - Major/Minor Rd
Weather Conditions	AFTER RAIN
Road Surface	Wet

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) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210103/7016 & T/20210104/7012

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	SHD6920P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-

Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KWER TIAN SONG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY
Injured person in which vehicle?	SLZ9041T
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.
3. Information provided must be as truthful and accurate as possible. Any willful 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 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)**

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 sited outside of Singapore, for one or more of the above Purposes.

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

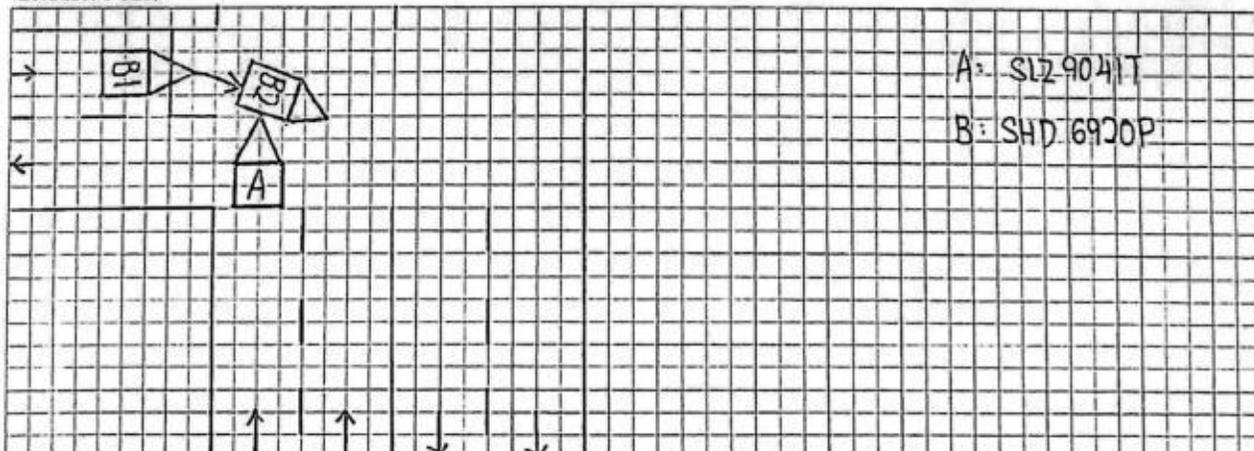
KELVIN CHANG (M)C
Manager
Vehicle Solutions
Total Vehicle Solutions Department

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SN0921140003 Vehicle Registration No: SLZ 9041T
Name (as shown in NRIC) : Kwer Jian Song NRIC/FIN/Passport No : S 8131987A
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Blk 610 Senja Road # 02-26 Singapore Singapore (670610)
Contact (Tel) : _____ Mobile No. : 9757 3403
Email Address : Jasonkcapl@gmail.com
Date of Accident : 03.01.2021 Time of Accident : 10:30 am
Place of Accident : Teck Whye Avenue towards Rukit Batok Rd (Before Jalan Teck Whye Exit)
Insurance Company: MSIG

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend Police Report (T/20210103/7016) to (T/20210104/7012)

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:



SINGAPORE POLICE FORCE



T/20210103/7016

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20210103/7016

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/01/2021 20:28		Vide Report No.: J/20210103/0116		Station Diary No.:	
Informant's Particulars					
Name of Informant: KWER TIAN SONG			Address: 610 SENJA ROAD #02-26 SINGAPORE 670610		
ID Type / ID No.: NRIC NO / S8131987A			Contact No.:		Mobile: 97573403
Nationality: SINGAPORE CITIZEN			Email: lenus831@hotmail.com		
Sex: Male	Age: 39	Date of Birth: 30/09/1981	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Sales worker nec (eg ship chandler)		Driving Licence Information: Class: 2A,3A		Date of Expiry: 03/01/2021	

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 03/01/2021 10:29	Type of Location: Straight Road
Location: TECK WHYE AVENUE				
Lamp Post Number: 15				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHD6920P	Car			Blue	Seriously Damaged	0
SLZ9041T	Car	HONDA	Shuttle	Black	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210103/7016

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20210103/7016

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLZ9041T	MSIG INSURANCE (SINGAPORE) PTE. LTD.	G300315982MCY	22/05/2020	21/05/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KWER TIAN SONG	ID No.	S8131987A
Related Vehicle	SLZ9041T (Car)	Contact No.	97573403
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2A,3A Date of Expiry: 03/01/2021
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 03 Jan 2021 at 10.29am, my car SLZ9041T was travelling along Teck Whye Avenue on the left lane towards Choa Chu Kang Road, on my way home. There was no traffic and suddenly a blue comfort taxi SHD6920P turn out from the minor road at Jalan Teck Whye towards Teck Whye Ave. The taxi did not stop at the stop line and proceed to make a right turn right after a black car in front of him moved off. Due to his reckless right turn, I was shocked and could not react in time My car then collided head onto the right of the taxi. It happened at lamp post 15. I have 2 videos exceeding 2MB.



**SINGAPORE
POLICE FORCE**



T/20210103/7016

3 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20210103/7016

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
LIM ENG KUAN, CLARENCE
Contact No.: 65476200

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

Date/Time:
03/01/2021 20:28

Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



T/20210104/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20210104/7012

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/01/2021 13:37		Vide Report No.: J/20210103/0116		Station Diary No.:	
Informant's Particulars					
Name of Informant: KWER TIAN SONG			Address: 610 SENJA ROAD #02-26 SINGAPORE 670610		
ID Type / ID No.: NRIC NO / S8131987A			Contact No.: Home/Office:		Mobile: 97573403
Nationality: SINGAPORE CITIZEN			Email: lenus831@hotmail.com		
Sex: Male	Age: 39	Date of Birth: 30/09/1981	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Sales worker nec (eg ship chandler)			Driving Licence Information: Class: 2A,3A		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 03/01/2021 10:30	Type of Location: Straight Road
Location: TECK WHYE AVENUE				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHD6920P	Car				Seriously Damaged	0
SLZ9041T	Car				Seriously Damaged	0



Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KWER TIAN SONG	ID No.	S8131987A
Related Vehicle	SLZ9041T (Car)	Contact No.	97573403
Hospital/Clinic	SENJA FAMILY CLINIC	Class of Driving Licence & Expiry	Class: 2A,3A Date of Expiry: NIL
Date	04/01/2021	Date	04/01/2021
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

Date 3/1/2021, Time 10.29am.

I was traveling along Teck Whye Avenue towards CCK road, sudden a Taxi (SHD6920P) came out from the minor road (Jalan Teck Whye) on the left, the taxi did not stop on the stop line and proceed to make a right turn after a black car move off in front of him. My car then collided head onto the right side of the taxi.

I feel pain on my neck area and consult a doctor at Senja Family Clinic and was given 3 days MC.



**SINGAPORE
POLICE FORCE**



T/20210104/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20210104/7012

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
LIM ENG KUAN, CLARENCE
Contact No.: 65476200

Authentication Stamp
NP168

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

Date/Time:
04/01/2021 13:37

Classification Of Case:



MSIG

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 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

**MOTORMAX PLUS
Comprehensive**

Certificate No. G 300315982 MCY

Excess : SGD1,500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle

SL29041T

2. Name of Policyholder

Hitachi Capital Asia Pacific Pte. Ltd.

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

22/05/2020

4. Date of Expiry of Insurance

21/05/2021

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 for the carriage of passengers or goods in connection with the Policyholder's business. Use for social domestic and pleasure purposes and business purposes 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.

(3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

* 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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP REFER TO MSIG.COM SG FOR LIST OF AUTHORISED WORKSHOPS.

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 : 03.01.2021 Accident Time: 10:30 AM (24-HR-Format) Exit)
 Accident Place : Teck Whye Avenue towards Bukit Batok Road (Before Jalan Teck Whye,
 Vehicle. No. (Car Plate No.) : SLZ 9041T Make/Model: Honda Shuttle 1.5G
 Insurance Company : MSIA Policy No: G 300315982 MCY
 Owner or Company Name /IC No. : Hitachi Capital Asia Pacific Pte. Ltd. (199400399N)
 Owner or Company Contact No. : _____ Owner's Hp 6734 1222 Company Tel _____
 DRIVER'S Name / IC No. : Kwer Tian Song (S 8131987A)
 DRIVER'S Date Of Birth : 30 Sep 1981 DRIVER'S License Pass Date 08 Apr 2008.
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: leasing.
 DRIVER'S Address : Blk 610 Senja Road # 02-26 Singapore 670610
 DRIVER'S Contact No / Alt No. : 1) 9757 3403 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : Jasonkcapl@gmail.com
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (including Driver): 1 Driver
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): Yes

Other Party Driver's Particular (if any)

Vehicle. No: <u>SHD 6920P (Vehicle B)</u>	Vehicle. No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

*** NEW - Passenger's name & gender:**