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SN08211D000C / National Assessment Centre Services [159721] ENTRY DATE & TIME: 13/01/2021 16:33 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (13/01/2021 16:33 (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 Date of Accident **Exact Location of Accident** Additional Location Information

13/01/2021 16:33 (SGT) 13/01/2021 07:40 (SGT) Lornie Hwy, Singapore

TOWARDS PIE (TUAS) NEAR KHEAM HOCK ROAD

Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SMG7660H

INSURED/POLICYHOLDER

Country/State of Loss

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No Alternative Phone No

No GOH THIAM LAI SXXXX521D gtl6945@yahoo.com.sg (Phone) +65-97593683 +65-97593683

#### VEHICLE PARTICULARS

Manufacturer Model Variant

Toyota Harrier

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

Private car

INSURANCE COMPANY

Vehicle Category

Name of Insurance Company Type of Coverage Fleet Policy

MSIG Comprehensive

Policy Number Cover Note Number

A 29148376 AT2

DRIVER

Name of Driver NRIC No

GOH THIAM LAI SXXXX521D

Date Of Driving Pass Driving experience Gender Mobile Number Ait. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	29/10/1992 28 YEARS AND 3 MONTHS Male (Phone) +65-97593683 +65-97593683 gtl6945@yahoo.com.sg BLK 262A COMPASSVALE STREET #11-121 - 541262 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Chain Collision Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other material or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 5 Yes No Yes 1
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Tampines Neighbourhood Police Centre (Phone) +65-18005871999 (Fax) +65-65871699 6 Tampines Ave 4 Singapore 529682 No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO POLICE REPORT T/20210113/2050	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?	Yes No No
DETAILS OF OTHE	R VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver	GBG8949A Commercial vehicle

Address	
Address complement	
Postcode	-
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-
DETAILS OF OTHER	VEHICLE PROPERTY 2
Vehicle Registration Number	GBJ2870R
Vehicle Manufacturer	-
Vehicle Model	R
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Commercial vehicle
Name of Driver	<u></u>
Contact Number Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	5
DETAILS OF OTHER	VEHICLE PROPERTY 3
DETAILS OF OTHER	VEHICLE PROPERTY 3
Vehicle Registration Number	GBD506M
Vehicle Manufacturer	-
Vehicle Model	•
Vehicle Variant	-
Vehicle Colour Vehicle Category	Commercial vehicle
Vehicle Category Name of Driver	Commercial verticle
Contact Number	
Address	% <del>-</del>
Address complement	: <b>.</b>
Postcode	2 <del>4</del>
Insurance Company Name	<del>-</del>
Nature Of Damage	•
Details of property damaged in accident  No. Of Passenger (Including Driver)	
No. Of Passenger (Including Driver)	-
DETAILS OF OTHER	R VEHICLE PROPERTY 4
Makish Designation Number	CDD2636H
Vehicle Registration Number  Vehicle Manufacturer	GBD2636H
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	•
Address	-
Address complement Postcode	-
Postcode Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	

Details of property damaged in accident No. Of Passenger (Including Driver)

### INJURED 1

Name of injured person	GOH THIAM LAI
Address	-
Address Complement	
Post Code	
Approximate Age Years Old	
Injuries Sustained	BACK AND NECK PAIN
Injured person in which vehicle?	SMG7660H
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

#### SKETCH PLAN

#### 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 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 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)
  - (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
- 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:
  - (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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Name:

NRIC/FIN No .:

SKETCH PLAN Lornie Highwab Twds PIE(Rus) Nuar Kream Hock Rol A SME 7660H E B 6B6 8949A D 16BJ 2870R A D) 6BD 506M 6BD 2636H B DESCRIBE CIRCUMSTANCES OF THE ACCIDENT kefor to Police Report 2050 2021011 DECLARATION I/We declare the foregoing particulars are true in every respect. En " The 1

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

WAR OL Sketch Florid Lines VS

Date of Accident	: 13-01-2021 Accident Time: 01-40Mm (24-HR-Format)			
Accident Place	: Lomie Hohnay Toward PIE ( Puar)			
Vehicle. No. (Car Plate No.)	SM 67660 H Make/Model: Two tarter 6 Ende			
Insurace Company	: MS16 Policy No: A 2914 8376			
Owner or Company Name /IC No.	pany Name/IC No. : 60H Thiam Lai (816975210)			
Owner or Company Contact No.	: 97593683 Owner's HpCompany Tel			
DRIVER'S Name / IC No.	: same as above			
DRIVER'S Date Of Birth	:16.05.1965 DRIVER'S License Pass Date 29.10-1992			
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others () WW			
DRIVER'S Address	: 26 LA Compassivale street \$ 11-121 s(541262)			
DRIVER'S Contact No./ Alt No.	:1) 9759 3685 2)			
DRIVER'S Occupation INDOOR OUTDOOR (e.g. working inside or outside office)				
Email Address : 9+16945@yahoo.com.sq				
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	priver): Muer on b			
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):   NUE Back Puin				
Other	Party Driver's Particular (if any)			
Vehicle, No: 616 8949A	Vehicle. No: 6BJ 2870R			
Vehicle Make\Model:	Vehicle Make\Model:			
Name Driver:	Name Driver:			
IC No. Driver/Contact:	IC No. Driver/Contact:			
	(B) 6BD 506m			
* NEW - Passenger's name	& gender: (6) 6BD 2636 M			
	(F) PRN 702011			





1 of 3

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

Report No. T/20210113/2050

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/01/2021 11:57		//ade:	Vide Report No.:	Station Diary No.: 60
Informa	nt's Partic	ulars		
Name of GOH TH	Informant: IIAM LAI		Address: APT BLK 262A COMPASSVA SINGAPORE 541262	ALE STREET #11-121
ID Type NRIC NO	/ ID No.: D / S16975:	21D	Contact No.: Home/Office: Mobile: 97593683	
National SINGAP	ity: ORE CITIZ	EN	Email:	base the near through the large services.
Sex: Male	Age: 55	Date of Birth: 16/05/1965	Type of Informant: Driver	VICE TO BOTH AND A STATE OF THE
Race: Chinese			Language: English	Institution / School Name:
Occupation: CIVIL SERVANT			Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident: Injury Attended by Police		Drink Drive; No	Date/Time of Accident: 13/01/2021 07:40	Type of Location Straight Road	
LORNIE HIGI Lamp Post No Weather:		Road Surface:			
Clear		Dry		Road Speed Limit:	
The state of the s					
Traffic Flow: One Way Type of Collis		Traffic Control: Not Controlled		raffic Volume:	

	Туре	Make	Model	Color	Condition	No of D
	Lorry (E)	ТОУОТА	DYNA	COLO	Slightly	No of Passenge 0
GBD506M GBG8949A	Lorry (D)	KIA			Slightly Damaged	0
GBJ2870R	Van (B)	FIAT	6,*		Committee of the Commit	0
SMG7660H	Car (0)	MITSUBISHI	FUSO		Slightly Damaged	0
SWIG / BOUR	Car (A)	ТОУОТА	HARRIER	Blue	Seriously Damaged	0



T/20210113/2050

3 of 3

Report No. T/20210113/2050

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

99 CONTINUATION OF REPORT

#### Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Reports Signature Of Informant: G/ Sgt 3 MUHAMMAD AZFAR®IN ALL Signature Of Interpreter: Date/Time: Not applicable 13/01/2021 11:57 Officer In Charge Of Case: Classification Of Case: TP/GIT/ Sgt 2 HO JIEKANG, IVAN SINGAPORE Contact No.: 65476170 Authentication Stamp NP168 SIGNATURE



T/20210113/2050

2 of 3

Report No. T/20210113/2050

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

CONTINUATION OF REPORT

#### Brief Details.

On the 13/01/2021 at about 0740hrs, I was driving my vehicle reg no SMG7660H along Lornie Highway towards Adam Road. The incident happened before the exit of Kheam Hock Road. I wish to state that the weather at that point of time was clear and the traffic volume was heavy. I was on the 2nd lane from the left, all vehicles there were moving slowly due to the congestion. I have came to a complete stop when suddenly a strong impact hit onto the rear of my vehicle. The impact was strong that have caused my vehicle to inched forward. I alighted from my car and discovered that it was a chain collision involving a total of 5 vehicles and my vehicle was the 3rd vehicle if chain. Traffic police and ambulance were at scene. The driver from vehicle no GBG8949A was conveyed to the hospital by the ambulance.

The last vehicle driver GBJ2870R informed the traffic police at scene that he accidentally stepped on the accelerator instead of the brakes which have caused the collision. I do not sustained any injuries so far. I am lodging this report for traffic police follow ups and also for my necessary insurance claims purposes.

Below are the vehicles involved in order (from the from):

- 1) GBD2636H
- 2) GBD506M
- 3) SMG7660H (my vehicle)
- 4) GBG8949A
- 5) GBJ2870R



MSIG Insurance (Singapore) Pte, Ltd. 4 Stenton Way, # 21-01, SGX Centre 2, Singapore 068807 Tel +65 6927 7898, Fax +65 6927 7800 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

### 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.

Form M.X.1 Individual Ownership Toyota DriveElite 360 Comprehensive

Certificate No. A 29148376 AT2

Excess: SGD700 Windscreen Excess: SGD100

- 1. Index Mark and Registration Number of Vehicle SMG7660H
- Name of Policyholder Goh Thiam Lai
- Effective Date of the Commencement of Insurance for the purposes of the Act 31/12/2020
- 4. Date of Expiry of Insurance 30/12/2021
- Persons or Classes of Persons entitled to drive

Goh Thiam Lai 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.
- Limitations as to use

Use only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

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.

All Claims related repair can be carried out at Borneo Motors (S) Pte Ltd or our authorised workshops. Windscreen Excess is waived at Borneo Motors (S) for windscreen related claims. This Policy includes Courtesy Car benefit.

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 offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

IAWE 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

for Chief Executive Officer

## > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

521D

Vehicle Details

Vehicle No.:

SMG7660H

Vehicle to be Exported:

No

Intended Deregistration Date:

31 Jan 2021

Vehicle Make:

TOYOTA

Vehicle Model:

HARRIER G GRADE

Primary Colour:

Blue

Manufacturing Year:

2018

Engine No.:

8ARZ133390

Chassis No.:

Open Market Value:

JTEKB3GH10J002748

Maximum Power Output:

170.0 kW (227 bhp) \$33,306.00

Original Registration Date:

31 Dec 2018

First Registration Date:

31 Dec 2018

Transfer Count:

0

Actual ARF Paid:

\$38,629.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

30 Dec 2028

PARF Rebate Amount:

\$28,971.00

Intended COE Rebate Details

COE Expiry Date:

30 Dec 2028

COE Category:

E - Open - all except motorcycle

COE Period(Years):

10

QP Paid:

\$30,959.00

COE Rebate Amount:

\$24,500.00

**Total Rebate Amount:** 

\$53,471.00

The information contained herein is correct as at 13 Jan 2021

OK