CS (1) 21000672 GV/3

SB0G211D0002 / Borneo Motors Pte Ltd ENTRY DATE & TIME: 13/01/2021 11:36 (SGT) SUBMITTED BY: Ashlyn Chng VERSION: 1 (13/01/2021 11:36 (SGT))



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 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 13/01/2021 11:36 (SGT) **Date of Accident** 12/01/2021 08:40 (SGT) **Exact Location of Accident** 1 Leonie Hill Rd, Singapore 239191 Additional Location Information LORNIE ROAD Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SMG7950X INSURED/POLICYHOLDER Is company? YEOH SEOW LING Name Of Registered Owner NRIC No SXXXX563G ODELIAYEOH@GMAIL.COM **Fmail Address** Mobile Phone No (Phone) +65-96396841 Alternative Phone No (Home) +65-96396841 VEHICLE PARTICULARS Manufacturer Toyota Model Previa Variant Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car **INSURANCE COMPANY** Name of Insurance Company MSIG Type of Coverage Comprehensive Fleet Policy A29137930 Policy Number Cover Note Number DRIVER Name of Driver **ODELIA YEOH HUAI-EN**

> SXXXX205Z 08/12/1993

Indoor

NRIC No

Date Of Birth

Occupation

Date Of Driving Pass	09/06/2014
Driving experience	6 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-82186416
Alt, Phone Number	•
Email Address	ODELIAYEOH@GMAIL.COM
Address	BLK 442 SIN MING AVE #05-423
Address complement	-
Postcode	570442
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Divor	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet
OTHER INFORMATION	
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?	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?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEM	ENT.
ATTACHMENT(S)	
Are accident photos available for attachment?	No
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	SLS1314X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN BOON KIANG
NRIC No	SXXXX097A
Contact Number	(Phone) +65-97994712
Address	-
Address complement	-
Postcode	-

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>.
- 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) 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 of 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: 13/1/2021

0840

Driver's Signature

(If driver is not the policyholder)

Date & Time: 13 1 2021

0840

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN			
		←	
			
		<u> </u>	
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	KAKBI		2
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-			
DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT		
	High to recommend the second of the second o		_
Due to heavy tratfi	c, it was raining, the c	ear at the back didn't notice	_
9		to my near. We came down -	10
check for damages.			+
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DECLARATION I/We declare the foregoing particula	ars are true in every respect.		
1 900	D:7		
Policyholder's Signature Date & Time: (ろんしンの)	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:	
0840	Date & Time: 13 11 2031	NRIC/FIN No.:	
,0510	0840		



Borneo Motors

Co. Reg No.: 196700086Z GST Reg No. : MR-8500000-9

17 UBI ROAD 4

SINGAPORE 408611, Tel no.: 6631 1188



3-4 Days.

12 After report photo>
Gue aing - 8288 or 52

TIMATE (8/1/202)

			EST	IMATE	(8/	1/20	2 (
Account Details			Account No).	Customer Details				
China Taiping Insurance (S) Pte Ltd 3 Anson Road #16-00 Springleaf Tower Singapore 079909 Attn: Motor Claims Dept		S100000	3 / ICCI1	Mr Yeoh Se	eow Ling				
		Document I	No.	442 Sin Ming Avenue #05-423 Singapore 570442					
			Document 13/01/20		Mobile: 963	396841			
Year	Model	Variant	Reg. Date	Reg. Date Reg. No. K		Wip No.	Order No. / Remarks		
2018	ACR50R	GFXSK E1	31/12/2018	31/12/2018 SMG7950X		20637	67/TP/SMG7950X		
Chassis No. Engine No.		Terms	SA / Counter		Vehicle In	Collected On			

JT	EGI	D56M707166514 2AZ1A88110 60 Sam San Joi	13/01/2	021 8.50	//	0.00
L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
1	Z	BP-SUNDRY-MS SUNDRIES TP CLAIM TP-SLS1314X ACC DATE:12/01/2021 DRIVE IN:13/01/2021 DATE-IN: DATE SURVEY: NO OF REPAIR DAYS: BY: AUTHORISED ON:				30.00
2	S	PSP PER PANE LABOUR FOR PLATINUM SHINEPRO & SHINE PER PANEL APPLICATION ON REAR ACCIDENT AREAS				183.18
3	В	BP-LAB2 REMOVE & INSTALL REVERSE SENSOR TO ASSIS T REPAIR			D //	NNX 180.00
4	В	BP-LAB2 CHECK LIGHTING & CONDUCT WATER LEAK TEST			1010	180.00
5	В	BP-LAB2 REMOVE & INSTALL REAR COMPARTMENT CARPET				360.00
6		,GARNISH AND TRIMMING TO ASSIST REPAIR BP-SUBLET TO RESET ECU AND REPROGRAMME			V	180.00
6	B	BP-LAB2 STRAIGHTEN & ALIGN REAR ACCIDENT AFFECTE			~	720 2160.00
'		D AREAS				
8	В	BP-RES2 RESPRAY JOB ON REAR ACCIDENT AFFECTED AR			1475	1/80 2065.00
9	1 2	T52159-28959 COVER, RR BUMPER X MARKET T52156-28060 L/RR BUMPER SUPPORT, X N/Y	1.00 1.00	596.90 40.40		596.90 40.40

For & on behalf of Borneo Motors (Singapore) Pte Ltd	Customer's Signature	Charge Summar	у	Total			
	Please acknowledge receipt of vehicle	Parts Labour Sublet Lubrication/Fluid Others		Less	Due	,	



Borneo Motors



Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9

17 UBI ROAD 4 SINGAPORE 408611, Tel no.: 6631 1188

ESTIMATE

				Docu Docu 13/0 Reg. Da	ment No 0 ment Da 01/2021	te Reg. No.	Customer Details Mr Yeoh Seow Ling 442 Sin Ming Avenue #05-423 Singapore 570442 Mobile: 96396841 Kilometers Wip No. Order No. / Remarks					
201		ACR50F		KSK E1 Engine No.	31/12/20 Term		SMG7950X SA / Counter			20637 ehicle In		SMG7950X ollected On
JTI	EGI	D56M707166514		AZ1A88110	60		Sam San Joi		13/01/20	021 8.50	//	0.00
L	Cd			Job/Parts Des	scription				Qty	Unit Price	Disc %	Amount
11 12 13 14 15 16 17 18 19 20 21	4 5 6 7 8 9 0 1 2		CLIPS ABSOR ABSOR PANEL PANEL EMBLE PLATE, PLATE, SENS ANTEN LKK Auto (the Repair To resurve) To display (Parts prices	RBER, RR BUIL RBER, RBER, RR BUIL RBER, RBER, RBER, RR BUIL RBER, RBER, RR BUIL RBER, RBER, RR BUIL RBER, RBER, RR BUIL RBER, RBER, RR BUIL RBER, RBER, RBER, RBER, RBER RBER, RBER, RBER RBER RBER, RBER	MPER WITH A PROPERTY ONIC, ICAL X PAINTING INC. ICA	neper C.	NN V V		1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00	40.40 4.10 79.60 79.60 755.40 1753.60 72.20 44.10 57.20 392.80 191.50		40.40 4.10 79.60 79.60 755.40 1753.60 72.20 44.10 57.20 392.80 191.50
For & Born	on eo	behalf of Motors (Singapore	No illegal in Supplement is subject to	nodification(s) is all stary item(\$\$ faus) of final approval from	lowed resignature m Insurance Con	id npany	Charge Su	mmary	/	Total		9,445.98
				Please acknowled ad by Repairer		ehicle F	arts abour ublet		4,107.8 4,975.0 363.1	00	0%	0.00
			-		ning at participality in the construction for the construction for the construction of		ubrication/Fluid others		0.0		Due	10,107.20