

{wv} & J3n'U3}

SM08211R0001

Q1) TP : Reporting Only

TP Insurer:

'Preferred Wksp / INC Assign Wksp' / QW: (

Tot:

Fax:

The Individuals:

Veh No:

SLB 639E

INC()/Non-INC()

Owner / Driver: (

Tel:

Policy No: (

Period: (

) Cover Type: (

Confirmed by : (

Date: _____

Times

Insured/Driver Liability: (

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

Year of Registration: (

Warranty: YES () / NO ()

INDEXES: (\$

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

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

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

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

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection

3) Upload Resurvey Photo [Repair Cost > \$9000]

Injury :

21A2100802

Driver/Owner:

Contract No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Billie

1) AIT Accident Reporting (\$30)	INC (\$10)
2) DA Damage Assessment (\$100)	\$403.45
3) TPI Towing Fee	\$120
4) PFI Follow-Through Survey	\$30
5) PFI Follow-Through Survey (Resurvey)	\$73
6) World Adjusters Inc INC Only, Over 10 Jan 700	\$160
7) TR Re-inspection	
8) NI No DA + SMRT Survey	
9) NTUC Additional Service	
ON	
* NS Courtesy Car / Tpl Allowance	\$10
* NG Repairs Coordination	\$2
* NR Post Repair Inspection	\$3
* ND DV / Collect Losses Coordination	\$3
TP (NI) + TP (NA INC) + Post INC	
9) NI: No Mobile	
Invoice dated	Fee Charged
Invoice dated	Fee Charged

Fee Charged
Fee Charged

Invoice dated

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	27/01/2021 12:59 (SGT)
Date of Accident	26/01/2021 08:00 (SGT)
Exact Location of Accident	AYE, Singapore
Additional Location Information	TOWARDS CITY NEAR WARWICK ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA2600U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM KOON PARK
NRIC No	SXXXX812G
Email Address	park@parkassociates.com.sg
Mobile Phone No	(Phone) +65-96892543
Alternative Phone No	+65-96892543

VEHICLE PARTICULARS

Manufacturer	Porsche
Model	Panamera
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?	Yes
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00029512000
Cover Note Number	-

DRIVER

Name of Driver	LIM KOON PARK
NRIC No	SXXXX812G

Date Of Driving Pass	05/12/1992
Driving experience	28 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96892543
Alt. Phone Number	+65-96892543
Email Address	park@parkassociates.com.sg
Address	26 QUEEN'S ROAD
Address complement	-
Postcode	266781
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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?	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

PLEASE REFER TO SKETCH AND POLICE REPORT T/20210126/7044

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB639E
Vehicle Manufacturer	BMW
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	1/1A

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMM4839Z
Vehicle Manufacturer	Honda
Vehicle Model	Shuttle
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN WUILENG
NRIC No	SXXXX608J
Contact Number	(Phone) +65-97398287
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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 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 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.

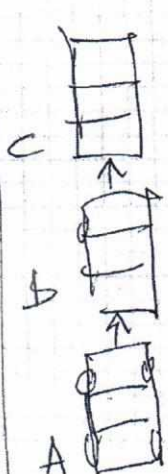
Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

26/0/21
27/01/2021
TOWARDS CITY MARR WARWICK ROAD



Vehicle A = SKA26004
Vehicle B = SLB639E
Vehicle C = SMM4839Z

along the exit to
abradra, filler lane,
vehicle A hit rear of
vehicle B and C.

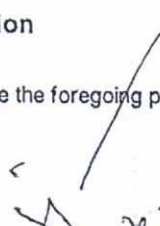
Describe Circumstances of the Accident

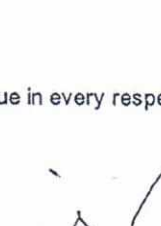
Condition clear day fairly heavy traffic
at the filter lane, vehicle in front slowed suddenly,
didn't manage to stop in time, crashed into
back of car in front.


Police report 1/20210126/7044

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date &
Time


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


Witnessed by Reporting Centre
Personnel

ACCIDENT STATEMENT

ACCIDENT DATE: (26/01/2021) (DD/MM/YYYY), TIME: (08:00) (HH:MM)

LOCATION: AYE towards City, near

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SA2600U
 b) INSURANCE COMPANY: _____
 c) POLICY NUMBER: DMPCSNNO0029512000
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Porsche Panamera GTS
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Personal Usage
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: LIM KOON PARK (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S2608812 G CONTACT: 96892543
 c) ADDRESS: 26, Queens Road, Singapore 266781

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: LIM KOON PARK (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S2608812 G CONTACT: 96892543
 c) ADDRESS: 26, Queens Road, Singapore 266781

* d) DATE OF BIRTH: (22/06/1966) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 05/12/1992

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS) DRY

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLB 49639 E MODEL: BMW
 b) DRIVER'S NAME: Kim
 c) NRIC/FIN/PASSPORT: S7204608 J CONTACT: 90624369

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SM M48392 MODEL: Honda Shuttle
 b) DRIVER'S NAME: Tan Wile
 c) NRIC/FIN/PASSPORT: S7204608 J CONTACT: 97398287

Email: =

VIDEO



**SINGAPORE
POLICE FORCE**



T/20210126/7044

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

1 of 3

Report No. T/20210126/7044

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/01/2021 20:59			Vide Report No.: D/20210126/0025		Station Diary No.:
Informant's Particulars					
Name of Informant: LIM KOON PARK			Address: 26 QUEEN'S ROAD SINGAPORE 266781		
ID Type / ID No.: NRIC NO / S2608812G			Contact No.: Home/Office: Mobile: 96892543		
Nationality: SINGAPORE CITIZEN			Email: PARK@PARKASSOCIATES.COM.SG		
Sex: Male	Age: 54	Date of Birth: 22/06/1966	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Business development executive			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 26/01/2021 08:00	Type of Location: Straight Road
Location: WARWICK ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SKA2600U	Car	PORSCHE	panamera	Black	Slightly Damaged	0
SLB639E	Car	BMW		Grey	Slightly Damaged	0
SMM4839Z	Car	HONDA	shuttle	Black	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210126/7044

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

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Report No. T/20210126/7044

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKA2600U	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.			

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM KOON PARK		ID No. S2608812G
Related Vehicle	SKA2600U (Car)		Contact No. 96892543
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

on the said time and date above, i was driving along aye in my vehicle SKA2600U, heading to city before exit to Alexandra road. at the filter lane, the traffic was fairly heavy bt was moving at normal speed. as the vehicles ahead came to a sudden slow down, i did not manage to brake in time and as a result colided into the rear of the vehicle in front (SLB639E). when i stopped the car, realized that a 3rd car in the front (SMM4839Z, driver MsTan Wui Leng) also had slight damage. i assume it is the result of the same chain collision. we all stopped the car, and the driver (Ms. Kim) in front was visibly shaken . No visible injury was observed. Ambulance came and took the driver away. My car donot have an incar camera.

Later in the afternoon, the husband of the driver, namely Ms Kim, contacted me and updated me that she was discharged from NUH by about 10-11 am. He further updated me at about 6 pm that she is well, has 'nothing broken', no internal bleeding' and probably 'only muscle injury'.



**SINGAPORE
POLICE FORCE**



T/20210126/7044

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

3 of 3

Report No. T/20210126/7044

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 / TPB /
YAN MINGSHENG DANIEL
Contact No.: 65476252

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:
26/01/2021 20:59

Classification Of Case:

Motor Private Car

MX1F

E SN

AN0420A

Cov. Type: C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMPCSNW00029512000	Engine No.: GD01061	Cha. No.: WP0ZZZ97ZDL070398
1. Index Mark and Registration Number of Vehicle	SKA2600U		
2. Name of Policy Holder	LIM KOON PARK		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	17/03/2020	Named Drivers Ex Sect. I	S\$2,500.00
		Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	S\$3,000.00
		Ex Sect. I - Age >= 26	S\$500.00
		* Age as at date of accident	
		EX ON WINDSCREEN	S\$350.00
4. Date of Expiry of Insurance	08/04/2021		
5. Persons or Classes of Persons entitled to drive*			
(a) The Policyholder.			
(b) Any other person who is driving on the Policyholder's order or with his 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 Vehicle.			
6. Limitations as to use:			
Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test 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.			
Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.			
One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.			

HIRE PURCHASE CO. : HONG LEONG FINANCE LTD 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 1987 (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 reverse



Issued By: Lim Lee Choo
Authorised Officer

[Signature]

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

[Signature]

Authorised Signatory