

SNR2134003

Date In:	Job description	Date & Time Completed	Done by
12/03/2021 12:27	SAS e-Milling		
Ref No: NBA11012100341114	E-mail (by job site, AIG etc)		
Veh No: SKC 1295M	I-Motor Claim Form		
D.O.A: 12/03/2021 09:00	I-Motor W/O (Winder OD 2hrs, TP 4hrs)		
OID: TP Reporting Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass'l Report by Fax / Hand to Owner/W/Insr		

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

TP Insurer: ( ) Vch No: SKC 1295M, INC ( ) / Non-INC ( ) Tel: ( )

Owner / Driver: ( )

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

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

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

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

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

( ) Walk-In Customer; Customer's Information strictly Confidential & Strictly NO Refor of repair.

( ) 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: ( )

NA2101946

Item	Amount	INC (R)
1) All Accident Reporting (\$30)		
3) DA: Survey Assessment (\$100)		\$103.45
3) PFI Towing Fee		\$120
4) PFI Follow Through Survey		\$30
5) PFI Follow Through Survey (Resurvey)		\$75
6) TFI: Suspension		\$160
7) NI: Ideo DA + SMRT Survey		\$3
8) NTUC Additional Services		\$10
NI: Courtesy Car / Tpl Allowance		\$23
NI: Post Repair Inspection		\$3
NI: DY / Collect Excess Coordination		\$20
TP (NI) / TP (NI) INC / Post Last LNC		\$30
NI: Ideo Mobile		
Invoice dated		
Invoice dated		

Fee Charged  
Fee Charged

Driver/Owner: ( )

Contact No: ( )

Damaged Portion: ( )

QC Checked by (Engr-In-Charge): ( )

Signature: ( )

Date: 2/2

# 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 .....	17/03/2021 12:27 (SGT)
Date of Accident .....	16/03/2021 09:00 (SGT)
Exact Location of Accident .....	Jln Toa Payoh, Singapore
Additional Location Information .....	BESIDE BUS STOP
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLF4956S
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LEE CHANG WAI (LI ZHENWEI)
NRIC No .....	SXXXX163I
Email Address .....	jansenlcw@gmail.com
Mobile Phone No .....	(Phone) +65-98474765
Alternative Phone No .....	+65-98474765

### VEHICLE PARTICULARS

Manufacturer .....	Volkswagen
Model .....	Golf
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 .....	United Overseas Insurance
Type of Coverage .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	DHOM120044501900
Cover Note Number .....	-

### DRIVER

Name of Driver .....	LEE CHANG WAI (LI ZHENWEI)
NRIC No .....	SXXXX163I
Date Of Birth .....	24/03/1979
Occupation .....	Indoor

Date Of Driving Pass .....	21/08/1998
Driving experience .....	22 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98474765
Alt. Phone Number .....	+65-98474765
Email Address .....	jansenlcw@gmail.com
Address .....	BLK 361 HOUGANG AVENUE 5 #04-324
Address complement .....	-
Postcode .....	530361
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 .....	Side Swipe
Weather Conditions .....	Clear
Road Surface .....	Dry

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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

PASSENGER 1

Name .....	AYDAN LEE CHONG KAI
Gender .....	Male

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

ON STATE DATE AND TIME, I VEHICLE A (SLF4956S) WAS TRAVELLING ON THE STATE VENUE ON LANE 2. SUDDENLY, VEHICLE B (SKC1295M) CUT IN ABRUCTLY AND COLLIDED ONTO MY VEHICLE'S FRONT RIGHT PORTION.

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 .....	SKC1295M
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-

SKETCH PLAN

IMPORTANT NOTICE

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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.

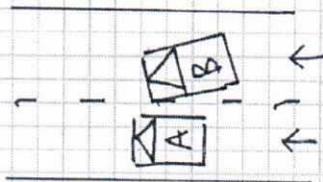
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Jordan 200 Report BASILIDE BUS STOP



A = SLF 49565  
B = SKC 1295M



Date of Accident : 16/05/2021 Accident Time: 0900 (24-HR-Format)

Accident Place : JALAN TOTA PATAH, BESIDE BUS STOP

Vehicle No. (Car Plate No.) : SLF 4956S Make/Model: Volkswagen Golf Variant R-Line

Insurance Company : UOI Policy No: DTHOM120044501900 1.4 TSI AT SR

Owner or Company Name /IC No. : Lee Chang wai (Li Zhenwei) - S 7909163J

Owner or Company Contact No. : \_\_\_\_\_ Owner's Hp 9847 4765 Company Tel \_\_\_\_\_

DRIVER'S Name / IC No. : Same as above

DRIVER'S Date Of Birth : 24.3.1979 DRIVER'S License Pass Date 21.8.1998

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Owner

DRIVER'S Address : 361 Housang Ave 5 #04-32A S(530361)

DRIVER'S Contact No./ Alt No. : 1) \_\_\_\_\_ 2) \_\_\_\_\_

DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)

Email Address : jansenlcw@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): 02

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): both injured

**Other Party Driver's Particular (if any)**

Vehicle No: SKC 1295M	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: AYDAN LEE CHONG KAI  
M



MEMBER OF THE UOB GROUP

United Overseas Insurance Limited
3 Anson Road
#28-01 Springleaf Tower
Singapore 079909
Tel (65) 6222 7733
Fax (65) 6327 3869 / 6327 3870
Email: ContactUs@uoi.com.sg
uoi.com.sg
Co. Reg. No. 197100152R

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)

ORIGINAL

CERTIFICATE NO. DHOM120044501900 Excess: \$500/-NAMED DRIVERS
Type of Cover COMPREHENSIVE \$1500/-OTHERS
Vehicle Number SLF4956S \$3000/-APPL TO <25 YRS & OR <3YRS EXP
Name of Insured LEE CHANG WAI \$100/-WINDSCREEN DAMAGE CLAIM
Restricted Driver(s) NOT APPLICABLE

Period of Insurance 29 August 2019 to 28 August 2021

Engine# CZC066831
Chassis# WWZZZAUZGP539131

PRIVATE CAR - INDIVIDUAL OWNERSHIP [MX 1]
AUTHORISED DRIVER

- (1) The Insured
(2) Any other person who is driving on the Insured's order or with his permission
(3) In the event of the death of the Insured
(a) any member of the Insured's family or a paid driver who has been driving the car during the lifetime of the Insured and permission to drive had not been withdrawn prior to the death of Insured and
(b) any other person who has been given permission to drive the vehicle prior to the death and such permission had not been withdrawn by the Insured

LIMITATIONS AS TO USE

Use only for social domestic and pleasure purposes and for the Insured's business
THE POLICY DOES NOT COVER
Use for hire or reward or racing pace-making reliability trial or speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purposes in connection with the Motor Trade
The carriage of passengers pursuant to car pooling arrangements and payments or any of them made by the passengers thereunder towards the running expenses of any vehicle described in the Schedule shall not be deemed to constitute use for hire or reward

Provided that the person 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.

\*Limitation 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).

UNITED OVERSEAS INSURANCE LTD

[Handwritten signature]

For the Company

FCABM Date : 05/07/2019

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	163I
Vehicle Details	
Vehicle No.:	SLF4956S
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Mar 2021
Vehicle Make:	VOLKSWAGEN
Vehicle Model:	GOLF VARIANT R-LINE 1.4 TSI AT SR
Primary Colour:	Blue
Manufacturing Year:	2015
Engine No.:	CZC066831
Chassis No.:	WVWZZZAUZGP539131
Maximum Power Output:	92.0 kW (123 bhp)
Open Market Value:	\$27,597.00
Original Registration Date:	29 Aug 2016
First Registration Date:	29 Aug 2016
Transfer Count:	0
Actual ARF Paid:	\$20,636.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Aug 2026
PARF Rebate Amount:	\$15,477.00
Intended COE Rebate Details	
COE Expiry Date:	28 Aug 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$53,334.00
COE Rebate Amount:	\$28,846.00
<b>Total Rebate Amount:</b>	<b>\$44,323.00</b>

The information contained herein is correct as at 17 Mar 2021

OK