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Veh No: SMP 4991M	E-mail (within Shrs, AIC 2hrs		
D.O.A: 2200 2001 21,48	i-Motor Claim Form	ė .	
OD (TR) Parama Cultura	i-Motor W/O (Within: OD	2hrs, TP 4hrs)	
OD (TP): Reporting Only	i-Photo Uploaded		
	Assessment/Survey Repor	t	
TP Insurer:	Ass't Report by Fax / Har	nd to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: (Tel: F	ax;)
TP Particulars: Veh No: SKE	3327G INC	()/Non-INC().	
Owner / Driver: (Tel:)
Policy No: (Period	: () Cover Type: (
Confirmed by : (Date:	Time:)
		0-20%; P: 21-79%. P: 30-1	
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2) QC Check / Post Repair Inspection	()	-	
3) Upload Resurvey Photo [Repair Cost > \$3000) .	3.	
Injurý:			Transfer of August Commercial
Date/Time / Actions			REPLOCUE.
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C Checked by (Engr-In-Charge):	OJ)* *N5; Con	irlesy Car / Tpt Allowance	\$5
C. Checked by (Bright-In-Charge).	*N6: Rep	air Co-ordination	\$10
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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
- 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 23/04/2021 15:10 (SGT) Date of Accident 22/04/2021 21:45 (SGT) Exact Location of Accident Teo Hong Rd, Singapore Additional Location Information JUNCTION TOWARDS NEW BRIDGE ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMF4347M

INSURED/POLICYHOLDER

Is company? No THEN CHEE HENG Name Of Registered Owner NRIC No SXXXX335A Email Address dazthen0203@gmail.com Mobile Phone No (Phone) +65-98581550 Alternative Phone No +65-98581550

VEHICLE PARTICULARS

Manufacturer Hyundai Model Elantra Variant Exact purpose for which vehicle was being used at time of Employment Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMHCSNW00004282000 Cover Note Number

1591

DRIVER

Name of Driver THEN CHEE HENG NRIC No SXXXX335A

Date Of Birth	03/02/1991
Occupation	Outdoor
Date Of Driving Pass	03/05/2016
Driving experience Gender	4 YEARS AND 11 MONTHS Male
Mobile Number	(Phone) +65-98581550
Alt. Phone Number	+65-98581550
Email Address	dazthen0203@gmail.com
Address	BLK 475 ANG MO KIO AVENUE 10 #04-716
Address complement	-
Postcode	560475
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	AND THE THIRD CONTRACTOR OF THE PARTY OF THE
Type of Accident	Collision - Major/Minor Rd
Weather Conditions Road Surface	Clear Dry
Road Surface	Diy
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?	6 -
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	JULIEN FERNAND JEAN GAILLARD
Gender	Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Yes
Police Station Name	Bukit Merah East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002369999
Alt. Police Station Phone No	(Fax) +65-62204360
Police Station Address	391 New Bridge Road Police Cantonment Complex Block A
	Singapore 088762 No
Was notice of intended Prosecution given? If yes, against whom?	
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN AND NOTICE OF REPOR	RTING
PLEASE REPER TO SKETCHT EAN AND HOTICE STITLE ST	
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 OTH	ER VEHICLE PROPERTY 1

SKE3327G

Vehicle Registration Number

Vehicle Manufacturer	-
Vehicle Model	2
- Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-
No. Of Fasseriger (including Differ)	=

WITNESS DETAILS

WITNESS 1

Name

JULIEN FERNAND JEAN GAILLARD
Phone

(Phone) +65-96508637

Email

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)

Lunderstand, 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' law yers/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' law yers/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 law yers/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 Wer Bipbe Rd	Withessed by Reporting Centre Personnel
		(B) SHE 3327-6
	4	
Teo Hore	A	

Describe Circumstances of the Accident
QN 22.04-2021 at about 21: A5 hrs. I was travel into a one
Invition of Teo Hors Rd & New Birse Rd. Upon reaching the punction,
I slow down and stop. While writing for owen light turnovern, I stop
and on stationary. Once the traffic, turn been, I proceed a had-All of
a sudden a which SKE 33276 had collided onto my front Rt side
portion. I had a withis who saw the whole scene.
Hame: Julian Fernand Jean Hp: 9650 8637

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

Time

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

Witnessed by Reporting Centre Personnel

Date of Accident	: 22-04-201 Accident Time: 21-45/15 (24-HR-Format)
Accident Place	: In not of teo Hono Turds New BriDGE Rd
Vehicle. No. (Car Plate No.)	: SMF 434 +M Make/Model: Hyurdai Aartm AD 1-666 W
Insurace Company	: CHI h A Policy No: DMH ESNW 00004292000 CAMO
Owner or Company Name /IC No.	: Then Chee Hont - S9170335A
Owner or Company Contact No.	:Owner's Hp 98581550 Company Tel
DRIVER'S Name / IC No.	: sam as above
DRIVER'S Date Of Birth	: 03.02. QQ DRIVER'S License Pass Date 03.05.206
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Omet
DRIVER'S Address	: 475 And mo kio Ave 10 \$ 64-76 s(560475)
DRIVER'S Contact No./ Alt No.	:1)2)
DRIVER'S Occupation	: INDOOR VOUTDOOR (e.g. working inside or outside office)
Email Address	: # dartheno203 asmail.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 Dr	river): 2pax Indede dimer
Was there any video Captured by ca Exact purpose for which vehicle was Any Injury (If YES, Pls state):	r camera: YES \NO\s being used at the time of accident: Private use \ Work purpose
Other P	arty Driver's Particular (if any)
Vehicle. No: SKE 3327	Vehicle. No:
Vehicle Make\Model:	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:
* NEW - Passenger's name &	E

NOTICE OF REPORTING

This is to confirm that <u>Then Chee Heng, S9170335A</u> (Hp: 98581550), has reported to the Police a non-injury traffic accident which occurred at <u>Teo Hong towards New Bridge Road</u> on <u>22/04/2021</u> at about <u>2145hrs</u> involving the following vehicles:

- 1) SMF4347M (Complainant's car)
- 2) SKE3327G (Defendant's car/ Thia Toh Fei, i/c: S7612062E)

My passenger details: Julien Fernand Jean Gaillard (Fin: G3086339P/ Hp: 96508637)

- On 22/04/2021 at about 2145hrs, while I was driving along Teo Hong Road towards New Bridge Road, one car, SKE3327G, hit my driver side door. The traffic light is in my favour and I believe the said car beat the red light before the driver hit me. No one was injure.
- If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Complainant: Then Chee Heng

NRIC: S9170335A

Rank/Name of Issuing Officer: SSSgt T09575 Nor Yazid Bin Ab Azix

Date: 22/04/2021 Time: 2353hrs

S/D Ref: 156

Police Post/Unit: Bukit Merah East NPC, Central Division

Original - to be issued to informant Duplicate - to be submitted to Traffic Police







Motor Hire Car

MZ406L/B

SN

N

AN0621A 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.

DMHCSNW00004282000

Engine No.: G4FGHU118623 Cha. No.:KMHD841CMJU768056

1. Index Mark and Registration

Number of Vehicle

SMF4347M

AUTOSAFE

2. Name of Policy Holder

04/07/2020

Excess Sect I.

\$\$1,250.00

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

(11:18:00)

THEN CHEE HENG

Excess Sect. I (Outside Singapore) Excess Sect. II S\$2,500.00

4. Date of Expiry of Insurance

03/07/2021

Excess Sect.II (Outside Singapore).

\$\$1,250.00 \$\$2,500.00

EX ON WINDSCREEN .

S\$100.00

5. Persons or Classes of Persons entitled to drive

As per Named Driver(s) stated below.

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

THEN CHEE HENG

6. Limitations as to use:

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

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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: IMOTOR INSURE Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) ★3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q6389 6111

6222 1033

www.sg.cntaiping.com

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	335A
Vehicle No.:	SMF4347M
Vehicle to be Exported:	No
Intended Deregistration Date:	31 May 2021
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA AD 1.6 GLS AT (AMS)
Primary Colour:	Silver
Manufacturing Year:	2018
Engine No.:	G4FGHU118623
Chassis No.:	KMHD841CMJU768056
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	\$12,628.00
Original Registration Date:	12 Nov 2018
First Registration Date:	12 Nov 2018
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$12,628.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	11 Nov 2028
PARF Rebate Amount: Intended COE Rebate Details	\$9,471.00
COE Expiry Date:	11 Nov 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$28,457.00
COE Rebate Amount:	\$21,192.00

The information contained herein is correct as at 23 Apr 2021