



# TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

PAGE: 1

M/S : AIG ASIA PACIFIC INSURANCE PTE. LTD.

78 SHENTON WAY #07-16  
AIG BUILDING  
SINGAPORE 079120

ATTN : MOTOR CLAIM DEPT

TEL : 6419 3000 FAX : 6415 3723

YOUR REF NO :

CLAIM TYPE :

ACCIDENT DATE : 12/04/2021

## ESTIMATE

NO : QUOT202104-000032(00)

DATE : 26/04/2021

POLICY NO : 999995580

VEH REG NO : GBG6355B

MAKE/MODEL : MERCEDES BENZ VITO 114 CDI  
PANEL VAN LONG AT ABS 5DR

CHASSIS NO : WDF44760323339042

ENGINE NO : 65195034218196

REG. DATE : 2017

## Estimate Repair Cost to Vehicle No : GBG6355B

Description	Quantity	Unit Price	Amount
		S\$	S\$
<b>PARTS</b>			
1 Rear windscreen glass	1	620.00	620.00
2 Tailgate	1	1,450.00	1,450.00
3 Tailgate absorber - RH / LH	2	78.00	156.00
4 Tailgate hinges - RH / LH	2	115.00	230.00
5 Tailgate lock	1	195.00	195.00
6 Tailgate weatherstrip	1	180.00	180.00
7 Tailgate centre trim	1	28.00	28.00
8 Tailgate centre trim rivets	5	5.50	27.50
9 Tailgate inner handle strip	1	28.00	28.00
10 Tailgate inner trimboard	1	48.00	48.00
11 Tailgate trimboard clips	15	5.50	82.50
12 Tailgate centre logo	1	48.00	48.00
13 Tailgate 'VITO' emblem	1	52.00	52.00
14 Tailgate '114 CDI' emblem	1	62.00	62.00
15 Tailgate 'C & C' emblem	1	38.00	38.00
16 Tailgate wiper motor	1	310.00	310.00
17 Tailgate wiper motor cover	1	75.00	75.00
18 Tailgate wiper blade	1	48.00	48.00
19 Tailgate wiper arm	1	98.00	98.00
20 Tailgate wiper cap	1	12.00	12.00
21 Rear end panel (outer)	1	252.00	252.00
22 Rear end panel (inner)	1	285.00	285.00
23 Rear bumper	1	980.00	980.00
24 Rear bumper reinforcement	1	135.00	135.00
25 Rear bumper retainer - LH / RH	2	65.00	130.00
26 Rear bumper reflector - RH / LH	2	55.00	110.00
27 Rear bumper sensor cable	1	115.00	115.00
28 Rear bumper reverse sensor	4	135.00	540.00
29 Rear bumper sensor seals	4	8.00	32.00
30 Rear bumper clips	15	5.50	82.50
31 Taillamp assy - RH / LH	2	550.00	1,100.00
32 Taillamp assy lower garnish - RH / LH	2	98.00	196.00
33 Bonnet	1	850.00	850.00



# TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

PAGE: 2

M/S : AIG ASIA PACIFIC INSURANCE PTE. LTD.

78 SHENTON WAY #07-16  
AIG BUILDING  
SINGAPORE 079120

ATTN : MOTOR CLAIM DEPT

TEL : 6419 3000 FAX : 6415 3723

YOUR REF NO :

CLAIM TYPE :

ACCIDENT DATE : 12/04/2021

## ESTIMATE

NO : QUOT202104-000032(00)

DATE : 26/04/2021

POLICY NO : 999995580

VEH REG NO : GBG6355B

MAKE/MODEL : MERCEDES BENZ VITO 114 CDI  
PANEL VAN LONG AT ABS 5DR

CHASSIS NO : WDF44760323339042

ENGINE NO : 65195034218196

REG. DATE : 2017

## Estimate Repair Cost to Vehicle No : GBG6355B

Description	Quantity	Unit Price	Amount
		S\$	S\$
34 Headlamp assy - LH	1	1,850.00	1,850.00
35 Front bumper	1	780.00	780.00
36 Front bumper reinforcement	1	480.00	480.00
37 Front bumper carrier -- LH	1	75.00	75.00
38 Front bumper side retainer - LH	1	58.00	58.00
39 Front bumper clips	15	6.50	97.50
			11,936.00
		Add 10%	1,193.60
			13,129.60
<b>SPECIAL NET</b>			
40 Rear windscreen sealant	1	60.00	60.00
41 Tailgate "70km/h" sticker	1	25.00	25.00
42 Tailgate '6 pax sticker	1	25.00	25.00
43 Rear number plate	1	40.00	40.00
44 Front number plate	1	40.00	40.00
			190.00
<b>LABOUR</b>			
45 To remove and refit rear windscreen glass	1	150.00	150.00
46 To transfer damaged tailgate interior mechanism to new tailgate	1	120.00	120.00
47 To remove and refit front and rear bumper sensor	1	200.00	200.00
48 To check and rectify wiring system	1	80.00	80.00
49 To panel beat and straighten rear floorboard panel, front & rear rear chassis frame, to cut and weld rear end panel, including replacement of parts and align where necessary, to refit and adjust the same	1	1,800.00	1,800.00
50 To putty and spray paint on affected areas (front & rear portion)	1	1,800.00	1,800.00
51 To supply art works & spray barcode on tailgate, RH body panel and bonnet	1	3,500.00	3,500.00
			7,650.00
TOTAL			S\$ 20,969.60
ADD GST @ 7%			1,467.87
GRAND TOTAL			S\$ 22,437.47

SINGAPORE DOLLAR TWENTY-TWO THOUSAND FOUR HUNDRED THIRTY-SEVEN AND CENTS FORTY-SEVEN ONLY



## TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

PAGE: 3

M/S : AIG ASIA PACIFIC INSURANCE PTE. LTD.

78 SHENTON WAY #07-16  
AIG BUILDING  
SINGAPORE 079120

ATTN : MOTOR CLAIM DEPT

TEL : 6419 3000 FAX : 6415 3723

YOUR REF NO :

CLAIM TYPE :

ACCIDENT DATE : 12/04/2021

### ESTIMATE

NO : QUOT202104-000032(00)

DATE : 26/04/2021

POLICY NO : 999995580

VEH REG NO : GBG6355B

MAKE/MODEL : MERCEDES BENZ VITO 114 CDI  
PANEL VAN LONG AT ABS 5DR

CHASSIS NO : WDF44760323339042

ENGINE NO : 65195034218196

REG. DATE : 2017

### Estimate Repair Cost to Vehicle No : GBG6355B

Description	Quantity	Unit Price	Amount
		S\$	S\$

FOR TONG LUCK AUTO PTE LTD

AUTHORISED SIGNATURE

## 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	13/04/2021 21:19 (SGT)
Date of Accident	12/04/2021 16:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE (Tuas)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG6355B
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD
Company Reg No	1XXXXX778Z
Email Address	azrin.bejaramin@daimler.com
Mobile Phone No	(Phone) +65-90231717
Alternative Phone No	(Office) +65-90231717

#### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	VITO 114 CDI PANEL VAN LONG AT ABS 5DR
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	2143

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995580
Cover Note Number	NA

#### DRIVER

Name of Driver	LIM TIAN ENG
NRIC No	SXXXX812D

Date Of Birth	26/07/1976
Occupation	Outdoor
Date Of Driving Pass	07/10/2002
Driving experience	18 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90909207
Alt. Phone Number	-
Email Address	ziper@singnet.com.sg
Address	680464 #15-27
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	6
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)	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	Choa Chu Kang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007659999
Alt. Police Station Phone No	(Fax) +65-67644104
Police Station Address	No 20 Choa Chu Kang Street 52 #01-02 Singapore 689286
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

On the above mentioned date, time and location, I was driving on a straight road at the Pan Island Expressway just opposite Jurongville Secondary School nearby the Jurong Canal exit where I met with an accident. In gist it is a chain collision involving 6 vehicles and I am the 4th vehicle that was involved. While I was driving I noticed that the vehicle in front of me made a sudden e-brake and crashed onto the vehicle in front of him which I managed to e-brake and stop on time before crashing onto the car.

However, another vehicle that was behind went against my vehicle and afterwards I felt another bang onto my vehicle. I wish to state that I am not sure if the 5th vehicle went against me the first time or the impact of the 6th vehicle.

After the incident I decided to visit the hospital as I felt breathless, chest pain and discomfort on my back due to the impact. I was then advised to lodge a police report.

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	VIDEO WITH TP



Was there any audio recorded?

No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBG8279A
Vehicle Manufacturer	Nissan
Vehicle Model	NV350 PANEL VAN 2.5 5AT 5DR EURO V
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	NAY MYO AUNG
NRIC No	GXXXX071X
Contact Number	(Phone) +65-96835579
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	SMK8410K
Vehicle Manufacturer	Mercedes
Vehicle Model	C 180 KOMPRESSOR
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)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	YP3250U
Vehicle Manufacturer	Mitsubishi
Vehicle Model	CANTER FEB21ER4SDEB (CBU)
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	GW4307K
Vehicle Manufacturer	Toyota
Vehicle Model	LITEACE 2.2A
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Commercial vehicle
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)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number	SMY4015X
Vehicle Manufacturer	Toyota
Vehicle Model	NOAH HYBRID 7-SEATER 1.8 X CVT
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)	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	LIM TIAN ENG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	FELT BREATHLESS, CHEST PAIN, AND DISCOMFORT
Injured person in which vehicle?	GBG6355B
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## 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 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 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:

VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER  
MOHAMED SAIFULLAH S/O SYED MASOOD  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

13 Apr 2021



SKETCH PLAN



Vehicle A: GBG 6355B  
 Vehicle B: GBG 8279A  
 Vehicle C: SMK 8610K  
 Vehicle D: YP 3250U  
 Vehicle E: GW 4307K  
 Vehicle F: SMY 4015X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

DECLARATION

I/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:

VERIFY BY AJAX MARS (ARC)  
 REPORTING OFFICER  
 MOHAMED SAIFULLAH S/O SYED MASOOD  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:




**SINGAPORE  
POLICE FORCE**


T/20210413/2004

1 of 5

Report No. T/20210413/2004

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 688286  
Tel No: 1800-7859999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 13/04/2021 00:47      Vide Report No.:      Station Diary No.: 30

**Informant's Particulars**

Name of Informant: <b>LIM TIAN ENG</b>		Address: <b>APT BLK 464 CHOA CHU KANG AVENUE 4 #15-27 SINGAPORE 680464</b>	
ID Type / ID No.: <b>NRIC NO / S7622812D</b>		Contact No. <b>Home/Office:      Mobile: 90909207</b>	
Nationality: <b>SINGAPORE CITIZEN</b>		Email:	
Sex: <b>Male</b>	Age: <b>44</b>	Date of Birth: <b>26/07/1976</b>	Type of Informant: <b>Driver</b>
Race: <b>Chinese</b>		Language: <b>Institution / School Name:</b>	
Occupation: <b>DELIVER DRIVER</b>		Driving Licence Information: <b>Class: 3,4      Date of Expiry:</b>	

**General Information of the Accident**

Type of Accident: <b>Non-Injury Attended by Police</b>	Drink Drive: <b>No</b>	Date/Time of Accident: <b>12/04/2021 16:10</b>	Type of Location: <b>Straight Road</b>
Location: <b>PAN-ISLAND EXPRESSWAY</b>			
Weather: <b>Clear</b>	Road Surface: <b>Dry</b>	Road Speed Limit:	
Traffic Flow: <b>One Way</b>	Traffic Control: <b>Not Controlled</b>	Traffic Volume: <b>Moderate</b>	
Type of Collision: <b>Between Moving Vehicles - Head On</b>			Anyone conveyed by ambulance: <b>No</b>

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG8355B	Van	MERCEDES BENZ	VITO 114 CDI PANEL VAN LONG AT ABS 5DR	White	Slightly Damaged	0
GBG8279A	Van	NISSAN	NV350 PANEL VAN 2.5 5AT 5DR EURO V	White	Slightly Damaged	1
GW4307K	Van	TOYOTA	LITEACE 2.2A	White	Slightly Damaged	0


**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999



T/20210413/2004

2 of 5

Report No. T/20210413/2004

## CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SMK8410K		MERCEDES BENZ	C 180 KOMPRESS OR	Black	Slightly Damaged	2
SMY4015X	Car	TOYOTA	NOAH HYBRID 7- SEATER 1.8 X CVT	Brown	Slightly Damaged	0
YP3250U	Lorry	MITSUBISHI	CANTER FEB21ER4S DEB (CBU)	White	Slightly Damaged	0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM TIAN ENG	ID No.	S7622812D
Related Vehicle	GBG8355B (Van)	Contact No.	90909207
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	12/04/2021	Date Discharge	12/04/2021
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	Nay Myo Aung	ID No.	G1128071X
Related Vehicle	GBG8279A (Van)	Contact No.	96835579
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL




**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Choa Chu Kang N.P.C.  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999



T/20210413/2504

3 of 5

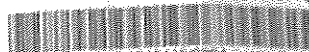
Report No. T/20210413/2504

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	Chong Fah Shing	ID No.	S1803391G
Related Vehicle	GW4307K (Van)	Contact No.	90082256
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	Peter	ID No.	S1740876C
Related Vehicle	SMK8410K	Contact No.	96186459
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	Irwan Kamahr	ID No.	S7516824A
Related Vehicle	SMY4015X (Car)	Contact No.	90909207
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	Chirrapayan Thirrapotini	ID No.	NIL
Related Vehicle	YP3250U (Lorry)	Contact No.	90535553
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689285  
Tel No: 1800-7659999



T/20210413/2004

4 of 5

Report No. T/20210413/2004

**CONTINUATION OF REPORT****Brief Details.**

On the above mentioned date, time and location, I was driving on a straight road at the Pan Island Expressway just opposite Jurongville Secondary School nearby the Jurong Canal exit where I met with an accident. In gist it is a chain collision involving 5 vehicles and I am the 4th vehicle that was involved. While I was driving I noticed that the vehicle in front of me made a sudden e-brake and crashed onto the vehicle in front of him which I managed to e-brake and stop on time before crashing onto the car.

However, another vehicle that was behind went against my vehicle and afterwards I felt another bang onto my vehicle. I wish to state that I am not sure if the 5th vehicle went against me the first time or the impact of the 5th vehicle.

After the incident I decided to visit the hospital as I felt breathless, chest pain and discomfort on my back due to the impact. I was then advised to lodge a police report.



**SINGAPORE  
POLICE FORCE**

T/20210413/2004

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

5 of 5

Report No. T/20210413/2004

**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 Report:

J /

Sgt 2 SHARIEFUDIN BIN ROSMAN

Signature Of Interpreter:

Not applicable

SIGNATURE

Signature Of Informant:

Date/Time:

13/04/2021 00:47

Classification Of Case:

Officer In Charge Of Case:

TP / GIT /

SI THABAGESH JEYATHESH

Contact No.: 65476178

Authentication Stamp

NP168





HOTLINE TEL: (65) 6419-3000

**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)

M.Z.400

COMPREHENSIVE COMMERCIAL MOTOR	<b>OWN DAMAGE EXCESS</b>	S\$1,900.00 (1)
<b>CERTIFICATE NO.</b> 999993650/100830728-00000	<b>WINDSCREEN EXCESS</b>	S\$100.00
	(for policies with effect from 1st November 2002)	
	<b>SUM INSURED</b>	S\$1.00
	<b>INSURING WITH COE/PARF</b>	YES
<b>1) VEHICLE REGISTRATION NO.</b>	GBG6355B	
<b>2) NAME OF INSURED</b>	Daimler Fleet Management Singapore Pte Ltd	
<b>3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT</b>	1 Jan 2021	
<b>4) DATE OF EXPIRY OF INSURANCE</b>	31 Dec 2021	
<b>5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *</b>		
1) Any drivers who is driving on the Insured's order or with their permission. 2) Additional Excess \$1500 or \$2500 applies to authorised drivers age below 21 or above 65 years old and or less than 2 years driving experience. Refer to policy for the applicable excess		
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.		
<b>6) LIMITATION AS TO USE *</b>		
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. This Policy does not cover 1) use for driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, 2) use whilst drawing a trailer except the towing (other than for reward) of anyone disabled using a mechanically propelled vehicle; and 3) use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired.		
In the event of accident claim, the repairs to the Vehicle must be carried out by either one of our AIG Authorized Repairers or a particular Repairer approved by AIG		
<b>LOSS OF USE</b>	NOT INCLUDED	
<b>* NAMED DRIVER</b>	N/A	
<b>HIRE PURCHASE COMPANY</b>	NA	
* 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).

Issued At Singapore 23 Feb 2021

**AIG ASIA PACIFIC INSURANCE PTE. LTD.**

030023-000  
JLT MANAGEMENT PTE LTD  
#09-02, 8 MARINA VIEW  
ASIA SQUARE TOWER 1  
SINGAPORE 018960

Authorised Representative

ORIGINAL

SSCNFY



REPUBLIC OF SINGAPORE DRIVING LICENCE



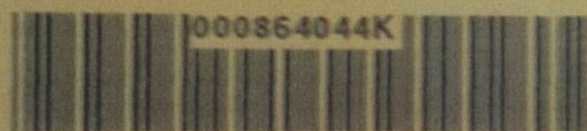
Licence Number: S7622812D

Name:

LIM TIAN ENG

Birth Date: 26 Jul 1976

Issue Date: 29 Sep 2003



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7622812D



Name

LIM TIAN ENG

林展榮

Race

CHINESE

Date of birth

26-07-1976

Sex

M

Country of birth

SINGAPORE





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms  
Class 4 Heavy Motor Cars and Motor Tractors the  
weight of which unladen exceeds 2500 kilograms

07 Oct 2002

18 Jul 2003

Licence No: S7622812D

NP 428A

3418622



NRIC No. S7622812D

Date of issue

07-10-2003

APT BLK 464 CHOA CHU KANG AVENUE 4 #15-27  
SINGAPORE 680464

NRIC No: S7622812D

Date: 03-08-2005 No: 5247082