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SN0921560003 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 06/05/2021 10:11 (SGT) SUBMITTED BY: Liew Shan Hul VERSION: 1 (06/05/2021 10:11 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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.

The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

06/05/2021 10:11 (SGT) 29/04/2021 18:00 (SGT) PIE, Singapore TOWARDS CTE FLYOVER BEFORE BRADDELL EXIT Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBH255R

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address**

Alternative Phone No

Mobile Phone No

P D DOOR PTE LTD

PDDOOR@PDDOOR.COM.SG (Phone) +65-66729081

+65-66729081

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Cabstar

Nissan

Employment

No - Reporting only Commercial vehicle

Manual 3000

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number Cover Note Number Tokio Marine Insurance Singapore Ltd

Comprehensive

No

20-MS006914-R01

DRIVER

Name of Driver NRIC No

LIM KIM LENG SXXXX283C



Date Of Birth Occupation

Date Of Driving Pass Driving experience

Gender

Mobile Number

Alt. Phone Number

Email Address Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident

Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO STATEMENT

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Was there any audio recorded?

Yes No

24/11/1963

01/04/2011

10 YEARS

542290

Clear

Dry

No

Yes

1

No

No

No

2 No

Employee No

No

(Phone) +65-85891477

PDDOOR@PDDOOR.COM.SG

Collision - Head to Rear

BLK 290B COMPASSVALE CRESCENT #13-46

Outdoor

Male

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver Contact Number

Address

Address complement

SJE9721Z

Private car

Accident report SN0921560003

Page 2 of 13

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

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)

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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
 - 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:
 - 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.

A DOO PTE LI

Policyholder's Signature Date & Time: Driver's Signature

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

-					
SK	E T	~	DI	A	B.I

Bradell	CTE	
ext		A: GBH 255R
8	S. C.	B: 5JE9721Z
A	214	
	tion	

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

200	29/04/2021 at about 18:00 hrs, i was
C(Viv	ing my vehicle (GBH 255R) from PIT
oncy	The CIE on the In . C . In
0 (DUE 97212) Suddenly Stop his vehicle
-certon	wasn't have to stop in time
AS	We were talking about private soulli
the	case there fore the report was made
loite	

DEC	LAF	TAS	ION
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I/We declare the foregoing particulars are true in every respect.

Policy older's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

ENICIENO: GBH255R	MAKE & MODEL: NISSAN CALSTON. AUTO / MANUAL
EHICLE NO:	29/04/2021 cc: 3.0
ATE OF ACCIDENT:	
TIME OF ACCIDENT:	Dit to OF Floorer before Brodell exit.
OCATION OF ACCIDENT:	CAMPLOYMENT / PRIVATE USE / PRIVATE HIRC
XACT PURPOSE USE DURING ACCIDENT	DD Door Pte Ltol
NAME OF OWNER:	H/P: OFFICE: 66729081 HOME:
TEL NO:	n/r.
NRIC:	1.77 Euros Aug 5. #61-158 3(4017)
ADDRESS:	PD Door @ PD Door - com - sy.
EMAIL:	OD / THIRD PARTY / REPORTING ONLY
CLAIM TYPE:	
FLEET POLICY:	YES /NO?
INSURANCE COMPANY:	Comprehensive / Third Party / Third Party Fire & Theft
TYPE OF COVERAGE:	Comprehensive / Third Party /
POLICY NO:	20-MSCCETT
NAME OF DRIVER:	AS ABOVE / IF NO: Lim Kim Leng
NRIC:	SIS79283C ANY PASSENGER: NO
NRIC: DATE OF BIRTH:	24/11/1963 LICENCE PASSED DATE: 01/04/2011
	OUTDOOR / INDOOR
OCCUPATION:	MALE / FEMALE
GENDER:	H/P: 858914770FFICE: HOME:
CONTACT NO:	H/P: 858914770FFICE: HOME. BIK 290B Compassivate Crescent #12-46 \$ (542)
ADDRESS:	
EMAIL:	NO IF YES, REG NO: INSURER:
DOES DRIVER OWNED ANY VEHICLE:	Employee.
RELATIONSHIP:	CLEAR / RAINING / OTHERS:
WEATHER CONDITION:	DRY / WET / OTHER:
ROAD SURFACE:	NO / IF YES, WHO?
ANY INJURIES:	NO / IF ILS, THE
NAME & CONTACT:	
NAME & CONTACT:	NQ / IF YES, WHERE?
POLICE REPORT:	100
NOTICE OF INTENDED PROSECUTION GIVEN?	SJE 97217 ANY PASSENGERS: Yes (1F& 1 int
VEHICLE B REG NO:	CONTACT NO:
NAME OF DRIVER:	ANY PASSENGERS:
VEHICLE C REG NO:	ANY PASSENGERS:
VEHICLE D REG NO:	ANY PASSENGERS:
VEHICLE E REG NO:	ANY PASSENGERS:
VEHICLE F REG NO:	ANY PASSENGERS:
VEHICLE G REG NO:	WITNESS CONTACT:
ANY WITNESS? IF YES, NAME:	~
WAS THERE ANY VIDEO CAPTURE?	YES / NO
WAS THERE ANY AUDIO RECORDED?	YES / NO
ACCIDENT SCENE PHOTOS TAKEN?	F. I Partion
The second secon	The same same same same same same same sam
Have you been approach by unknown person solici	N-SI Automotive.
WORKSHOP PARTICULAR:	68420051 / 67440510
CONTACT NO:	Lurand.
CONTACT PERSON:	67410510
FAX NO:	sales@n51.com.sg

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Losio Marine Group

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)

Policy No.: 20-MS006914-R01 (Comm Vehicle Carry Own Goods)

1. Index Mark and Registration Number of Vehicle

GBH255R

Chassis No.: JN1SC2F24Z0860738

2. Name of Policyholder

P D DOOR PTE LTD

3. Effective date of the Commencement of Insurance for the purposes of the Act

27/06/2020

4. Date of Expiry of Insurance

26/06/2021

5. Persons or Class of Persons entitled to drive*

Any person who is driving on the policyholder's order or with their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.
- 6. Limitations as to use*
 - 1) Use in connection with the policyholder's business.
 - 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.
 - 3) Use for social domestic and pleasure purposes.

The policy does not cover:-

- 1) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
- * 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) Account: 0996DDA

ADDITIONAL INFORMATION

Comprehensive Approved Workshop Plan

Insurance Plan: Limit for total loss or theft: Policy Excess:

Prevailing Market Value Own Damage Claims

SGD 750

Financial Interest:

SGD 100 Windscreen Excess TAN CHONG CREDIT PTE LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Intermediaries from TM O

Printed 03/06/2020

10 Sin Ming Drive Singapore 575701 www.lta.gov.sg

Our ref 0706180501N052035997

07 Jun 2018

P D DOOR PTE LTD 1075 EUNOS AVENUE 6 #01-161 EUNOS INDUSTRIAL ESTATE SINGAPORE 409631

նրիսիինինինինինինինին

Dear MR LIM CHOO SIONG

NOTIFICATION ON TRANSFER OF OWNERSHIP FOR VEHICLE NO. GBH255R

001329

We are pleased to inform you that your application to transfer the above-mentioned vehicle has been approved. The Business Transaction Reference No. is 20180607150928760922. You are the registered owner of the vehicle with effect from 07 Jun 2018.

The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

1. Name : P D DOOR PTE LTD
2. Identification No. Type : Company
3. Identification No. : 200412631Z
4. Country/Region : -

5. Vehicle No. : GBH255R

6. Vehicle Type : B31 - Goods (Open) Lorry (Metal Body)/Pickup
7. Vehicle Scheme : Normal

8. Vehicle Make : NISSAN

9. Vehicle Model : CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5
10. Remarks : COE rebate, if applicable, will be based on the 6

COE rebate, if applicable, will be based on the QP of \$57,000.00. This is the lower of QP from Category E and the corresponding Category C in the same tender

exercise.

- 3. You can login to LTA's e-Services@ONE.MOTORING (http://www.onemotoring.com.sg) to access a wide range of vehicle-related services using your SingPass 2FA or CorpPass 2FA. A separate Transaction PIN is required for the following transactions via the Internet or at our Electronic Service Agents. Please apply for your Transaction PIN before performing any of these transactions. Visit http://www.onemotoring.com.sg > LTA Information & Guidelines > Transaction PIN & User Account for more information about obtaining Transaction PIN and the documents needed (e.g. Board Resolution for company).
 - Vehicle PIN Transfer of Ownership and De-registration of Vehicle
 - TCOE PIN Transfer of TCOE (For Category C and E COE bid under individual)
 - Rebate PIN Transfer and Splitting of PARF/COE Rebate