1107/03/11/1		A AHAMADIY	
a TIONAL Assessment Centr	is Zelihicus. Inility (21)	Sucorologe	March 1
Dute In: 12/09/2021 12:12	100 desemption	· Dure & Timo Completed	. Done by
Let No: NBAC17210195KTV	SAS calling		
Jeh No. Callet 1.7	T-inal/(bjule thir, Alothi)		#
CC16 100 100 100 100 100 100 100 100 100 1	1-Motor Claim Yorin	Lu	
	1-Motor W/O (William on th	(1, TP (VII)	
OD (11) ! Reporting Only	i-Plioto Uploaded	,	
19 119 11 million and an	AssessmenUSurvey Report		1
P Insurer:	Aso'l Report by Pax! Hans	10 Omer/YYIOD	The state of the s
Lotolica Michillo Varion Micals Comt C	TO THE PARTY OF TH	Yol:	Fux! )
P Hindigalings Voli No. S	Q'69KD . NO	(,)/Non-Ma().	
Owner / Drivers (		. Left	
	erlodi (	Cover Typo: (	
Confirmed by 1	natas	-7(11101	1941/1
Insured/Driver Listallity: (%)	[Now Use Slows (WO): Ni	120%; P121-79%. P180	1-100/1
Year of Registration: ( )	Womanyi YES ( )/NO(	<u> </u>	***************************************
13x10c30! (\$ ' ) Londing: \$1		THE STATE OF THE PARTY OF THE P	
	THE FULL WAY TO SHOW THE THE TO SHOW THE	原用者は対象なる人が必要などを支	73/4/11/1
) Walle-In Customar I Customers Ir	ntormation attacts doubtential &	BURTA NO WILL OIL CONTRACT	1
I rotal Loss Casa ; to a-mall inst	ares orcorrivati	Towing Col ( 1 2)	1
Drive-in ( )/"owed-in ( ); Invo	stoot ABA(')   MO(')	TOWNE COL	
Paradore de la	TETUTS Y WITH THE TETUTE TO TH	3. 14 14 14 14 14 14 14 14 14 14 14 14 14	S. L. S. W. L.
( ) sociamority trustenets, 10 klady ( )	/ Courtesy Car ( )	YV-	
) Villa 101, 11 this little 101 A COO C			
Con Church / Boyl R countr Inspection	( 1)		-
of on church / Basi is onnir Inspection	( 1)	diam'i	
2) QO Cheek/Pest Repair Inspection 3) Upload Resurvey Photo (Repuir Cost=	( 1)		The state of the s
of on church / Basi is onnir Inspection	CONTRACTOR		
2) QO Chook/Post Repair Inspection  3) Upload Resurvey Photo (Repuir Cost=	( 1)		
2) QO Chook/Post Repair Inspection  3) Upload Resurvey Photo (Repuir Cost=	CONTRACTOR		
2) QO Cheek/Pest Repair Inspection 3) Upload Resurvey Photo (Repuir Cost=	CONTRACTOR		
2) QO Cheek/Pest Repair Inspection 3) Upload Resurvey Photo (Repuir Cost=	CONTRACTOR		
2) QO Cheek/Pest Repair Inspection  3) Upload Resurvey Photo (Repuir Cost=	CONTRACTOR		
2) QO Cheok/Post Repair Inspection 3) Uplood Resurvey Photo [Repair Cost= Injury:	- 1000£\$		
2) QO Cheek/Pest Requir Inspection  3) Upload Resurvey Photo (Repuir Costs  Injury:	COOCES - COO	Period of the first of the firs	NO (41.9) 12 A MONTH A
MANOSAG2	\$3000]	acidani lumorini (200)	11:0 MO CHO SI I I I I I I I I I I I I I I I I I I
2) QO Chook/Post Repuir Inspection 3) Uplood Resurvey Photo [Repuir Cost= Injury i  MADOSSES  Orly or/Owner:	- \$3000] - \$3000] - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	paldent importing (\$100)x  paldent importing (\$200)x  paldent importing (\$100)x  paldent importing (\$1	11:0 MO CHO CHO CHO CHO CHO CHO CHO CHO CHO CH
MANOSES	- \$3000] ( ) ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	addent luporune (30);  bring N:  ollow-Through Durvey (Na. urvey)  ollow-Through Durvey  ollow-Through Durvey  ollow-Through Durvey	HO CHO STORY (Majib)
2) QO Chook/Post Repuir Inspection 3) Uplood Resurvey Photo [Repuir Cost= Injury 1  Injury 1  Oriver/Owners Contract Nos	- \$3000] ( ) ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	addent luporune (30);  bring N:  ollow-Through Durvey (Na. urvey)  ollow-Through Durvey  ollow-Through Durvey  ollow-Through Durvey	MO (410) 773 773 773 773 773 773 773 773 773 77
2) QO Cheok/Post Repuir Inspection 3) Uplood Resurvey Photo [Repuir Costs Injury 1  And No. 2862  Orly or/Owner: Corntact No: Outmit ged Portion:	- \$3000] ( , ) ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	acidant luportine (30))  soliny 1:  soliny 1:  soliny 1:  soliny Through Dury y (10, 100)  Indinatrinal HIT Duly (WITTO)  Liphnetic Shift Bury y  Laborton Sorvious  Cautlary Of (Tol Allow) Hay  Cautlary Of (Tol Allow) Hay	MO (H 0) 1120 1120 1120 1120 1120 1120 1120 1120 1120 1120 1120 1120 1120
2) QO Cheok/Post Repair Inspection  3) Uplood Resurvey Photo [Repair Costs  Injury 1  And TOSAS2  Orly or/Owner:  Correspond No:  Outstact No:	- \$3000] - \$	addent luporune (DO)  Sinwy Atwarms of (E100)  Sinwy Atwarms of (E100)  Sollow-Through Buryey (Nesure)  Indunational HO Duly (Werlad  Luporunous Sorvious  Cautaly Cif (Tpl Allowshus  Luport Centulns Units	H 200 773 773 773 773 773 773 773 773 773 7
2) QO Chook/Post Repair Inspection  3) Uplood Resurvey Photo [Repair Costs  Injury 1  And TOSAS2  Orly cr/Owner: Correspond Portion:	- \$3000] - \$	addent luporune (DO)  Sinwy Atwarms of (E100)  Sinwy Atwarms of (E100)  Sollow-Through Buryey (Nesure)  Indunational HO Duly (Werlad  Luporunous Sorvious  Cautaly Cif (Tpl Allowshus  Luport Centulns Units	H 200 773 773 773 773 773 773 773 773 773 7
2) QO Chook/Post Repair Inspection  3) Uplood Resurvey Photo (Repair Costs  Industry i  Analysis  Oriver/Owners  Cortract No:  Darninged Portion:	- \$3000] - \$	addentiupording (30))  white the state of the survey (14 survey)  whose the survey (14 survey)  contains the su	H 2 21 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2) QO Chook/Post Repair Inspection 3) Uplood Resurvey Photo (Repair Cost= Injury :	COOCE   COOC	addentiupording (Stooks)  white the statement (Stooks)  who the statement (Stooks)  Could by SMRU Survey  The statement (Stooks)  The statement (Stook	HO (440) 1120 11
2) QO Chook/Post Repair Inspection  3) Uplood Resurvey Photo [Repair Costs  Injury 1  And TOSAS2  Orly cr/Owner: Correspond Portion:	COOCE   COOC	addent lupertine (30);  permy i Ameriment (30);  permy i Ameriment (3100);	10 (Ho) (1 (Ho) (Ho) (Ho) (Ho) (Ho) (Ho) (Ho) (Ho)



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
   This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
- 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
- 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 13/09/2021 12:13 (SGT) Date of Accident 11/09/2021 21:20 (SGT) Exact Location of Accident KJE, Singapore Additional Location Information TOWARDS BKE (CHOA CHU KANG WAY EXIT) Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Tovota

Vehicle Registration Number GBE771H

#### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner HARU ENGINEERING PTE LTD Company Reg No 2XXXXX605G **Email Address** allanlimcc75@gmail.com Mobile Phone No (Phone) +65-98926738 Alternative Phone No (Office) +65-63383939

#### VEHICLE PARTICULARS

Manufacturer

Model Dyna Variant Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Manual CC 2982

#### INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy DMCVSNW00108102100 Policy Number Cover Note Number

#### DRIVER

Name of Driver ISLAM SHARIFUL Passport No/FIN FXXXX069P

Date Of Birth 05/05/1974 Occupation Outdoor Date Of Driving Pass 09/03/2018 Driving experience 3 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-98926738 Alt. Phone Number Email Address allanlimcc75@gmail.com Address BLK 116 TECK WHYE LANE #04-742 Address complement Postcode 680116 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Employee 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 Collision - Head to Rear Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle 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? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO SKETCH PLAN 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 SLQ6595D Vehicle Manufacturer Hyundai Vehicle Model 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)	_

### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Formmust 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' 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.

Policyhelder's Signature Date &

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

Personnel

Witnessed by Reporting Centre

Sketch Plan

GBE 7711 exit from KJE

Describe Circumstances of the Accident
I was existed the way
Way. 1 class down to a soft with a find the
was to traffic on the main Rd. Suchanty I feet
a very great raipatt from my weh vear portion.
got down my with and realized that with R
had hit into any veh.

## Declaration

We declare the foregoing particulars are true in every respect.

Policyholder Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Date of Accident	: 11 9 202 Accident Time: 21.20 (24-HR-Format)
Accident Place	: KJE fowered BKB Choa Chu Kay way exif
Vehicle. No. (Car Plate No.)	: GBE 771 H Make/Model: To Yola Dyna. 3.0M
Insurace Company	: China Taiping. Policy No: DMCVSNW 00108102100
Owner or Company Name /IC No.	: Haru Engineering Ple Utd. 2006046056 :6338 3939 Owner's Hp Company Tel
Owner or Company Contact No.	: 6338 3939 Owner's Hp Company Tel
DRIVER'S Name / IC No.	: Islam Shariful F8129069P
DRIVER'S Date Of Birth	: 5 5 1974 DRIVER'S License Pass Date 9 Mer 2018
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee \ Others:
DRIVER'S Address	: BIK 116, Teck whyse lane #04-742 S'6f011t
DRIVER'S Contact No./ Alt No.	:1) 9892 6738 2)
DRIVER'S Occupation	: INDOOR OUTDOOR (e.g. working inside or outside office)
Email Address	: allanlimec75 egmail. 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 D	Oriver):
Was there any video Captured by c Exact purpose for which vehicle we Any Injury (If YES, Pls state):	as being used at the time of accident: Private use \ Work purpose
	Party Driver's Particular (if any)
Vehicle. No: SLQ 65°	75 D Vehicle. No:
Vehicle No: SLQ 65° Vehicle Make Model: Hy wd	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:

\* NEW - Passenger's name & gender:



# 中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Commercial

MZ300/C

SN

AN0420A Cov. Type:C

CERTIFICATE OF INSURANCE

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

CERTIFICATE No.

DMCVSNW00108102100

Engine No.: 1KD2530518 Cha. No.: KDY2318020320

 Index Mark and Registration. Number of Venicle

GBE771H

AUTOSAFE

2. Name of Policy Holder

HARU ENGINEERING PTE LTD

Effective date of the Commencement of Insurance for the purposes of the Regulations (17:45:16)

Excess Sect I.

S\$500.00

EX ON WINDSCREEN .

\$\$100.00

4 Date of Expiry of Insurance

29/08/2022

Persons or Classes 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.

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 Policyholder's business.

(3) Use for social, domestic or pleasure purposes.

The Policy does not cover (1) Use for hire or reward or 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.

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: INXPRESS INSURANCE AGENCY PTE LTD

Authorised Officer

Authorised Signatory

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

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

© 6389 6111

6222 1033

www.sg.cntaiping.com

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	605G
Vehicle Details	
Vehicle No.:	GBE771H
Vehicle to be Exported:	No
ntended Deregistration Date:	06 Nov 2021
Vehicle Make:	TOYOTA
Vehicle Model:	DYNA 3.0 M
Primary Colour:	Silver
Manufacturing Year:	2015
Engine No.:	1KD2530518
Chassis No.:	KDY2318020320
Maximum Power Output:	-
Open Market Value:	\$28,217.00
Original Registration Date:	31 Aug 2015
First Registration Date:	31 Aug 2015
Transfer Count:	2
Actual ARF Paid:	\$1,411.00
ntended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
ntended COE Rebate Details	
COE Expiry Date:	30 Aug 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$49,302.00
COE Rebate Amount:	\$18,806.00
Total Rebate Amount:	\$18,806.00

The information contained herein is correct as at 13 Sep 2021