

NATIONAL Assessment Centre Services

with 1/1/2021

2103921

Date In: 20/09/2021 15:10
Ref No: NBA/TM21009843/4
Veh No: GBB 7758P
D.O.A: 17/09/2021 16:20

Job description: SAS e-illing
E-mail (Egula illing, AIG illing)
I-Motor Claim Vprint
I-Motor W/O (Willing: 00 illing, TP illing)
I-Photo Uploaded
Assessment/Survey Report
Assessment Report by Fax/Hand to Owner/Witness

Done by

(1) TP Reporting Only

TP Insurer:

Preferred Wreck / INO Approval Wreck / OW:

TP Registration: Vch No: GBB 7758P INO: / Non-INO: /

Owner/Driver: Tel: / Cover Type: /

Policy No: / Period: / Date: / Time: /

Confirmed by: /

Insured/Driver Liability: () % (Note: Est. Stairs (WO): N: 0-20%, P: 21-79%, P: 80-100%)

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

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

() Will-In Claimant / Customer's Information strictly Confidential & strictly NO Referral of Reproduction

() Total Loss Case / to e-mail Insurer URGENTLY

Drive-In () / Towed-In () / Involves: YES () / NO () / Towing Co: /

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Recovery Photo (Repair Cost > \$5,000) ()

Injury: /

NA2103921

Driver/Owner:

Contract No:

Damaged Portion:

QC Checked by (Engin-Chief):

1) All Additional Work Done (50%)	INO (40)		
2) PAI Survey / Assessment (\$100)	\$100		
3) Towing Fee	\$150		
4) PT Follow Through Survey	\$30		
5) PT Follow Through Survey (Recovery)	\$30		
6) PT Follow Through Survey (Wreck Only) (Wreck Only)	\$75		
7) PT Follow Through Survey (Wreck Only)	\$160		
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Fee Charged
Per Charge

Invoice dated
Invoice dated

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	20/09/2021 15:10 (SGT)
Date of Accident	17/09/2021 16:20 (SGT)
Exact Location of Accident	Woodlands Ave 12, Singapore
Additional Location Information	TOWARDS WOODLANDS DR 75 INFRONT OF MEGA @ WOODLANDS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE8870C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LUXURY COOL
Company Reg No	5XXXX193J
Email Address	zhikit3407@gmail.com
Mobile Phone No	(Phone) +65-91444136
Alternative Phone No	+65-96440751

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2754

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	21-MT101433-R03
Cover Note Number	-

DRIVER

Name of Driver	NG ZHI KIT
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NRIC No	SXXXX236B
Date Of Birth	29/09/1997
Occupation	Outdoor
Date Of Driving Pass	26/02/2018
Driving experience	3 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96440751
Alt. Phone Number	-
Email Address	zhikit3407@gmail.com
Address	BLK 925 HOUGANG STREET 91 #15-49
Address complement	-
Postcode	530925
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	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	2
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	AW YUAN 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

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	GBB7758S
Vehicle Manufacturer	-
Vehicle Model	-
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)	-

SKETCH PLAN

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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.



Policyholder's Signature / Date & Time

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

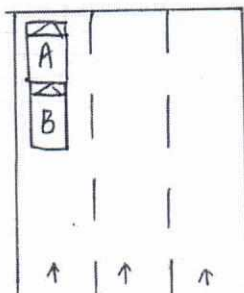
Witnessed by Reporting Centre Personnel

Sketch Plan

Woodland Ave 13 towards Woodlands Drive 75
infront of MEGA @ Woodlands.

Vehicle A: GBE8870C

Vehicle B: GB87758S



Describe Circumstances of the Accident

On the stated date & time, I, vehicle A (G8EBB70C) was stationary at the stated location on Lane 3 as the traffic light was still in red. Second later, I felt an impact from the rear portion of my vehicle. I alighted & realised vehicle B (G8B775BS) collided onto the rear portion of my vehicle causing damages.

Declaration

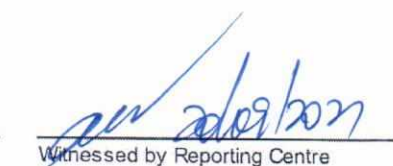
We declare the foregoing particulars are true in every respect.




Policyholder's Signature / Date & Time



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


Witnessed by Reporting Centre Personnel

Date of Accident : 17/9/2021 Accident Time: 1630hrs (24-HR-FORMAT)
Accident Place : Woodlands Ave12 towards Woodland Drive 75 Infront of MEA@Woodlands
Vehicle Reg. No (Car plate No.) : GBE 8870C Vehicle Make/Model: Toyota Hiace
Insurance Company : Tokio Marine Policy No. 21-MT101433-R03
Name of Registered Owner : Company / Individual Luxury Cool
ID of Registered Owner : Co Reg No. 53210193J Owner's NRIC No: -
Co Contact No: - Owner's Contact No: 9144 4136

DRIVER'S Name : Ng Zhi Kit DRIVER'S NRIC No: S9775236B

DRIVER'S Date of Birth : 29 Sep 1997 DRIVER'S License Pass Date 26 Feb 2018

Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: -

DRIVER'S Address : Apt B1K 925 Hougang street 91 #15-49 Singapore 530925

DRIVER'S Contact No / Alt No. : 1) 9644 0751 2) -

DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)

Email Address : zhikit3407@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 Passenger Name: Aw Yuan Kai Gender: M/F

Was the accident reported to the police? YES \ NO Passenger Name: Gender: M/F

Was there any video Captured by car camera: YES \ NO Any Injuries: YES \ NO Injured Name:
Injured Name:

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: G8B7768C

Vehicle Reg No:

Vehicle Make/Model:

Vehicle Make/Model:

Name DRIVER:

Name DRIVER:

IC No. DRIVER:

IC No. DRIVER:

DRIVER'S Contact & add:

DRIVER'S Contact & add:

Other Party Driver's Particulars (if any)

Vehicle Reg No:

Vehicle Reg No:

Vehicle Make/Model:

Vehicle Make/Model:

Name DRIVER:

Name DRIVER:

IC No. DRIVER:

IC No. DRIVER:

DRIVER'S Contact & add:

DRIVER'S Contact & add:



TOKIO MARINE
INSURANCE GROUP
FORM MZ300

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.: 21-MT101433-R03 (Comm Vehicle Carry Own Goods)

- | | | |
|--|-------------|-----------------------------|
| 1. Index Mark and Registration Number of Vehicle | GBE8870C | Chassis No.: KD112010183136 |
| 2. Name of Policyholder | LUXURY COOL | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 21/04/2021 | |
| 4. Date of Expiry of Insurance | 20/04/2022 | |

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).

ADDITIONAL INFORMATION

Insurance Plan:	Comprehensive Approved Workshop Plan	Account: 2346DDA
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Own Damage Claims	SGD 750
	Windscreen Excess	SGD 100
Financial Interest:	THIAM HENG AUTO (S) PTE LTD	

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: TMIS Direct from TM Onli

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