

ATTENTION: Assessment Center Services, Inc. / Insurer

SA 0021300003

Date In:	Job Description	Date Service Completed	Done by
11/11/2021 14:48	SAS Billing		
Ref No: NADKCT1210115794	E-mail (by date time, A or time)		
Val No: STJ 76554	1-Motor Claim Form		
DOI: 06/11/2021 16:28	1-Motor W/O (with or without TP form)		
(1) (1) Reporting Only	1-Photo Uploaded		
TP Insurer	Assessment/Survey Report		
	Mail Report by Fax/Hand to Owner/Agent		

Preferred Wksp / IHO Assn / Wksp / OWI () Toll Fax

PI Number () Val No: **XD 2045C** NO () / Non-NO () Toll

Owner / Driver ()

Policy No () Period () Cover Type ()

Continued by () Date () Time ()

Insured/Driver Liability () % (Note - Est. Blame (WO) NI 0-20% PI 21-79% PI 80-100%)

Year of Registration () Warrant () YES () / NO ()

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

() Written Agreement / Customer's Information strictly confidential & strictly NO report of repetition

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

Drive-In () / Towed-In () / Involves VAS () / NO () / Towed Cost ()

- 1) Apply for Transport Allowance () / Courtesy Car ()
- 2) QO Check / Post Repair Inspection ()
- 3) Upload Recovery Photo (Repair Cost > \$9,000) ()

Injury ()

Item	Amount	Notes
Driver/Owner		
Continous No		
Damaged Portion		
QC Checked by (Engineer/Inspector)		
1) All Labor/Parts ()		
2) 30 Day Rental ()		
3) PPI Follow Up		
4) PPI Follow Up with Survey		
5) PPI Follow Up with Survey (Recovery)		
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NA 204546

PPI Check PPI Check

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	11/11/2021 14:48 (SGT)
Date of Accident	06/11/2021 14:25 (SGT)
Exact Location of Accident	Woodlands Ave 12, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT7653X
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	CRESCENT RENTAL & LEASING
Company Reg No	5XXXX992B
Email Address	ahmad1mustaqim@gmail.com
Mobile Phone No	(Phone) +65-84983927
Alternative Phone No	+65-84983927

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Colt
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1468

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMHCSNW00009112100
Cover Note Number	-

DRIVER

Name of Driver	AHMAD MUSTAQIM BIN AHMAD ISHAK
NRIC No	SXXXX214H

Date Of Birth	05/06/1996
Occupation	Indoor
Date Of Driving Pass	29/09/2021
Driving experience	2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84983927
Alt. Phone Number	-
Email Address	ahmad1mustaqim@gmail.com
Address	BLK 286 TAMPINES STREET 22 #07-169
Address complement	-
Postcode	520286
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	PUTERI NATASHA INKA BINTE FITRI
Gender	Female

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	XD2045C
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

IMPORTANT NOTICE

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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts n 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' 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.



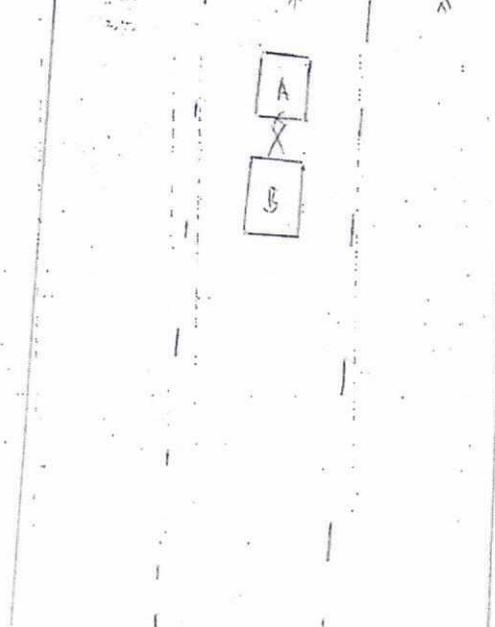
Policyholder's Signature / Date & Time

Sketch Plan

Vehicle A
SST 7653 X

Vehicle B
XD 2045 C

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



Witnessed by Reporting Centre Personnel

Woodlands Ave 12

Describe Circumstances of the Accident

On the stated date and time, I Vehicle A
was traveling along Woodland Ave 12
on the 2nd lane, Vehicle on the lane 3
cut into my lane and cause me to
to slow down my vehicle,
Suddenly I felt a huge impact
on my rear portion of my vehicle
I came down and check vehicle B
collided onto my rear portion.

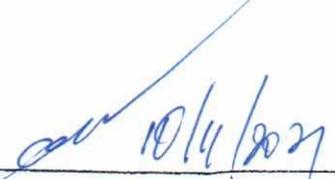
Declaration

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

VEHICLE NO: SST 7653 X

MAKE & MODEL : Mitsubishi Colt

AUTO / MANUAL

DATE OF ACCIDENT	06 / 11 / 2021	1.6 -CC
TIME OF ACCIDENT	2:25	AM / <u>PM</u>
LOCATION OF ACCIDENT	Woodland Ave 12	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / <u>PRIVATE USE</u> / PRIVATE HIRE	
NAME OF OWNER	CRESCENT RENTAL & LEASING	
EMAIL	scotzherelz@gmail.com	Office: MOBILE: 8498 3927
NRIC	53435992B	
CLAIM TYPE	OD / <u>THIRD PARTY</u> / REPORTING ONLY	
FLEET POLICY	YES / NO ?	
INSURANCE CO.	CHINT TAIAM	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	DMHCSNW00009112100	
NAME OF DRIVER	AS ABOVE / IF NO. AHMAD MUSTAQIM BIN AHMAD ISHAK	
NRIC	5962021411	
DATE OF BIRTH	05 / 06 / 1996	
ANY PASSENGER	YES / NO :	
NAME OF PASSENGER	PUTERI NATASHA INKA KISTY BINTE FITRI / 8815 8191	
GENDER OF PASSENGER	MALE / <u>FEMALE</u>	
OCCUPATION	Outdoor / <u>Indoor</u>	
DATE OF DRIVING PASS	18 / 04 / 2019	
GENDER	Male / female	
CONTACT NO.	Mobile: 8498 3927 Office: Home:	
EMAIL	ahmad4mustaqim@gmail.com	
ADDRESS	Blk 286 Tampines #22 #01-16a / S/520286	
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No: NO	INSURER: -
RELATIONSHIP	Employee / If No.	
WEATHER CONDITION	Clear / Raining / Other.	
ROAD SURFACE	Dry / Wet / Other.	
ANY INJURIES	No / If yes: Who?	
CONTACT NO.		
POLICE REPORT	No / If yes: Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO / IF YES, WHO?	
VEHICLE B NO.	XD 2045 C	Any Passenger:
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / NO	
WAS THERE ANY AUDIO RECORDED?	YES / NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / NO	
**WORKSHOP:	REVOLUTION AUTOMOTIVE	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO	

Motor Hire Car

M2406

N SN

AN0695A

Gov. 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.	DMHCSNW00009112100	Engine No.: 4G15KB0660 Cha. No.:JMYXTZ27A9Z000104
1. Index Mark and Registration Number of Vehicle	SJT7653X	AUTOSAFE *****
2. Name of Policy Holder	CRESCENT RENTAL & LEASING	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	25/08/2021 (13:42:59)	Excess Sect I . \$S2,000.00 Excess Sect. I (Outside Singapore) \$S4,000.00 Excess Sect. II \$S2,000.00 Excess Sect.II (Outside Singapore). \$S4,000.00 EX ON WINDSCREEN . \$S100.00
4. Date of Expiry of Insurance	24/08/2022	

5. Persons or Classes of Persons entitled to drive*
Any person who is driving on the Policyholder's order or with the Policyholder's 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 for the carriage of passengers or goods in connection with the Policyholder's business.
- (2) 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.
- (3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

HIRE PURCHASE CO.: GOLDBELL FINANCIAL SERVICES PTE. LTD.

*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 those 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).



TECK WEI CREDIT PTE LTD
Co. Reg. No. 200512300K
210 Turf Club Road
The Grandstand, 1st Fl
Singapore 287995
Tel: 6465 0020 Fax: 6465 0017
Email: info@teckwei.com.sg

Issued By: TECK WEI CREDIT PTE LTD
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	992B
Vehicle Details	
Vehicle No.:	SJT7653X
Vehicle to be Exported:	No
Intended Deregistration Date:	06 Nov 2021
Vehicle Make:	MITSUBISHI
Vehicle Model:	MITSUBISHI COLT TURBO VERSION-R
Primary Colour:	White
Manufacturing Year:	2008
Engine No.:	4G15KB0660
Chassis No.:	JMYXTZ27A9Z000104
Maximum Power Output:	113.0 kW (151 bhp)
Open Market Value:	\$23,094.00
Original Registration Date:	29 Oct 2009
First Registration Date:	29 Oct 2009
Transfer Count:	3
Actual ARF Paid:	\$23,094.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Aug 2029
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$29,328.00
COE Rebate Amount:	\$23,510.00
Total Rebate Amount:	\$23,510.00

The information contained herein is correct as at 06 Nov 2021

OK