Tell the second		So barge of				
NATTONAL Assessment Centr	re Services (mer standing		7			
Date In 10/01/02	Jeb description	Date &Time Completed	led Done by			
Res No Apa/ms622000318/13	SAS e-filing			0.000		
Veh No SKK65A	E-mail (within Shrs, AIC 2hrs)					
DOA 08/01/22 1835	i-Motor Claim Form					
OD / P / Reporting Only	i-Motor W/O (Within: OD 2i	ors TP 4hrs)		-		
OD Reporting Only	i-Photo Uploaded					
TP Insurer:	Assessment/Survey Report			20 HL 8		
T History	Ass't Report by Fax / Hand	to Owner/Wksp		A) (A-M)		
Preferred Wksp / INC Assign Wksp / QW: (		Tel: Fax:				
TP Particulars: Veh No:	SMM53866 INC	)/Non-INC( )				
Owner / Driver: (		Tel:	)	H		
Policy No: ( ) Pe	eriod: (	Cover Type: (	)	edin ed		
Confirmed by : (	Date:	Time:	)			
	Note-Est. Status (WO): N: 0-2	20%; P: 21-79%. F: 80-100	%]			
	Warranty: YES ( ) / NO (	)				
Excess: (\$ ) Loading: \$1,0	000 ( ) / \$2,000 ( )					
General Remarks;-			5 5			
1) Apply for Transport Allowance ( )/( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$3	Courtesy Car ( ) ( ) ( ) ( )					
Injury:						
Date/Time Actions		•		-		
Date/Time Actions			Messes-	0 T		
- 160						
	l r	di Chialita	Anit (\$)	Amt (		
		eparation Checklist	1st Bill	Add B		
laimant's Particulars :-		e Assessment (\$100); INC (\$80)				
river/Owner:	3) TF : Towing 4) FT : Follow-					
ontact No:	5) FT : Follow-	Through Survey (Resurvey) \$3 against INC Only (wef 10 Jan 2005)	0			
amaged Portion:	6) TR: Re-insp	ection \$7	5			
	7) N1 : Idao DA 8) NTUC Addit	+ SMRT Survey \$16	0	-		
C Checked by (Engr-In-Charge):	OD:					
	*N6: Repair		0			
uditors' Comments :-	Control of the Contro	*N7: Post Repair Inspection \$25 *N8: DV / Collect Excess Coordination \$5				
<u>t. 1:</u>	<u>TP</u> (N11): T	P (Non INC) against INC \$2	0			
1. 2 / 3.	9) N12. Idao M. Invoice dated	obile 3 Fee Charged				
- m. m.	levrine dated	Fee Charged	The state of			

SL0X221A0002 / LKK Auto Consultants Pte Ltd [408933] ENTRY DATE & TIME: 10/01/2022 18:17 (SGT) SUBMITTED BY: LKK Auto PU VERSION: 1 (10/01/2022 18:17 (SGT))



## 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</u> by the Policyholder and/or the Authorised <u>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

- 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

10/01/2022 18:17 (SGT) 08/01/2022 18:35 (SGT) Singapore BLK 101 BUKIT BATOK WEST CARPARK Singapore

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

Vehicle Registration Number

SKK65A

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No Email Address

Mobile Phone No.

Alternative Phone No

Yes

THE CAR ENTHUSIAST PTE LTD

2XXXXX480Z

sltanjanettan@gmail.com (Phone) +65-96223233

+65-96223233

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

BMW

5231

Private use

No - Claiming third party

Motor trade

Auto

2497

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy

Policy Number

Cover Note Number

MSIG Insurance (Singapore) Pte. Ltd.

ThirdParty

No

A 300188291 MTR

DRIVER

Name of Driver

NRIC No

POH CHEE PENG(BAI ZHIPENG)

SXXXX748H



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 vehicle or property damaged? Yes 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

PLS REFER TO THE ATTACHED STATEMENT.

ATTACHMENT(S)

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

Reasons for not uploading a video of the accident

Was there any audio recorded?

Yes Yes

24/08/1972

07/09/1993

28 YEARS AND 4 MONTHS

(Phone) +65-96223233

sltanjanettan@gmail.com

BLK 108 BUKIT BATOK WEST AVE 6

Outdoor

Male

#08-60

650108

Employee

Side Swipe

Clear

Dry

No

No

No

No

No

2

No

No

FILES TOO BIG CAN'T UPLOAD.

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

Accident report SL0X221A0002

SMM5386G

Private car

Page 2 of 13

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

#### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report correctly 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
- 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
- 8. Consent under the Personal Data Protection Act (PDPA)

10

I understand, acknow ledge, agree and consent that :

- (a) My insurer , my w orkshop 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
- (i) 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
- (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 law yers/law firms) which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

10/01/22 Witnessed by Reporting Centre

Personnel Sketch Plan SKK65A SMM 5386G

I	ibe Circ	DRI	VING	A	Lon	4	BIK	101	HDB	BUK	IT B	ATOK	WEB	Τ.
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I/We declare the foregoing particulars 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

rt

101

Ming Kitchen Live Seafood 田野,音 特勢 Seafood - SS

Bukit Barkdog Grooming Pet groomer

Block 101 HDB Bukit Batok West

St Ave 6

BUKIT BATOK West Ave 6
BUKIT BATOK West Ave 6 08 Jan 2022 635 PM

Gorgle

A PANTA BONDA BOND

100

Map data ©2022 Google 10 m L...

# ACCIDENT STATEMENT

ACCIDENT DATE: (08)	JAN 3022 (DD/M	IM/YYY), TIME: (18 ;	35 WHHMAN PA
LOCATION: BIK 10	1 HDB BUKIT	BATOK WEST CA	2 DARK
1. DETAILS OF VEHILL	7/8		J
a) VEHICLE NUM	BER: SKK 65A	3.5	
1900000	DMPANY: MSIG"		
CIPOLICY NUMBE	R: 43001882	91 MTD	
d)POLICYTYPE: 18	OMPREHENSIVE V THE	IRD PARTY / THIRD PARTY	
A 1. 11 11 10 10 11 11 11 11 11 11 11 11 11			
FITYPE SALOON	COUPE / MPV /VAN	LORRY / MOTORCYCLE	/OTIFERN
			FI (FIERS)
IF NO PIEACE OF	NG UNDER YOUR OW	MINSURANCE (YES/NO)	
2. INSURED / POUCY	HOLDER PARTY CLA	IM /)REPORTING ONLY)	
Almane THE	AP TAITUURA	PTE LTD (MALE)	
11.200.1	in on on	CRES III ON - SC	- WEFGA
* ~~			
HAND OF passanges DRIVER DOLL CL	IF DRIVER ALSO POLICE	CY HOLDER	68
Challet I all AME: I bri Ch	LE DENG( BAIZ	HIPENG) (MALE	
b) NRIC/FIN/PASSPC	RT: 57230748H	CONTACT: 91	FEMALE)
CIADDRESS: BIK	108 BUKIT BE	TOK WEST AUF	6 # 08-00
a)OCCUDATE OF BIRTH: [	24,08,1972	(DD/MM/YYYY)	
f) YEARS OF DRIVING	DOOR / OUTDOORD	9 YEARS	30
4. WAS DRIVER AN E	IPLOYER OF THE IN	SURED'S COMPANY?	○ ·
t. 110' VEPVITONS!	ILP OF THE DRIVER	WITH INCLIDED.	ES/(NO)
J. GIWEATHER CONDITI	ON: (CLEAR) RAININ	G / OTHERS	1
DIKOAD SURFACE((I	RY)/ WFT / OTHERS		
6. WAS ANYBODY INJUI 7. a) REPORTED TO POLI	SED (AES \ NO)	X .	
IF YES, PLEASE STATE	WHICH POLICE STATI	ION:	10
o. INIKU PARTY VEHICLE		U.A. Carrent	
the of passenger a) VEHICLE NUMBER	: SMM 3386	G_MODEL: HONDA	SHUTTLE.
( ) DRIVER'S NAME:	- T.		
9. THIRD PARTY VEHICLE	KI:	CONTACT;	
No all page d) VEHICLE NUMBER		11000	
		MODEL:	- F. F.
(Including driver) of DRIVER'S NAME:_ NRIC/FIN/PASSPO	RT:	CONTACT::	
(_)	3) 8	Ser I Media	
3. 3	65	¥	
_	HO	į	
·	ail = SITANTA	NETTAN @ GMAIL	CENA
611	- DUINNIP	INCLIDING GIVING	

VIDEO =



MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co.Reg No. 200412212G GST Reg. No. 20-0412212G
A Member of MSSAD INSURANCE GROUP

#### CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)

(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

## MOTOR TRADE (ROAD RISK) MotorTrade Road Risk Third Party Only Contract

Certificate No.

A 300188291 MTR

Excess : NIL

Windscreen Excess : NIL

1. Index Mark and Registration Number of Vehicle

Any Motor Vehicle the property of the Policyholder or in his custody or control. All steam-driven vehicles are excluded.

2. Name of Policyholder

The Car Enthusiast Pte Ltd

- Effective Date of the Commencement of Insurance for the purposes of the Act 26/10/2021
- Date of Expiry of Insurance 25/10/2022
- 5. Persons or Classes of Persons entitled to drive\*

(1) In respect of vehicle being used for purposes of demonstration.

Name of drivers as per attached list

Any other person provided he is driving with the Policyholder's permission and is accompanied by the Policyholder or a person in the Policyholder's employ -

Name of drivers as per attached list

- (2) In respect of vehicle being used for other motor trade purposes.
- \*Provided that the person driving is permitted in accordance with the licensing or other laws or 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 \*

Use only for Motor Trade purposes. The Policy does not cover use for hire or reward racing pace-making reliability trial or speed-testing.

N.B. Use solely for "Breakdown" purposes is not deemed to be use for hire or reward.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

Craig Ellis Chief Executive Officer