the second secon	Services :				
Date In: 14/01/2022	Job description		Date &Tune Completed	Done	by
REINO NA/CTI 22000542/m4	SAS e-filing		1		
VehNo SLA 5252J	E-mail (w.dos 8ko	s AIC Thrs,			
D.O.A 11/01/2022 14:15	i-Motor Claim	Form	: !		
	i-Motor W/O (v		TP 4hrs)		
OD (TP)! Reporting Only	i-Photo Upload	ed			
and the second s	Assessment/Surv	ey Report	1		1850/2011
TP Insurer	Ass't Report by J	cax / Hand to	Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (Tel: F	ax:	
TP Particulars: Veh No: S	KZ 2825G	. INC ()/Non-INC ()		
Owner / Driver: (Tel:)	en (m) (m)
Policy No: () Per	riod: ()	Cover Type: ()	
Confirmed by : (Date:	Times)	
Insured/Driver Liability: (%) [1	Note-Est Status (WC): N: 0-20	%; P: 21-79%. F: 80-1	100%]	
Year of Registration: ()	Warranty: YES ()/NO()		
Excess: (\$) Loading: \$1,0	00()/\$2,000()			
General Remarks:-					
() Walk-In Customer: Customer's info	rmation strictly Confi	dential & Stri	ctly NO refer of repairer.		
() Total Loss Case : to e-mail Insure	Date				
Drive-In () / Towed-In (); Invoice		(); To	wing Co. ()
Remarks:- (INC horline: 6788 6616)			Date&Time Comple*ad	Done	by
		C PROVIDE X P. P.			
1) Apply for Transport Allowance ()/(Courtesy Car ()		The same of the sa	000 100 0 000 0000000000000000000000000	
77 117	Courtesy Car ()				×)(*)****(1):)**
2) QC Check / Post Repair Inspection	()				>
QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > \$3	()				
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SN09221E0003 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 14/01/2022 13:24 (SGT) SUBMITTED BY: Renee VERSION: 1 (14/01/2022 13:24 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> 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 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,

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.
- 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

14/01/2022 13:24 (SGT) 11/01/2022 14:15 (SGT)

Singapore

MSCP OF HONG LIM COMPLEX CARPARK

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLA5252J

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner NRIC No

Email Address

Mobile Phone No Alternative Phone No. No

LIM YU YANG SXXXX052E

YUYANG.LIM@GMAIL.COM (Phone) +65-96630928

+65-96630928

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

316i

Private use

No - Claiming third party

Private car Auto

1598

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy

Policy Number Cover Note Number China Taiping Insurance (Singapore) Pte. Ltd.

Comprehensive

No

DMPCSNA00038572102

DRIVER

Name of Driver NRIC No.

LIM YU YANG SXXXX052E

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

20/11/1985 Indoor 08/09/2005

16 YEARS AND 4 MONTHS

Male

(Phone) +65-96630928

+65-96630928

YUYANG.LIM@GMAIL.COM BLK 212C COMPASSVALE DRIVE

Hit and run / Vandalism / Damaged whilst parked

#14-105 543212 Yes

No

.....

Dry

No

No

Yes

0

No

2

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? 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?

Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Yes

Geylang Neighbourhood Police Centre

(Phone) +65-18008486999 (Fax) +65-68486799

1 Cassia Link Singapore 397618

NO

PLS REFER TO THE POLICE REPORT: T/20220114/2024

ATTACHMENT(S)

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

Was there any audio recorded?

Yes

Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKZ2825G Vehicle Manufacturer Mitsubishi

Vehicle Model
Vehicle Variant

Vehicle Colour - Private car

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the addident to speed up the claims process.
- 2. 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 Formby 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 haurance 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 fodgement 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)

funderstand, acknowledge, agree and consent that :

- (a) My insurer imp wiorkshop 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
- (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
- (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

14/1/2022

(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 & 10:30am

Driver's Signature (If driver is not the policyholder) / Date & Time 10:30am

Witnessed by Reporting Centr Personnel

Sketch Plan

NO Sketch Plan

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Declaration

I We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Driver's Signature (if driver is not the policyholder) / Date & Time 10136 am

Witnessed by Reporting Centre

Personnel





T/20220114/2024

1 of 3

Report No. T/20220114/2024

Police Station Of Origin: Geylang N.P.C 1 Cassia Link SINGAPORE 397618 Tel No: 1800-8486999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/01/2022 12:05		Vide Report No.:	Station Diary No.: 23			
Informa	nt's Partic	ulars				
Name of Informant: LIM YU YANG			Address: APT BLK 212C COMPASSVALE DRIVE #14-105 SINGAPORE 543212			
ID Type / ID No.; NRIC NO / S8540052E			Contact No.: Home/Office: Mobile: 96630928			
Nationality: SINGAPORE CITIZEN			Email: YUYANG.LIM@gmail.com			
Sex: Age: Date of Birth: Male 36 20/11/1985		Type of Informant: Vehicle Owner				
Race: Chinese		Language:	Institution / School Name:			
Occupation: FINANCIAL CONSULTANT			Driving Licence Informa Class: 3	tion: Date of Expiry:		

General Infor	mation of the Accide	nt			
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 11/01/2022 14:15	Type of Location: Car Park	
Location:					
UPPER CRO	SS STREET	Road Surface:	F	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume:	
Type of Collis Moving Vehic	ion: le Against - Parked Ve	hicle	8	Anyone conveyed by ambulance:	

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKZ2825G	Car	MITSUBISHI		Red		0
SLA5252J	Car	BMW	316i	White	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLA5252J	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.			





Police Station Of Origin: Geylang N.P.C 1 Cassia Link SINGAPORE 397618 Tel No: 1800-8486999 2 of 3 Report No. T/20220114/2024

CONTINUATION OF REPORT

Brief Details.

On 11 January 2022, at about 1000hrs. I parked my car SLA5252J at the MSCP of Hong Lim Complex. I could not recall which parking lot that I've parked. I only know that it is at Deck 4A or 4B at the said MSCP. Everything was intact at that point of time, I parked there and I left for work.

On the following day, 12 January 2022 at about 1845hrs when I went to my car after my work at the same MSCP and I discovered that my front bumper sustained some scratches and the license plate number was dented and dislodged one side. I went to check my in-car camera and discovered that on 11 January at about 1415hrs onwards, a red Mitsubishi car bearing the license plate number SKZ2825G tried to parked at the opposite side and while reversing, the car hit onto my front area of my car. I am lodging this report to claim against this driver.





Police Station Of Origin: Geylang N.P.C 1 Cassia Link SINGAPORE 397618 Tel No: 1800-8486999 3 of 3 Report No. T/20220114/2024

CONTINUATION OF REPORT

Sketch Pla	n
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Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature of Officer Recording The Report G / Sgt 1 YIP YONG NAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 14/01/2022 12:05
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
Authentication Stamp	

Authentication Stamp NP168

VEHICLE NO: SLA 5252 J MAKE & MODEL : BMW 3161 (AUTO / MANUAL DATE OF ACCIDENT 11 101 2022 ·cc 100 (1598cc) TIME OF ACCIDENT (1415) 2:15 AM (PM) LOCATION OF ACCIDENT Hona Lim Car park EXACT FURPOSE USED AT TIME OF ACCIDENT EMPLOYMENT (PRIVATE USE) / PRIVATE HIRE NAME OF OWNER Vana (Lin Yuyana YUYANG . LIM @GMAIL . COM EMAIL Office MOBILE 96630908 NRIC 58540052E CLAIM TYPE / THIRD PARTY / REPORTING ONLY FLEET POLICY. YES (NO)? INSURANCE CO. Jaiping Insurance China TYPE OF COVERAGE Comprehensive / Third Party / Third Party Fire & Theft POLICY NO. DMPC SNA00038572102 NAME OF DRIVER AS ABOVE IF NO. DATE OF BIRTH 201 ANY PASSENGER YES INO NAME OF PASSENGER GENDER OF PASSENGER MALE / FEMALE OCCUPATION Outdoor Indoor DATE OF DRIVING PASS 12005 GENDER Male Female CONTACT NO. Mobile. Office. Home, EMAIL. ADDRESS 2120 Compassivale Drive #14-105 5 543212 DOES DRIVER OWN OTHER VEHICLES? NO / If yes Reg No. INSURER. RELATIONSHIP Employee / If No. OWNER WEATHER CONDITION Clear) / Raining Other: ROAD SURFACE Dry / Wel / Other: ANY INILIRIES Ng/ If yes : Who? CONTACT NO. POLICE REPORT No 1f yes . Where? NOTICE OF INTENDED PROSECUTION GIVEN NO/IF YES: WHO? VEHICLE B NO. Any Passenger : SKZ 2828 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? WAS THERE ANY AUDIO RECORDED? SCENE ACCIDENT PHOTOS TAKEN? **WORKSHOP: Have you been approach by unknown person soliciting (s) / offering accident claims assistance? YES / NO





Motor Private Car

MX1E

R

BR0086A

CERTIFICATE OF INSURANCE orar venicies (Third-Party Risks and Compensation) Act (Chapter 1 Motor Vehicles (Third-Party Risks and Compensation) Roles, 1980 Road Transport Act, 1887 (Maksysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Cov. Type:C

CERTIFICATE No.

DMPCSNA00038572102

Engine No : A368J793N13B16A Cha. No.:WBA3A12060J722237

1. Index Mark and Registration

SLA5252J

AUTOSAFE

Number of Vehicle

2. Name of Policy Holder

LIM YU YANG

Named Drivers Ex Sect. I

8\$500.00

Effective date of the Commencement of 102/04/2021 insurance for the purposes of the Regulations. (00:00:00) Ordinance or Enactment

02/04/2021

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25

8\$3,000.00 \$\$500.00

4. Date of Expiry of Insurance 01/04/2022

Ex Sect. I - Age >= 26 * Age as at date of accident EX ON WINDSCREEN

\$\$100.00

5. Persons or Classes of Persons entitled to drive"

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his 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:*

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade. Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first \$\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: STANDARD CHARTERED BANK(S)LIMITED AS HP OWNER

* Limitations rendered imperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Melaysia), 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Gan Li Jia Jesca Authorised Officer

Authorised Signatory

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

Q6389 6111

6222 1033

www.sg.cntaiping.com