

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: 01/03/2022 15:19	Job description	Date & Time Completed	Done by
Ref No: NA / Tm 22001924 / m4	SAS e-filing		
Veh No: SKK 1275D	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 01/03/2022 00:10	i-Motor Claim Form		
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars:	Veh No: SJM3977A	INC () / Non-INC ()
Owner / Driver: ()	Tel: ()	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: ()	Date: ()	Time: ()
Insured/Driver Liability: () % [Note-Est. Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]		
Year of Registration: () Warranty: YES () / NO ()		
Excess: (\$) Loading: \$1,000 () / \$2,000 ()		

General Remarks:-

() Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co. ()

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury : _____

Date/Time	Actions

NA 2200559	Invoice Preparation Checklist		Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);			
	2) DA : Damage Assessment (\$100); INC (\$80)			
Driver/Owner:	3) TF : Towing Fee \$40/\$45			
Contact No:	4) FT : Follow-Through Survey \$120			
Damaged Portion:	5) FT : Follow-Through Survey (Resurvey) \$30			
QC Checked by (Engr-In-Charge):	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR : Re-inspection \$75			
Auditors' Comments :-	7) N1 : Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
Cat. 1:	ON*			
Cat. 2 / 3:	*N5: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
	TP (N11) : TP (Non INC) against INC \$20			
	9) N12: Idac Mobile 30			
	Invoice dated	Fee Charged		
	Invoice dated	Fee Charged		

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	01/03/2022 15:19 (SGT)
Date of Accident	01/03/2022 00:10 (SGT)
Exact Location of Accident	158 Woodlands Street 13, Block 158, Singapore 730158
Additional Location Information	CARPARK LOT NO. 370
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK1275D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KEE JASLINE
NRIC No	SXXXX454F
Email Address	xiao_hei86@hotmail.com
Mobile Phone No	(Phone) +65-90229610
Alternative Phone No	+65-90229610

VEHICLE PARTICULARS

Manufacturer	BMW
Model	520i
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	1997

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MQ005484
Cover Note Number	-

DRIVER

Name of Driver	KEE JASLINE
NRIC No	SXXXX454F

Date Of Birth	14/10/1986
Occupation	Indoor
Date Of Driving Pass	15/07/2005
Driving experience	16 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90229610
Alt. Phone Number	+65-90229610
Email Address	xiao_hei86@hotmail.com
Address	BLK 158 WOODLANDS STREET 13
Address complement	#10-723
Postcode	730158
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT : T/20220301/7015

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	SJM3977A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

SKETCH PLAN

IMPORTANT NOTICE

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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' 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

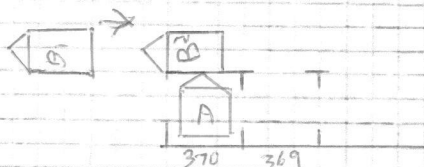
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



(A) - SKK1275D

(B) - SJM3977A

LOT NO. 370 of carpark of Blk 158
Woodlands St 13.

Describe Circumstances of the Accident

- Refer to police report attached -
Report No.: T/20220301/7015

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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

 01/03/2022

Witnessed by Reporting Centre
Personnel



SINGAPORE POLICE FORCE



T/20220301/7015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3
Report No. T/20220301/7015

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/03/2022 14:37		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: KEE JASLINE			Address: 158 WOODLANDS STREET 13 #10-723 SINGAPORE 730158		
ID Type / ID No.: NRIC NO / S8630454F			Contact No.: Home/Office: Mobile: 90229610		
Nationality: SINGAPORE CITIZEN			Email: XIAO_HEI86@HOTMAIL.COM		
Sex: Female	Age: 35	Date of Birth: 14/10/1986	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: CIVIL SERVANT			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 01/03/2022 00:10	Type of Location: Car Park
Location: WOODLANDS STREET 13				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 20 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJM3977A	Car					0
SKK1275D	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20220301/7015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220301/7015

CONTINUATION OF REPORT

Vehicle Owner				
Name	KEE JASLINE		ID No.	S8630454F
Related Vehicle	NIL		Contact No.	90229610
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL

Brief Details.

On the stated date and time, my Vehicle SKK1275D was parked at Lot No. 370 of carpark of Blk 158 Woodlands St 13. A Vehicle SJM3977A reversed and collided into the front portion of my Vehicle. He left a name card on my windscreen. On 8.30am of 01/03/2022, i noticed the damages and name card on my front windscreen and i proceeded to contact the number stated on the name card, but the guy told me that i got the wrong number. The name card does not belong to the driver of Vehicle SJM3977A.



**SINGAPORE
POLICE FORCE**



T/20220301/7015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20220301/7015

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
STEPHANIE, CHEUNG TSZ YING
Contact No.: 96208032

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
01/03/2022 14:37

Classification Of Case:

VEHICLE NO: SKK1275D

MAKE & MODEL: BMW 520i

AUTO / MANUAL

DATE OF ACCIDENT	01.03.2022		•CC: 2,000 (1997cc)
TIME OF ACCIDENT	00:10 AM / PM		
LOCATION OF ACCIDENT	Blk 158 Woodlands St. 13 Carpark		
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / <u>PRIVATE USE</u> / PRIVATE HIRE		
NAME OF OWNER	Kee Jasline		
EMAIL: xiao_hei86@hotmail.com	Office:	MOBILE: 9022 9610	
NRIC	S8630454F		
CLAIM TYPE	OD / <u>THIRD PARTY</u> / REPORTING ONLY		
FLEET POLICY:	YES / <u>NO</u> ?		
INSURANCE CO.	Tokio Marine		
TYPE OF COVERAGE	<u>Comprehensive</u> / Third Party / Third Party Fire & Theft		
POLICY NO.	MQ005484		
NAME OF DRIVER	AS ABOVE / IF NO:		
NRIC	S8630454F		
DATE OF BIRTH	14 / 10 / 1986		
ANY PASSENGER	YES / <u>NO</u> :		
NAME OF PASSENGER			
GENDER OF PASSENGER	MALE / FEMALE		
OCCUPATION	Outdoor / <u>Indoor</u>		
DATE OF DRIVING PASS	15 / 07 / 2005		
GENDER	Male / <u>Female</u>		
CONTACT NO.	Mobile: 9022 9610 Office: Home:		
EMAIL:			
ADDRESS	Blk 158 Woodlands St. 13 #10-723 S(750158)		
DOES DRIVER OWN OTHER VEHICLES?	<u>NO</u> / If yes, Reg No:		INSURER:
RELATIONSHIP	Employee / If No, owner		
WEATHER CONDITION	<u>Clear</u> / Raining / Other:		
ROAD SURFACE	<u>Dry</u> / Wet / Other:		
ANY INJURIES	<u>No</u> / If yes, Who?		
CONTACT NO.			
POLICE REPORT	<u>No</u> / If yes, Where?		
NOTICE OF INTENDED PROSECUTION GIVEN?	<u>NO</u> / IF YES, WHO?		
VEHICLE B NO.	SSM 3977A	Any Passenger: unknown	
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 / <u>NO</u>		
WAS THERE ANY AUDIO RECORDED?	YES / <u>NO</u>		
SCENE ACCIDENT PHOTOS TAKEN?	YES / <u>NO</u>		
**WORKSHOP:	Advance Auto Garage		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / <u>NO</u>		

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com



TOKIO MARINE
INSURANCE GROUP

A member of the
Tokio Marine Group

Certificate of Insurance

FORM MX1

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.: MQ005484 (Private Car)

- | | | |
|---|-----------------------|---------------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SKK1275D | Chassis No.: WBAXG120X0DV98939 |
| 2. Name of Policyholder | KEE JASLINE | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 21/12/2021 (00:00:00) | |
| 4. Date of Expiry of Insurance | 19/12/2022 | |
| 5. Persons or Class 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. 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*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or 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.

* 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

Account No: 1002DDA

			Account No.
Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 800.00	(Original Excess : SGD 800.00)
	Additional Excess for Unnamed Driver(s)	SGD 500.00	
	Additional Excess for Young or Inexperience Driver(s)	SGD 3,500.00	
	WindScreen Excess	SGD 100.00	
Financial Interest:	VM AUTOFINANCE PTE LTD		

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature