

Preferred Wksp / INC Assign Wksp / QW: ()		Tel: ()		Fax: ()	
TP Particulars:		Veh No: FBR 3502E		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 ()		()	

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] ()		

[illegible]

		Invoice Preparation Checklist	Am't (\$)	Am't (\$)
			1st Bill	Am't (\$)
Claimant's Particulars :-		1) AR : Accident Reporting (\$30),		
Driver/Owner:		2) DA : Damage Assessment (\$100), INC (\$30)		
Contact No.		3) TF : Towing Fee \$40 \$45		
Damaged Portion:		4) FT : Follow-Through Survey \$120		
		5) FT : Follow-Through Survey (Resurvey) \$30		
		For claiming against INC Only. (wef 10 Jan 2014)		
		6) TR : Re-inspection \$15		
		7) N1 : 1dc DA + SMRT Survey \$160		
		8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):		Q1C		
		* N5: Courtesy Car / Tpt Allowance \$5		
		* N6: Repair Coordination \$10		
		* N7: Post Repair Inspection \$25		
Auditors' Comments :-		* N8: DV / Collect Excess Coordination \$5		
		1P (\$11) : TP (b) n INC) against INC \$10		
		9) N12: Blue Mobile \$10		
Cat 1		Invoice dated	Acc Charges	
Cat 2 + 3		Invoice dated	Acc Charges	



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	23/03/2022 16:08 (SGT)
Date of Accident	23/03/2022 08:40 (SGT)
Exact Location of Accident	Moulmein Rd, Singapore
Additional Location Information	BEFORE MANDALAY ROAD LAMP POST 20
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS4105A
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM LIAN SOON
NRIC No	SXXXX933B
Email Address	yzwsfbo@gmail.com
Mobile Phone No	(Phone) +65-98313576
Alternative Phone No	+65-98313576

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	1598

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	A 29150734 AT2
Cover Note Number	-

DRIVER

Name of Driver	LIM LIAN SOON
NRIC No	SXXXX933B



Date Of Birth	21/04/1956
Occupation	Indoor
Date Of Driving Pass	29/03/1978
Driving experience	44 YEARS
Gender	Male
Mobile Number	(Phone) +65-98313576
Alt. Phone Number	+65-98313576
Email Address	yzwsfbo@gmail.com
Address	BLK 136 SIMEI STREET 1 #05-84
Address complement	-
Postcode	520136
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	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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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?	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	FBR3502E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LIM LIAN SOON
Gender	Male
Phone No	(Phone) +-@.
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SKS4105A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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' 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.

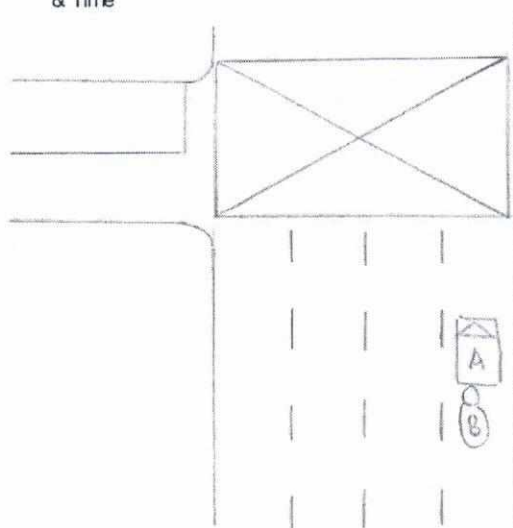
Policyholder's Signature / Date & Time

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

28/03/2022

Witnessed by Reporting Centre Personnel

Sketch Plan



Vehicle A: SKS 4105A
Vehicle B: FBR 3502E

mountmeim Road before
mandalay Road lamp
Post 30

Describe Circumstances of the Accident

On the stated date & time, I, vehicle A (SKS4105A) was stationary at the stated location on the extreme right lane as the traffic light was still in red. Seconds later, I felt an impact from the rear portion of my vehicle. I alighted & realised vehicle B (FBR3503E) 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



23/03/2022
Witnessed by Reporting Centre Personnel

only

Date of Accident : 23/03/2022 Accident Time: 0840hrs (24-HR-FORMAT)
Accident Place : Moulmein Road before mandalay Road Lamp Post 20
Vehicle Reg. No (Car plate No.) : SKS4105A Vehicle Make/Model: Toyota Altis
Insurance Company : MSIG Policy No. A29150734 AT2
Name of Registered Owner : Company / Individual Lim Lian Soon
ID of Registered Owner : Co Reg No: - Owner's NRIC No: S12069338
: Co Contact No: - Owner's Contact No: 98313576
DRIVER'S Name : Lim Lian Soon DRIVER'S NRIC No: S12069338
DRIVER'S Date of Birth : 21 Apr 1956 DRIVER'S License Pass Date 29 mar 1978
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner
DRIVER'S Address : APT BIK 136 Simei Street 1 #05-04 Singapore 1052
DRIVER'S Contact No./ Alt No. : 1) 98313576 2) -
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)
Email Address : -
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): 01 Passenger Name: - 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: Lim Lian Soon
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: <u>FBR3502E</u>	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: _____

**MSIG**

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

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.

Form M.X.1
Individual Ownership

Toyota DriveElite 360
Comprehensive

Certificate No. A 29150734 AT2

Excess : SGD500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle

SKS4105A

2. Name of Policyholder

Lim Lian Soon

3. Effective Date of the Commencement of Insurance for the purposes of the Act

14/04/2021

4. Date of Expiry of Insurance

13/04/2022

5. Persons or Classes of Persons entitled to drive*

Lim Lian Soon

Lim Chiew Yee

Any other person provided he 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 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 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 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.

All Claims related repair can be carried out at Borneo Motors (S) Pte Ltd or our authorised workshops. Windscreen Excess is waived at Borneo Motors (S) for windscreen related claims. This Policy includes Courtesy Car benefit.

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 offence 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

for Chief Executive Officer