

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS3/SCD22003325/4943

ASSIGNMENT

From: Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

SNC335C

at Workshop m/s

2-one

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.

N/S	O/S

Bal. or Market Value:

\$95k.

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

5

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

3 2675

Vehicle: IN / OUT

Date:

Person Contacted:

LTA 453405

Veh No:

SNC335C

Yr Regn:

13/11/15

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

(A /

Make:

Toyota

Alphard.c

2493

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

97643

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

AGH30 0030829

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

235/50 R18

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

6

mm

Rear

6

R/Bal.

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

08/04/22

D.O.I.

13/4/22

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

2p 2DK.

No Estimate PRS

Tailgate Jammed can't open

Survey on 13-4-22 @ 11.39am.

Disinfect on 14-4-22 @ 12.55pm.

Resurvey before party 18-4-22 @ 10.30am.

After repair 21-4-22 @ 10.39am.

Repair range \$9k-10k. 5 days.

Submit PRS.

Date/Time, File Pass to?

☐

Preli. Report

1) 09/5/22

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) S + RS. SI

) Photos

) Others

TOTAL

Report Format :

PRS

Lump Sum / I.B.I. (\$

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

SNC 335C

Toyota Alphard 2015 model

AGH 300030829

Tailgate	2164.40
Tailgate reflector LH	592.50
Tailgate centre chrome	655.70
Tailgate inner lock	763.30
Tailgate inner trim board	736.60
Tailgate weatherstrip	386.90
Rear bumper	1853.20
Rear bumper PDC sensor LH	386.60
tail lamp LH	543.30
tail lamp lower garnish LH	386.60
Rear end panel	721.10
Rear fender LH	1283.30
Rear fender trim board LH	1010.20
Rear windscreen moulding	98.40

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	09/04/2022 11:45 (SGT)
Date of Accident	08/04/2022 15:20 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNC335C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CAPITAL J
Company Reg No	53411267J
Email Address	lovinyooo@gmail.com
Mobile Phone No	(Phone) +65-83887655
Alternative Phone No	+65-83887655

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Alphard
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	2493

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MQ003873
Cover Note Number	-

DRIVER

Name of Driver	YANG YO HSIANG
NRIC No	S7771780C

Date Of Birth	14/10/1977
Occupation	Outdoor
Date Of Driving Pass	23/02/2018
Driving experience	4 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83887655
Alt. Phone Number	-
Email Address	lovinyooo@gmail.com
Address	1 SIGLAP ROAD #05-04
Address complement	-
Postcode	448906
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	DIRECTOR
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	JOHNNY
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Geylang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008486999
Alt. Police Station Phone No	(Fax) +65-68486799
Police Station Address	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20220408/2070.

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	YM3945J
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	MUHAMED AIDILL BIN SHAHFUDEEN
Contact Number	(Phone) +65-887567444
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	YANG YO HSIANG
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SNC335C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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. 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 lodgment 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:

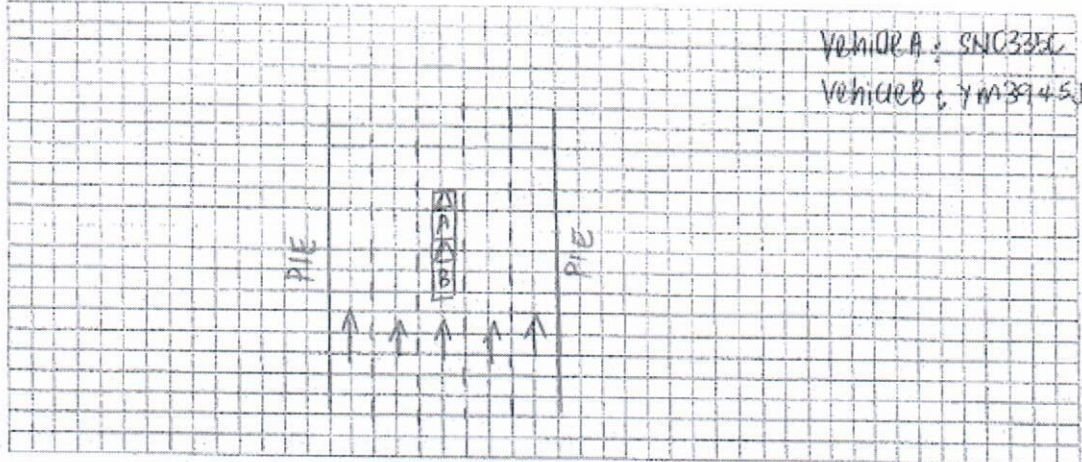
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to
police report

DECLARATION

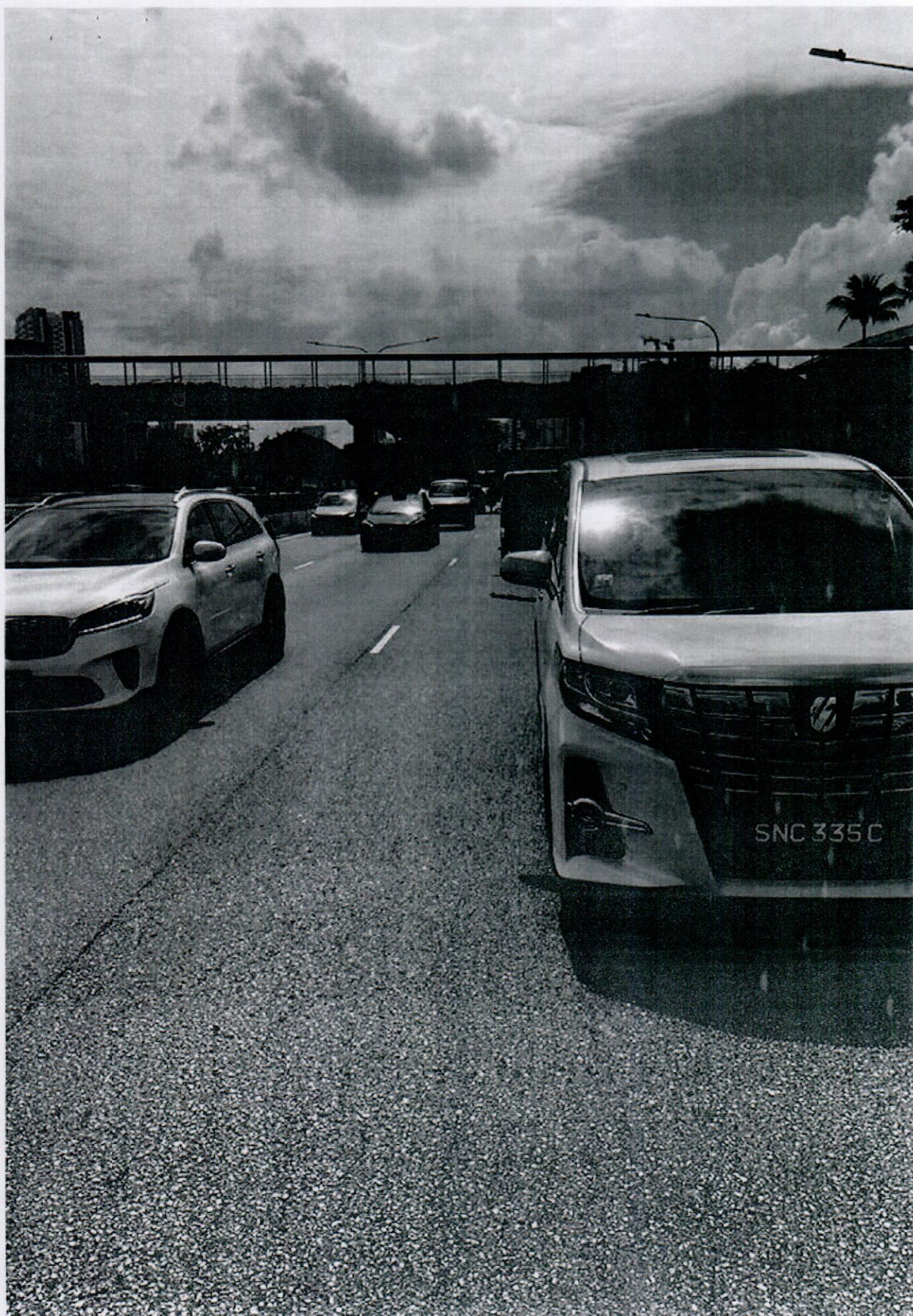
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

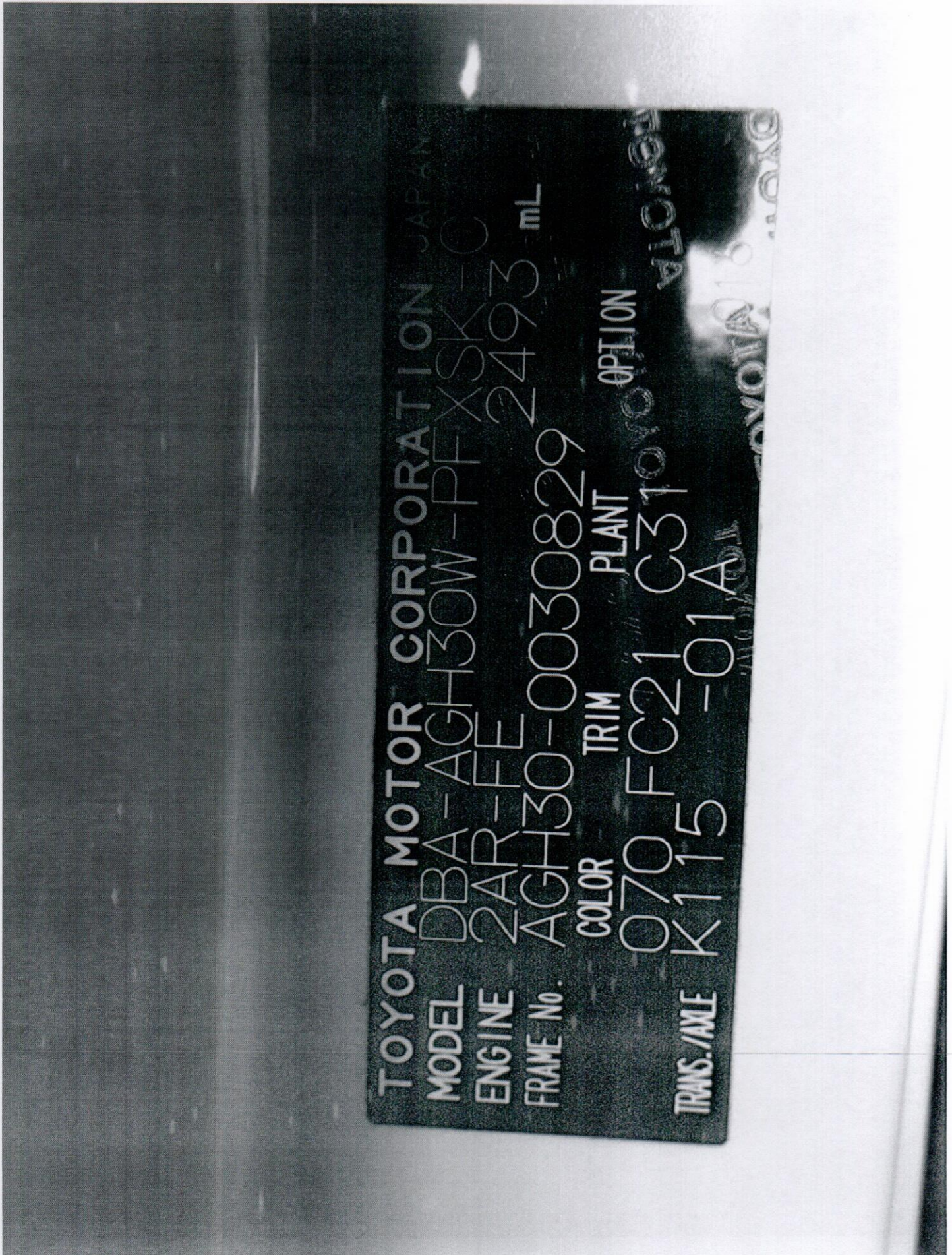


Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/PIN No.:





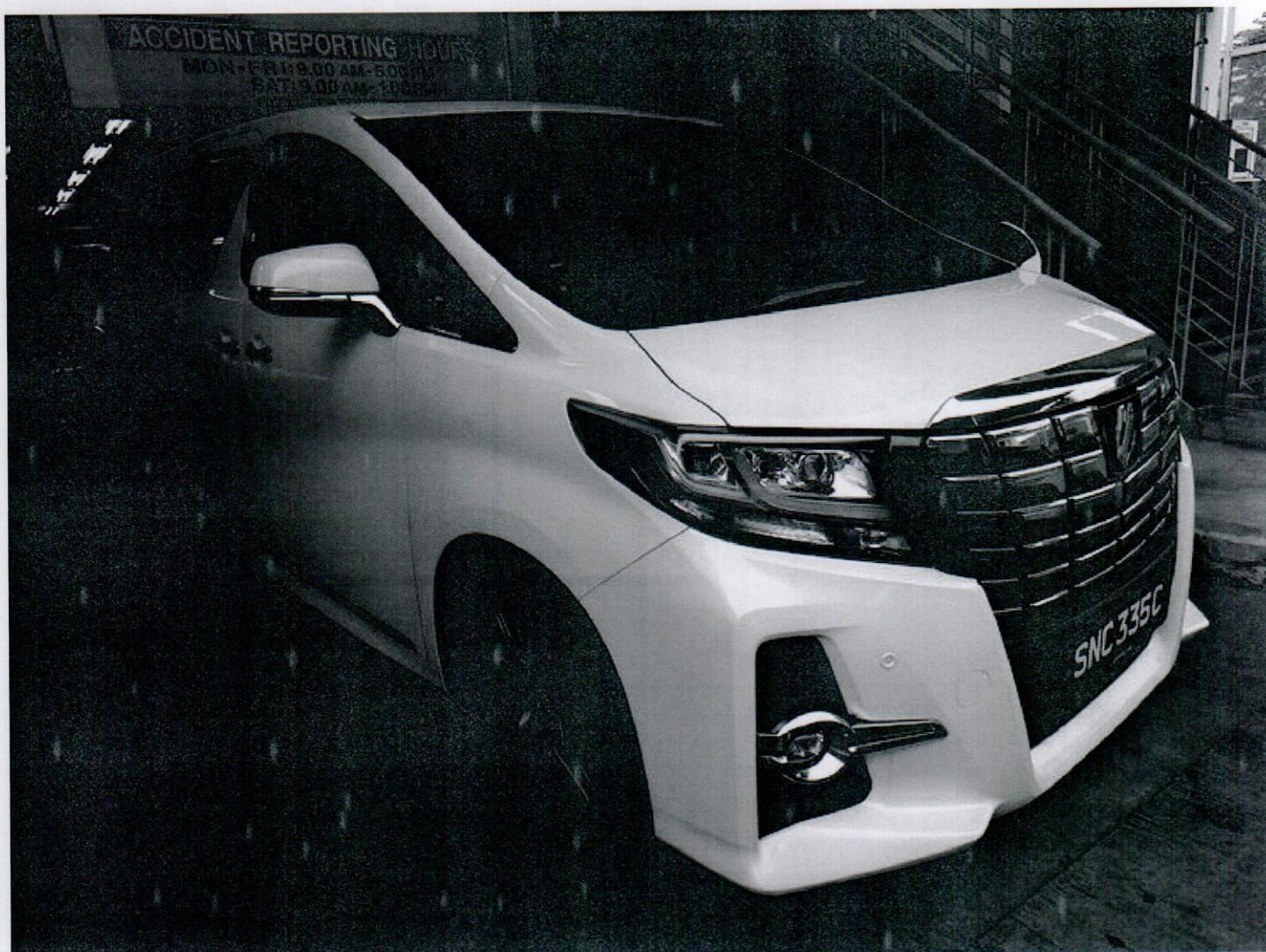


TOYOTA MOTOR CORPORATION JAPAN	
MODEL	DBA-AGH30W-PFXSK-O
ENGINE	2AR-FE 2493 mL
FRAME No.	AGH30-0030829
COLOR	070
TRIM	FC21
PLANT	C31
OPTION	
TRANS./AXLE	K115 -01A













**SINGAPORE
POLICE FORCE**



T/20220408/2068

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

1 of 3

Report No. T/20220408/2068

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/04/2022 16:27	Vide Report No.:	Station Diary No.: 69
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Informant's Particulars

Name of Informant: YANG YO HSIANG	Address: BLK 1 SIGLAP ROAD #05-04 SINGAPORE 448906		
ID Type / ID No.: NRIC NO / S7771780C	Contact No.: Home/Office: Mobile: 83887655		
Nationality: AMERICAN	Email:		
Sex: Male	Age: 44	Date of Birth: 14/10/1977	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: Real estate agent	Driving Licence Information: Class: 3A Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 08/04/2022 15:20	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMC335C	Car				Seriously Damaged	1
YM3945J	Lorry				Slightly Damaged	1

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20220408/2068

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

2 of 3

Report No. T/20220408/2068

CONTINUATION OF REPORT

Driver			
Name	YANG YO HSIANG	ID No.	S7771780C
Related Vehicle	SMC335C (Car)	Contact No.	83887655
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	MUHAMED AIDIL BIN SHAHFUDEEN	ID No.	T0200155H
Related Vehicle	YM3945J (Lorry)	Contact No.	88756744
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned date, time and location, I was travelling along PIE Changi and i was trying to filter to the left when suddenly there was a impact at the back of my car. I then came down to check the damages and noticed that it was a SCDF lorry that banged my car. The driver asked if i was okay and i told him yes. But currently i feel abit of strain on my neck and back. We exchange particulars and they handed me a piece of paper to lodge a traffic accident report. No Traffic police or Ambulance was at scene. The SCDF called for LTA.

**SINGAPORE
POLICE FORCE**

T/20220408/2068

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

3 of 3

Report No. T/20220408/2068

CONTINUATION OF REPORT**Sketch Plan**

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 PHUA JIA JIN, DARREN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

08/04/2022 16:27

Officer In Charge Of Case:

TP / GIA /

Other MUHAMMAD NOOR BIN ABDUL
RAHMAN

Contact No.: 65476201

Classification Of Case:

NP168



**SINGAPORE
POLICE FORCE**



T/20220408/2070

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

1 of 3

Report No. T/20220408/2070

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/04/2022 16:34		Vide Report No.: T/20220408/2068		Station Diary No.: 73	
Informant's Particulars					
Name of Informant: YANG YO HSIANG			Address: BLK 1 SIGLAP ROAD #05-04 SINGAPORE 448906		
ID Type / ID No.: NRIC NO / S7771780C			Contact No.: Home/Office: Mobile: 83887655		
Nationality: AMERICAN			Email:		
Sex: Male	Age: 44	Date of Birth: 14/10/1977	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: real estate agent			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 08/04/2022 15:20	Type of Location:
Location: PAN-ISLAND EXPRESSWAY				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20220408/2070

2 of 3

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

Report No. T/20220408/2070

CONTINUATION OF REPORT

Driver			
Name	YANG YO HSIANG		ID No. S7771780C
Related Vehicle	NIL		Contact No. 83887655
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL		Degree of Injury NIL

Brief Details.

My vehicle number should be SNC335C



**SINGAPORE
POLICE FORCE**

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



T/20220408/2070

3 of 3

Report No. T/20220408/2070

CONTINUATION OF REPORT

Sketch Plan

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 PHUA JIA JIN, DARREN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

08/04/2022 16:34

Officer In Charge Of Case:

TP / GIA /

Other MUHAMMAD NOOR BIN ABDUL
RAHMAN

Contact No.: 65476201

Classification Of Case:

NP168

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: tms@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine GroupTOKIO MARINE
INSURANCE GROUP

Certificate of Insurance

FORM MX1RN

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.: MQ003873 (Private Car)
- | | | |
|--|---|---------------------------|
| 1. Index Mark and Registration Number of Vehicle | SNA7402G | Chassis No.: AGH300030829 |
| 2. Name of Policyholder | CAPITAL J | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 30/08/2021 (16:24:40) | |
| 4. Date of Expiry of Insurance | 29/08/2022 | |
| 5. Persons or Class of Persons entitled to drive* | Restricted named drivers: YANG YO HSING | |

* 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 private 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 Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION			Account No: 234800A
Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 1,000.00	(Original Excess : SGD 1,000.00)
	Windscreen Excess	SGD 100.00	
Financial Interest:	MOTORWAY CREDIT PTE LTD		
Additional Terms:	(1) Restricted named driver basis. (2) No cover for valet parking.		

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature

10 Sin Ming Drive Singapore 575701
www.lta.gov.sg

08 Sep 2021

Our ref 0809210203N061026088

CAPITAL J
APT BLK 42 MACTAGGART ROAD
#06-02 MACTAGGART BUILDING
SINGAPORE 368086

Dear Sir/Madam

You Have Successfully Replaced Vehicle Registration No. SNA7402G With SNC335C

You have successfully replaced your vehicle registration number. The vehicle, whose previous number was SNA7402G, now has the number SNC335C.

What You Need To Do:

- You must show the new number SNC335C on your vehicle by 11 Sep 2021.

The vehicle details after the transaction are:

Transaction No. : 20210908122813577561
Vehicle Registration No. : SNC335C (Previously SNA7402G)
Vehicle Make : TOYOTA
Vehicle Model : APT BLK 42 SNC PACKAGE A
Chassis No.
Engine No./No.
No.

Please change the number plate on your vehicle to show SNC335C by 11 Sep 2021. Failure to do so is an offence and the penalty is a fine of up to \$1,000 or imprisonment of up to 6 months, or both.