Date In: 20/15/2022	Job description	Date &Time Completed	Done l)/.
20/05/8022	SAS e-filing		Company Security of the Security Security Philipse	
1411 / C11 2200 11 100/ 1111	E-mail (within 8hrs, AIC 2hrs			-
0131131012		,		
D.O.A: 19/05/2022 07:45	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 / Har			
Preferred Wksp / INC Assign Wksp / QW: (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tel: Fa	X.	
	HI24211 INC			
Owner / Driver: (_H/262U INC	Tel:)	
Policy No: () Perio	od: (Cover Type: ()	
Confirmed by: (Date:	Time:		100 - 1
		0-20%; P: 21-79%. F: 80-10	0%]	
	arranty: YES ()/NO (100 A	
Excess: (\$) Loading: \$1,00	0 () / \$2,000 ()			
General Remarks:-				
() Walk-In Customer: Customer's inform	nation strictly Confidential &	Strictly NO refer of repairer.		
() Total Loss Case : to e-mail Insurer	URGENTLY.	Control of Section 1997 (1997)		
Drive-In ()/ Towed-In (); Invoice:		; Towing Co. ()
Remarks:- (INC horline: 6788 6616)		Date&Time Completed	Done	by
	ourtesy Car ()			
2) QC Check / Post Repair Inspection	()			
B) Upload Resurvey Photo [Repair Cost > \$30	0001 ()			
Injury:				
Date/Time Actions				
			-	
		,		
	F-3-88-3-88-		Amt (\$)	Amt (3
NA 2201375		Preparation Checklist	Amt (\$)	Amt (\$
	1) AR : Acci	ident Reporting (\$30);	1st Bill	
aimant's Particulars :-	1) AR : Acci 2) DA : Dan 3) TF : Tow	ident Reporting (\$30); nage Assessment (\$100); INC (\$80) ing Fee \$40/	1st Bill	
aimant's Particulars :-	1) AR : Acci 2) DA : Dan 3) TF : Tow 4) FT : Folio 5) FT : Folio	ident Reporting (\$30); nage Assessment (\$100); INC (\$80); ing Fee \$40% ow-Through Survey \$ ow-Through Survey (Resurvey)	1st Bill (1) (S45) (120) (\$30)	
aimant's Particulars :-	1) AR : Acci 2) DA : Dan 3) TF : Tow 4) FT : Folic 5) FT : Folic For claim	ident Reporting (\$30); nage Assessment (\$100); INC (\$80); ing Fee \$400 ow-Through Survey \$ ow-Through Survey (Resurvey); ing against INC Only (wef 10 Jan 2005)	1st Bill (1) (S45) (120) (\$30)	
aimant's Particulars :- river/Owner: ontact No:	1) AR : Acci 2) DA : Dan 3) TF : Tow 4) FT : Folic 5) FT : Folic For claim 6) TR : Re-i 7) N1 : Idac	ident Reporting (\$30); nage Assessment (\$100); INC (\$80); ing Fee \$400 ow-Through Survey (\$80) ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 2005) nspection DA + SMRT Survey \$	1st Bill	
aimant's Particulars :- iver/Owner: intact No: imaged Portion:	1) AR : Acci 2) DA : Dan 3) TF : Tow 4) FT : Folic 5) FT : Folic For claim 6) TR : Re-i 7) N1 : Idac	ident Reporting (\$30); nage Assessment (\$100); INC (\$80); ing Fee \$40/ ow-Through Survey \$ ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 2005) inspection	1st Bill 0) (\$45 120 \$30 \$75 160	
aimant's Particulars :- iver/Owner: intact No: imaged Portion:	1) AR : Acci 2) DA : Dan 3) TF : Tow 4) FT : Folic 5) FT : Folic For claim 6) TR : Re-i 7) N1 : Idac 8) NTUC A: OD:* *N5: Cou	ident Reporting (\$30); nage Assessment (\$100); INC (\$80); ing Fee \$40/ ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 2005) nspection DA + SMRT Survey \$ dditional Services:-	1st Bill (\$45 120 \$30 \$75 160	
aimant's Particulars :- river/Owner: ontact No: umaged Portion: C Checked by (Engr-In-Charge):	1) AR : Acci 2) DA : Dan 3) TF : Tow 4) FT : Folic 5) FT : Folic For claim 6) TR : Re-i 7) N1 : Idac 8) NTUC Ac OD* *N5: Cou *N6: Rep *N7: Post	ident Reporting (\$30); nage Assessment (\$100); INC (\$80); ing Fee \$40/ ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 2005) nspection DA + SMRT Survey \$ dditional Services:- recordination t Repair Inspection	1st Bill (\$45 (120) \$30 \$75 (160) \$5 \$10 \$25	
laimant's Particulars :- river/Owner: ontact No: amaged Portion: C Checked by (Engr-In-Charge): uditors' Comments :-	1) AR : Acci 2) DA : Dan 3) TF : Tow 4) FT : Follo 5) FT : Follo For claim 6) TR : Re-i 7) N1 : Idac 8) NTUC Ac OD* *N5: Cou *N6: Rep *N7: Fost *N8: DV	ident Reporting (\$30); nage Assessment (\$100); INC (\$80); ing Fee \$40/ ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 2005) nspection DA + SMRT Survey \$ dditional Services:- rtesy Car / Tpt Allowance air Co-ordination t Repair Inspection / Collect Excess Coordination	1st Bill 0) (\$45 120 (\$30 (\$75 160 (\$5 (\$10 (\$25 (\$5 (\$5 (\$5 (\$5 (\$5 (\$5 (\$5 (\$5 (\$5 (\$	
NA 2201375 laimant's Particulars:- river/Owner: ontact No: amaged Portion: C Checked by (Engr-In-Charge): uditors' Comments:-	1) AR : Acci 2) DA : Dan 3) TF : Tow 4) FT : Follo 5) FT : Follo For claim 6) TR : Re-i 7) N1 : Idac 8) NTUC Ac OD* *N5: Cou *N6: Rep *N7: Fost *N8: DV	ident Reporting (\$30); mage Assessment (\$100); INC (\$80); ing Fee \$40/ ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 2005) inspection DA + SMRT Survey \$ dditional Services:- irtesy Car / Tpt Allowance air Co-ordination t Repair Inspection / Collect Excess Coordination or TP (Non INC) against INC	1st Bill (\$45 ,120 ,\$30 ,\$75 ,160 \$5 ,\$10 ,\$25 ,\$5 ,\$20 ,30	

VERSION: 1 (20/05/2022 14:55 (SGT))



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 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 20/05/2022 14:55 (SGT) Date of Accident 19/05/2022 07:45 (SGT) Exact Location of Accident Singapore Additional Location Information BLK 547 JURONG WEST STREET 42 CARPARK LOT 277 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH51697

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner CHUA HANG KAA TRADING Company Reg No 5XXXX274L Email Address ANDREWTAN.JIELUN@GMAIL.COM Mobile Phone No (Phone) +65-94790257 Alternative Phone No +65-94790257

VEHICLE PARTICULARS

Manufacturer Toyota Model Dyna Exact purpose for which vehicle was being used at time of **Employment** Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Manual CC 2982

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive атамина визиновиния в полиции в Fleet Policy Policy Number DMCVSNW00056852103 Cover Note Number

DRIVER

CHUA HANG KAA Name of Driver SXXXX609F NRIC No

Date Of Birth 31/01/1952 Occupation Outdoor Date Of Driving Pass 20/12/1973 Driving experience 48 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-94790257 Alt. Phone Number Email Address ANDREWTAN.JIELUN@GMAIL.COM Address **BLK 547 JURONG WEST STREET 42** Address complement #08-157 Postcode 640547 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **OWNER** 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 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) 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 Jurong West Neighbourhood Police Centre Police Station Name Police Station Phone No (Phone) +65-18002689999 Alt. Police Station Phone No (Fax) +65-62672438 Police Station Address 700 Corporation Road Singapore 649818 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE POLICE REPORT: T/20220519/2012. 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 SLH1262U Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Private car

Vehicle Category

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 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, acknow ledge, 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.

CHUA HANG KAA TRADING

Policyholder's Signature / Date & Time

CHu

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A - GBH51692 B - SLH 12624 tt7.10 Carparle at 547 Junong West Street 42 Carparle 107 277.

Describe Circumstances of the Accident M. T/20220519/2012nolin

Declaration

We declare the foregoing particulars are true in every respect.

CHUA HANG KA TRADING

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

Personnel



REPORT OF A TRAFFIC ACCIDENT

Male

Race: Chinese

Occupation:

PART TIME



Institution / School Name:

Date of Expiry:

1 of 3

Report No. T/20220519/2012

Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

Date/Time Report Made: 19/05/2022 08:19			Vide Report No.: J/20220519/0020	Station Diary No.
Informar	nt's Particu	lars the last		
Name of Informant: CHUA HANG KAA		Address: APT BLK 547 JURON SINGAPORE 640547	G WEST STREET 42 #08-157	
ID Type / ID No.: NRIC NO / S0177609F		Contact No.: Home/Office:	Mobile: 94790257	
Nationali SINGAP	ty: ORE CITIZ	EN	Email:	
Sex: Male	Age: 70	Date of Birth: 31/01/1952	Type of Informant: Driver	

Language:

General Informa	tion of the Acciden			t, a literal	
_	Non-Injury	Drink	Date/Time of		Type of Location:
Type of	Hit and Run	Drive:	Accident:		Carpark
Accident:	The and Train	No	19/05/2022 07:45		
Location:					
JURONG WEST STREET 42					
		10 (Pood	Speed Limit:
Weather:		Road Surface:		Ruau	Speed Little.
				- (C	V-1
Traffic Flow:		Traffic Control:		Traffi	c Volume:
				^	
Type of Collision:				Anyone conveyed by	
Moving Vehicle Against - Parked Vehicle				ambulance:	
Woving Vernois	riganion i annou i o			No	

Driving Licence Information:

Class: 2B,2A,2,3,4,5

THE RESERVE TO SERVE THE PARTY OF THE PARTY	CONTRACTOR OF THE PARTY OF THE	Model	Color	Condition	No of Passenger
Type	Make	Model	COIGI		^
1.	TOYOTA	DYNA 3.0	Silver	Slightly	0
GBH5169Z Lorry	101017			Damaged	
i	Type Lorry	Type Make	Type Make Model	Lorry TOYOTA DYNA 3.0 Silver	Type Make Model Color Condition Lorry TOYOTA DYNA 3.0 Silver Slightly





2 of 3

Report No. T/20220519/2012

Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

CONTINUATION OF REPORT

Brief Details.

On 19 May 2019 at about 2100hrs, I parked my lorry at blk 547 Jurong West St 42 carpark lot 277. Everything was intact and I went home.

On 20 May 2022 at about 0730hrs, I went to retrieve my lorry and discovered my rear lorry door is unable to open or close. The lorry is slanted to the right side. Subsequently, I received a police call namely Fadli (65476845) who inform me someone hit on to my lorry and required me to lodge a police report.

I do not have in-car camera in my lorry.





3 of 3

Report No. T/20220519/2012

Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

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: J / Other SYAIFUL AMRUL BIN BORHAN	Signature Of Informant:
Signature Of Interpreter:	Date/Time:
Not applicable	19/05/2022 08:19
Officer In Charge Of Case:	Classification Of Case:
Other KASMAWATI BTE SAMIAN	
Contact No.: 65476368	
NP168	

VEHICLE NO: GBH 5169Z	MAKE & MODEL: Toyota Dyna AUTO / MANUAL
DATE OF ACCIDENT:	19/05/2022 cc: 3.0 (2982cc)
TIME OF ACCIDENT:	9745 HRS 0745
LOCATION OF ACCIDENT:	Carpark of 547 Juray new St. 42 S(640543)
EXACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE Lot No. 277
NAME OF OWNER:	Chua Hong Kag Trading
TEL NO:	H/P: 9479 0257 OFFICE: HOME:
NRIC:	53383274L
ADDRESS:	547 Jurong Well Str 42 #06-157 S(640547)
EMAIL:	ANDREWTAN. JIELYN @ grail. com
CLAIM TYPE:	OD / THIRD PARTY / REPORTING ONLY
FLEET POLICY:	YES / NO?
INSURANCE COMPANY:	China toip! My
TYPE OF COVERAGE:	Comprehensive / Third Party / Third Party Fire & Theft
POLICY NO:	DMCUSNW000 56852103
NAME OF DRIVER:	AS ABOVE / IF NO: Chua Hang Kag
NRIC:	SO177609F ANY PASSENGER: N.A.
DATE OF BIRTH:	31 / 01 / 1952 LICENCE PASSED DATE: 20 / 12 / 1973
OCCUPATION:	OUTDOOR / INDOOR
GENDER:	MALE / FEMALE
CONTACT NO:	H/P: As above OFFICE: HOME:
ADDRESS:	As above
EMAIL :	As above
DOES DRIVER OWNED ANY VEHICLE:	NO IF YES, REG NO: INSURER:
RELATIONSHIP:	onner
WEATHER CONDITION:	C(EAR / RAINING / OTHERS:
ROAD SURFACE:	DRY / WET / OTHER:
ANY INJURIES:	NO / IF YES, WHO?
NAME & CONTACT:	10) 11 123, WHO.
NAME & CONTACT:	
POLICE REPORT:	NO / IF (FES), WHERE? Jurany West N.P.C
NOTICE OF INTENDED PROSECUTION GIVEN?	NO / IF YES, WHO?
VEHICLE B REG NO:	SLH12624 ANY PASSENGERS: Notice no
NAME OF DRIVER:	unknown CONTACT NO: unknown
VEHICLE C REG NO:	ANY PASSENGERS:
VEHICLE D REG NO:	ANY PASSENGERS:
VEHICLE E REG NO:	ANY PASSENGERS:
VEHICLE F REG NO:	ANY PASSENGERS:
VEHICLE G REG NO:	ANY PASSENGERS:
ANY WITNESS? IF YES, NAME:	WITNESS CONTACT:
WAS THERE ANY VIDEO CAPTURE?	YES / NO
WAS THERE ANY AUDIO RECORDED?	YES / NO
ACCIDENT SCENE PHOTOS TAKEN?	YES NO
ACCIDENT PORTION:	Rear portion
Have you been approach by unknown person soliciting (s	
WORKSHOP PARTICULAR:	N-51 Antomotive Ple Ltd
CONTACT DEPSON:	68420051 / 67440510
CONTACT PERSON: FAX NO:	57410510 Mig
WORKSHOP EMAIL:	sales@n51.com.sg



CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Motor Commercial

MZ300/C

R SN

Cov. Type:C

AN0597A

CERTIFICATE OF INSURANCE

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)

Engine No.: 1KD2794062

Cha. No.:KDY2318033465

1. Index Mark and Registration

GBH5169Z

AUTOSAFE

Number of Vehicle

CERTIFICATE No.

2. Name of Policy Holder

CHUA HANG KAA TRADING

DMCVSNW00056852103

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

26/06/2021

Excess Sect I.

\$\$350.00

EX ON WINDSCREEN.

S\$100.00

4. Date of Expiry of Insurance

25/06/2022

Persons or Classes of Persons entitled to drive Any person who is driving on the Policyholder's order or with their 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:*
- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

(1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.

(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

* 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.

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: ABS INSURANCE AGENCY PTE LTD

Authorised Officer

Authorised Signatory