

NATIONAL Assessment Centre Services:

(wef 1 Jan 08)

SNIC822660002

Date In: 16/06/2022 17:09	Job description	Date & Time Completed	Done by
Ref No: NBA/C7722005749/1	SAS e-filing		
Veh No: SMP 68982	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 16/06/2022 09:38	I-Motor Claim Form		
OD: TP / Reporting Only	I-Motor W/O (within: OD, 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SMP3915C	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	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

<p>Claimant's Particulars:</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>C Checked by (Engr-In-Charge):</p> <p>Auditors Comments:</p> <p>1.1:</p> <p>1.2/3:</p>	Invoice Preparation Checklist		AM (CS)	AM (BI)
	1) AR: Accident Reporting (\$30);			
	2) DA: Damage Assessment (\$100);	INC (\$80)		
	3) TF: Towing Fee	\$40/\$45		
	4) FT: Follow-Through Survey	\$120		
	5) FT: Follow-Through Survey (Resurvey)	\$30		
	For claiming against INC Only (wef 10 Jan 2009)			
	6) TR: Re-inspection	\$75		
	7) NI: Idao DA + SMRT Survey	\$160		
	8) NTUC Additional Services:-			
OD*				
*N3: Courtesy Car / Tpt Allowance		\$5		
*N6: Repair Co-ordination		\$10		
*N7: Post Repair Inspection		\$25		
*N8: DV / Collect Excess Coordination		\$5		
TE (N11): TP (Non INC) against INC		\$20		
9) N12: Idao Mobile		\$0		
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	16/06/2022 17:09 (SGT)
Date of Accident	16/06/2022 09:38 (SGT)
Exact Location of Accident	380 Ang Mo Kio Ave 1, Singapore
Additional Location Information	CARPARK (560303)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SND6898A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LI SHU YING
NRIC No	SXXXX931D
Email Address	carolli0513@gmail.com
Mobile Phone No	(Phone) +65-91705678
Alternative Phone No	+65-91705678

VEHICLE PARTICULARS

Manufacturer	Porsche
Model	Panamera
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	3605

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00244852100
Cover Note Number	-

DRIVER

Name of Driver	LI SHU YING
NRIC No	SXXXX931D

Date Of Birth	13/05/1991
Occupation	Indoor
Date Of Driving Pass	06/07/2010
Driving experience	11 YEARS AND 11 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91705678
Alt. Phone Number	+65-91705678
Email Address	carolli0513@gmail.com
Address	BLK 303 ANG MO KIO AVENUE 1 #03-115
Address complement	-
Postcode	560303
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?	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?	Yes
Reasons for not uploading a video of the accident	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMP3915C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHLOE
Contact Number	(Phone) +65-82922320
Address	-

Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

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.

[Signature]

Policyholder's Signature / Date & Time

[Signature]

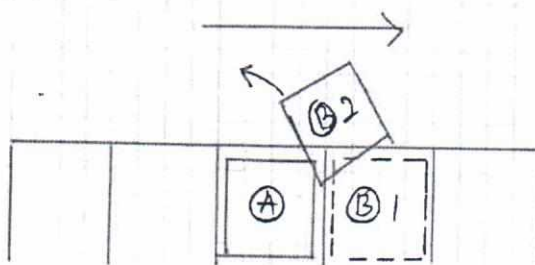
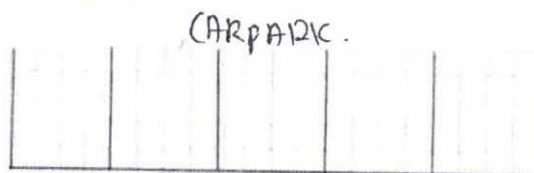
Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature] 16/06/2022
Witnessed by Reporting Centre Personnel

Sketch Plan

BLK 308 C AMIK AVE 1

CARPARK: S1566303.



VEHICLE A SND 6898A.

B Smp 3915C.

Describe Circumstances of the Accident

ON THE STATED DATE & TIME, I'M PARKING MY VEHICLE (A)
SND 6898A AT BLK 308C AMK AVE 1 CARPARK S' 500303. WHEN I'M
GO BACK TO MY VEHICLE AND DISCOVER MY CAR WAS DAMAGED, AND I SAW
A PAPER PUT ON MY WINDOW, IT WRITE THEY WAS HIT ONTO MY VEHICLE.
AND LEFT HER CONTACT (8292 2320) CHLOE, ASKED ME TO CONTACT HER.
AND I CHECKED MY CAR CAMERA TO DISCOVER IS A VEHICLE (B)
SMP 3415C, WANNA GO OUT FROM THE CARPARK RIGHT SIDE AND
HIT ONTO MY VEHICLE RIGHT SIDE.


VEHICLE (A) SND 6898A.

(B) SMP 3415C.

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

 16/06/2022
Witnessed by Reporting Centre
Personnel

Date of Accident : 16/06/22 Accident Time: 0938 HRS (24-HR-Format)
 Accident Place : BLK 308 CAMK AVE1 CARPARK S1 560303
 Vehicle No. (Car Plate No.) : SND 6898 A Make/Model: PORSCHE PANAMERA
 Insurance Company : CHINA TAIPING Policy No: DMPESHW00244852100
 Owner or Company Name /IC No. : LI SHU YING (S9175931D)
 Owner or Company Contact No. : 9170 5878 Owner's Hp 9170 5878 Company Tel
 DRIVER'S Name / IC No. : LI SHU YING (S9175931D)
 DRIVER'S Date Of Birth : 13/5/1991 DRIVER'S License Pass Date 06/07/2010
 Relationship of Owner & Driver : Spouse\Parent\Children\Sibling\Employee\Others: OWNERS
 DRIVER'S Address : BLK 303 AMK AVE1 H03-1115 S1 560303
 DRIVER'S Contact No./ Alt No. : 1) 9170 5878 2) 9170 5878
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : CAROLLI0513 @ GMAIL.COM
 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): 00

Was there any video Captured by car camera: YES \ NO .
 Exact purpose for which vehicle was being used at time of accident: Private use \ Work Purpose
 Any Injury (If YES, Pls state): 00

Other Party Driver's Particular (if any)

Vehicle. No: (B). Smp 3915C

Vehicle. No: _____

Vehicle Make \Model: _____

Vehicle Make \Model: _____

Name Driver: _____

Name Driver: _____

IC No. Driver/Contact: _____

IC No. Driver/Contact: _____

* NEW – Passenger's name & gender:



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1F

N SN

AN0695A

Cov. Type:C

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)

CERTIFICATE No.	DMPCSNW00244852100	Engine No.: C03605	Cha. No.: WP0ZZZ97ZCL001594
1. Index Mark and Registration Number of Vehicle	SMU9631E		
2. Name of Policy Holder	LI SHUYING		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	19/11/2021 (16:36:31)	Named Drivers Ex Sect. I	\$S\$3,000.00
		Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	\$S\$3,000.00
4. Date of Expiry of Insurance	18/11/2022	Ex Sect. I - Age >= 26	\$S\$500.00
		* Age as at date of accident	
		EX ON WINDSCREEN .	\$S\$350.00
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 \$S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.			
* 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

TECK WEI CREDIT PTE LTD

Co. Reg. No. 200512300K

210 Turf Club Road

The Grandstand, Lot A8

Singapore 287995

Tel: 6465 0020 Fax: 6465 0017

Email: info@teckwei.com.sg

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: TECK WEI CREDIT PTE LTD

Authorised Officer

Authorised Signatory

Transaction History Details

<i>Asset Type</i>		<i>Asset ID</i>	
Vehicle		SMU9631E	
<i>Transaction Type</i>		<i>Log Date/Time</i>	
05.02 Confirm Pending Vehicle Transfer Appln (Self)		22 Nov 2021 / 15:27:21	

Receipt No.:

ITNET-00000-211122-002631

Transaction Amount:

\$346.00

Business Transaction Reference No.:

20211122152720984568

Channel:

Internet

Owner ID Type:

Singapore NRIC

Owner Name:

ZHOU YONGXIN

Owner Country/Region:

Singapore

Status:

The vehicle has been transferred successfully

Next Owner ID Type:

Singapore NRIC

Next Owner Name:

LI SHUYING

Next Owner Country/Region:

Singapore

Next Owner's Registered Address Type:

HDB / HUDC

Next Owner's Registered Block/House No.:

303

Next Owner's Registered Street name:

ANG MO KIO AVENUE 1

Next Owner's Registered Floor No.:

03

Next Owner's Registered Unit No.:

1115

Next Owner's Registered Building Name:

-

Next Owner's Registered Postal Code:

560303

Vehicle No.:

SND6898A

Previous Vehicle No.:

SMU9631E

Vehicle Type:

P10 - Passenger Motor Car

Vehicle Scheme:

Normal

Vehicle Make:

PORSCHE

Vehicle Attachment 1:

No Attachment

Vehicle Attachment 3:

-

Engine No./Motor No.:

C03605 / -

Passenger Capacity:

3

Primary Color:

Silver

Maximum Laden Weight (Kg):

2365

Effective Ownership Date/Time:

22 Nov 2021 15:27:21

First Registration Date:

09 Jan 2012

Year of Manufacture:

2011

Financing Expiry Date:

-

COE No.:

2011110103000133K

COE Expiry Date:

30 Sep 2030

ActualPQP Paid / QP Paid:

34,935.00

Minimum PARF Benefit:

60,727.00

Additional Registration Fee Rate:

100%

Vehicle Model:

PANAMERA

Vehicle Attachment 2:

-

Chassis No. / Trailer Chassis No.:

WP0ZZZ97ZCL001594

Engine Capacity(cc)/Power Rating(kW):

3605 / -

Propellant:

Petrol

Secondary Color:

-

Unladen Weight (Kg):

1760

No. of Transfer:

3

Original Registration Date:

09 Jan 2012

PARF Eligibility Expiry Date:

08 Jan 2022

Pending Expiry Date:

01 Dec 2021

COE Bid Category:

B - Car (1601cc & above)

Open Market Value:

121,455.00

Actual ARF paid:

\$121,455.00

Quota Premium / Prevailing Quota Premium:

\$34,935.00 / \$34,935.00

Transfer coupled with:

Vehicle Number Replacement

Information displayed is correct as at the log date and time.

Printed on 22 Dec 2021 17:41:53

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