

# NATIONAL Assessment Centre Services:

(wef 1 Jan'08)

SM0922780009

Date In: 19/07/2022 17:41	Job description	Date & Time Completed	Done by
Ref No: N/A/SM0922006844	SAS e-filing		
Veh No: EQ 18B	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 15/07/2022 17:25	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: 9B54294R	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

NA2201889

Statement Particulars:	Invoice Preparation Checklist:	INC	Mobile
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
	4) FT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON:		
C Checked by (Engr-In-Charge):	*N3: 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	19/07/2022 17:41 (SGT)
Reported by	Both
Date of Accident	15/07/2022 17:25 (SGT)
Exact Location of Accident	Tampines Ave 4, Singapore
Additional Location Information	CARPARK BEHIND BLOCK 802
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	EQ18B
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHEN ZHAO TONG DERRICK
NRIC No	SXXXX099C
Email Address	vonn19@gmail.com
Mobile Phone No	(Phone) +65-91666666
Alternative Phone No	-

## VEHICLE PARTICULARS

Manufacturer	BMW
Model	740li
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	2998

## INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01008052

## DRIVER

Name of Driver	TEO JING LIN YVONNE
NRIC No	SXXXX905E
Date Of Birth	19/06/1982
Occupation	Indoor

Date Of Driving Pass	14/05/2004
Driving experience	18 YEARS AND 2 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91666666
Alt. Phone Number	-
Email Address	vonn19@gmail.com
Address	BLK 842B TAMPINES STREET 82 #15-20
Address complement	-
Postcode	522842
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 on collision
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

#### 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

PLEASE REFER TO POLICE REPORT T/20220718/7032

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBJ4294R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	TEO JING LIN YVONNE
Gender	Female
Phone No	(Phone) +65-91666666
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	EQ18B
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No



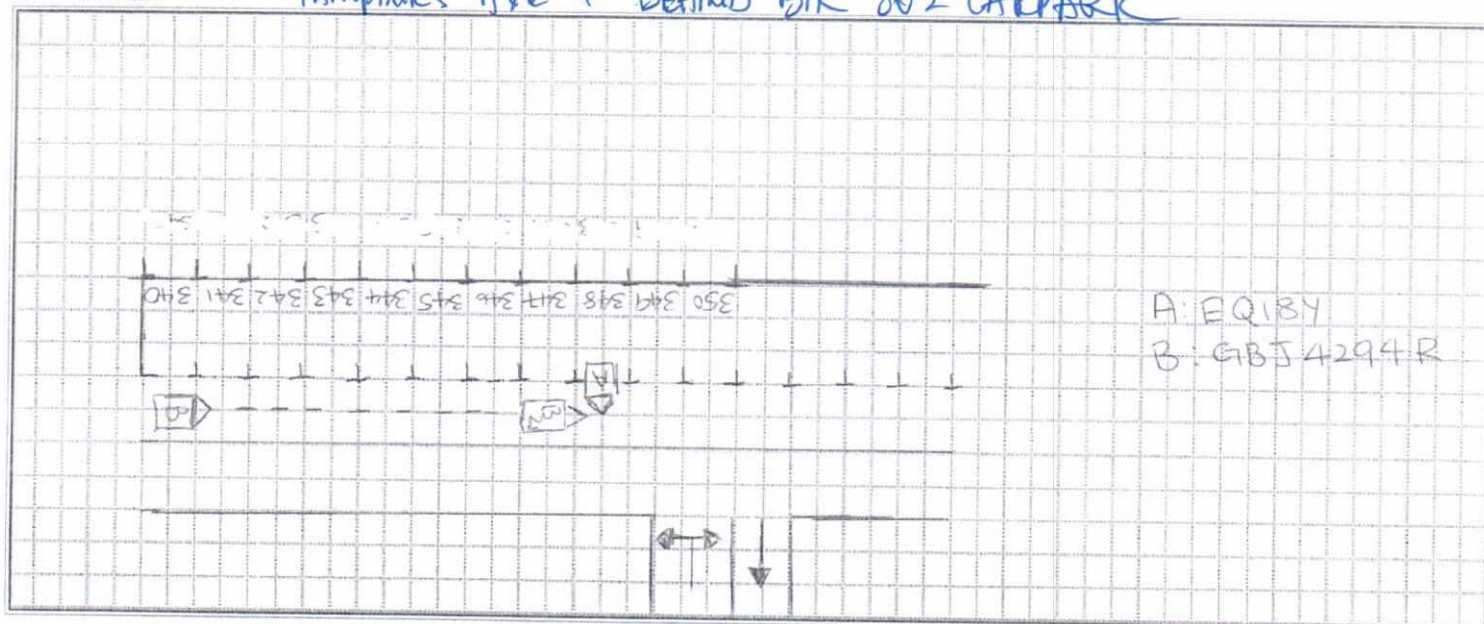
**IMPORTANT NOTICE**

- I understand, acknowledge, agree and consent that:

(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.

### Sketch Plan

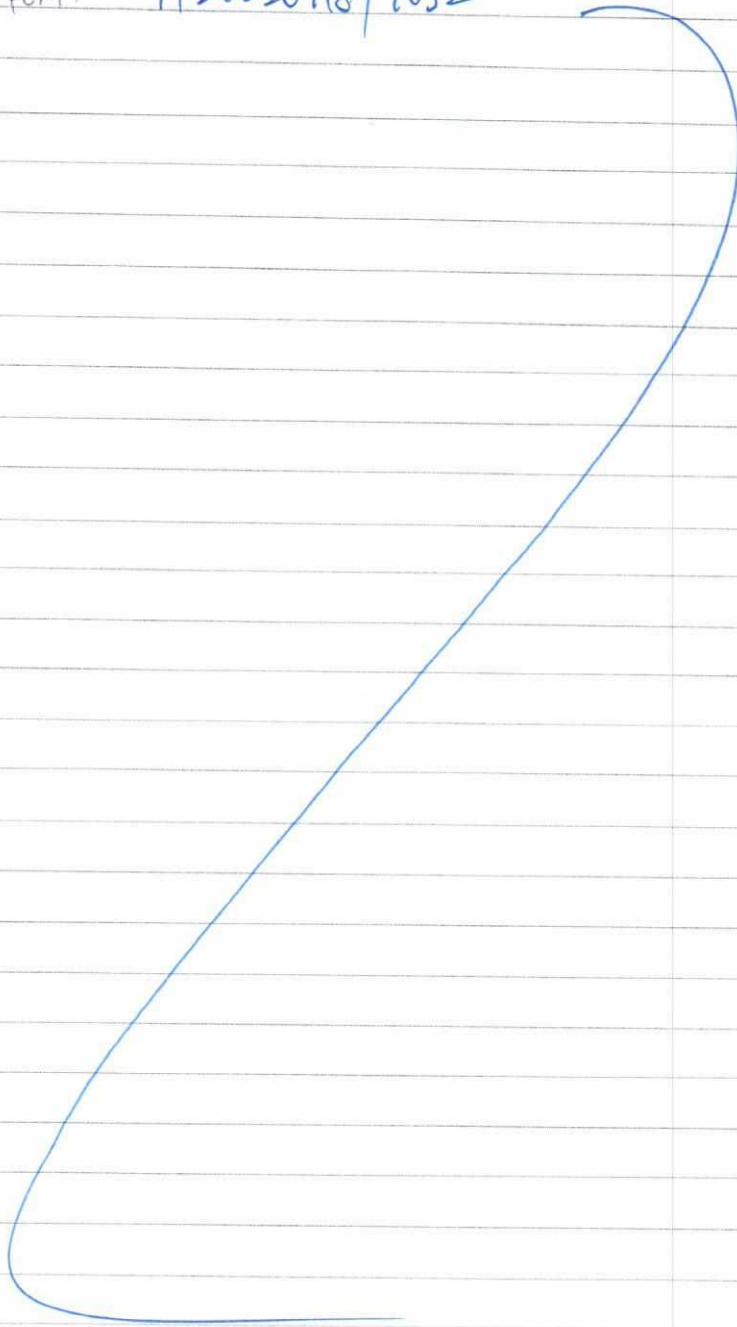
TAMPINES AVE 4 BEHIND BIK 802 CARPARK



Describe Circumstance of the Accident

Refer to Police report.

T/20220718/7032



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

19/07/2022  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)





# SINGAPORE POLICE FORCE



T/20220718/7032

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

1 of 3  
Report No. T/20220718/7032

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/07/2022 15:22	Vide Report No.:	Station Diary No.:
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### Informant's Particulars

Name of Informant: TEO JING LIN YVONNE			Address: 842B TAMPINES STREET 82 #15-20 SINGAPORE 522842		
ID Type / ID No.: NRIC NO / S8219905E			Contact No.: Home/Office: Mobile: 91666666		
Nationality: SINGAPORE CITIZEN			Email: vonn19@gmail.com		
Sex: Female	Age: 40	Date of Birth: 19/06/1982	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation:			Driving Licence Information: Class:	Date of Expiry:	

### General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 15/07/2022 17:25	Type of Location: Car Park
Location:  TAMPINES AVENUE 4				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 15 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
EQ18B	Car				Seriously Damaged	0
GBJ4294R	Van				Seriously Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20220718/7032

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

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Report No. T/20220718/7032

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	TEO JING LIN YVONNE	ID No.	S8219905E
Related Vehicle	EQ18B (Car)	Contact No.	91666666
Hospital/Clinic	TAMPINES CLINIC AND SURGERY PTE LTD	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	17/07/2022	Date	17/07/2022
No. of Days granted Medical Leave	04	Degree of	Serious

Brief Details.

On the stated date and time, I was driving vehicle A (EQ18B) and heading out of my lot (348). Before turning out, I checked left and right to ensure it is safe to do so. While moving out a little bit more which my car was already half way out. There were two passerby in front of me, I waited for them to finish crossing before continuing moving out fully again. Before moving out, Vehicle B was a few lots away from me and it was safe to do so. And I continue inching out of the lot as I was already halfway out of the lot. Suddenly Vehicle B (GBJ4294R) hit me with a huge impact at fast speed causing my car to be slanted 45 degree. As Vehicle B was a few lots away from me, travelling at such speed in a carpark was very dangerous and he could have hit me intentionally knowing my car was already half way out and stationary at that point of time. After hitting me the driver continue to drag my car and he did not stopped immediately when he hit my front right portion.

I felt pain on my left shoulder and right knee, which such injuries if a vehicle is driving slow in the carpark it would not have caused me this injuries and damaged to my car.

I went to True Medical Clinic At Tampines West to do a review of my injuries. I was given 4 days MC. I am unable to locate the True medical clinic in the system.

My car's shattered parts was in between the 2 way lane meaning to say that I was already half way out. I have the scene photos of my car damaged parts and also video. If any officer requires any footage & photos can contact me at 9166 6666. As I am unable to attached it in this portal.





**SINGAPORE  
POLICE FORCE**



T/20220718/7032

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

3 of 3

Report No. T/20220718/7032

**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 /  
ANG YI TING, STEPHANIE  
Contact No.: 65476414

Signature Of Informant:

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

Date/Time:  
18/07/2022 15:22

Classification Of Case:

VEHICLE NO: EQ18B

MAKE &amp; MODEL: BMW 740Li

(AUTO) / MANUAL

DATE OF ACCIDENT	15 / 10 / 2022	*C.C.
TIME OF ACCIDENT	5:28 AM (PM)	
LOCATION OF ACCIDENT	Tampines Ave 4 Car park behind block 802	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	Chen Zhao Tong Derrick	
EMAIL: vonn19@gmail.com	Office:	MOBILE:
NRIC: S7805099C		
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY	
FLEET POLICY:	YES / NO?	
INSURANCE CO.	Sompo	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	022MTPV01008052	
NAME OF DRIVER	AS ABOVE / IF NO: Teo Jing Lin Yvonne	
NRIC	S8219905E	
DATE OF BIRTH	19 / 10 / 1982	
ANY PASSENGER	YES / NO:	
NAME OF PASSENGER		
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	14 / 15 / 2004	
GENDER	Male / Female	
CONTACT NO.	Mobile: 9166-666	Office: Home:
EMAIL:	vonn19@gmail.com	vonn19@gmail.com
ADDRESS	Bk 842B Tampines St 82	#15-20
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No:	INSURER:
RELATIONSHIP	Employee / If No: Husband/Spouse	
WEATHER CONDITION	Clear / Raining / Other:	
ROAD SURFACE	Dry / Wet / Other:	
ANY INJURIES	No / If yes, Who?	
CONVEYED BY AMBULANCE	No / If yes, Who?	
POLICE REPORT	No / If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO/IF YES, WHO?	
VEHICLE B NO.	6B7 4294R	Any Passenger:
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 / NO	
WAS THERE ANY AUDIO RECORDED?	YES / NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / NO	
<b>**WORKSHOP:</b>		
Have you been approach by unknown person soliciting (s) /		
offering accident claims assistance?	YES / NO	



**Certificate of Insurance****ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
ROAD TRANSPORT ACT 1987 (MALAYSIA)  
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)**

Certificate/Policy No. : D22MTPV01008052  
Insured : CHEN ZHAO TONG DERRICK  
Motor Vehicle (Registration No.): EQ18B  
Coverage : Comprehensive - ExcelDrive PRESTIGE  
Policy Commencement Date : 11 JUNE 2022 00:00  
Policy Expiry Date : 10 JUNE 2023 23:59  
Maximum Liability (Section I) : Market value at time of loss  
Excess\* : \$900 - Section I  
Voluntary Excess\* : N.A  
Windscreen Excess\* : S\$100.00 for each and every applicable claim.

\* Subject to GST wherever applicable

**Persons or Classes of Persons entitled to drive\***

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the Insured,
  - a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
  - b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

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 (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

**Limitations As To Use**

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

**ExcelDrive Workshops and Accident Reporting**

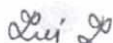
It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at [www.sompo.com.sg](http://www.sompo.com.sg) or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP 30

**Sompo Insurance Singapore Pte. Ltd.**



**Authorised Signatory**

Date/Time of Issue : 11 MAY 2022 18:44

**IMPORTANT NOTICE**

- o Keep the Certificate in your Motor Vehicle;
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a Motor Vehicle without a valid policy of insurance under the Act;
- o On the sale of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance 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 (Chapter 189);
- o This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 11A28209 & ASSURE INSURANCE AGENCY PTE. LTD. CI Code: 22A \_NDHSZ4KRR1YKYAJ