

Date In:	Job description	Date & Time Completed	Done by
Ref No:	SAS e-filing		
Veh No:	E-mail (within 3hrs, A/C 2hrs)		
D.O.A :	i-Motor Claim Form		
OD : TP / Reporting Only	i-Motor W/O (Within: OD, 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/WKsp		

t. 2/3:	Invoice cases
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t. 2 / 3:

1) AR: Accident Reporting (\$30);	INC (\$30)
2) DA: Damage Assessment (\$100);	INC (\$40/\$45)
3) TF: Towing Fee	\$120
4) FT: Follow-Through Survey	\$30
5) PT: Follow-Through Survey (For survey)	\$30
For claim against INC Only (w/ef 10 Jan 2005)	
6) TR: Re-Inspection	\$75
7) N1: Idao DA + SMART Survey	\$160
8) NTUC Additional Services:-	
ON*	
*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 (For 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	21/07/2022 15:25 (SGT)
Reported by	Both
Date of Accident	20/07/2022 18:20 (SGT)
Exact Location of Accident	Ghim Moh Rd, Singapore
Additional Location Information	GHIM MOH GREEN HDB COMMON DRIVEWAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT8899K
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM TIONG KIAT
NRIC No	SXXXX620D
Email Address	kimura_8482@yahoo.com.sg
Mobile Phone No	(Phone) +65-81388668
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Tucson
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1591

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00147532100

DRIVER

Name of Driver	LIM TIONG KIAT
NRIC No	SXXXX620D
Date Of Birth	03/02/1984
Occupation	Indoor

* Date Of Driving Pass	21/02/2004
Driving experience	18 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81388668
Alt. Phone Number	-
Email Address	kimura_8482@yahoo.com.sg
Address	BLK 6A BOON TIONG ROAD #14-43
Address complement	-
Postcode	164006
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?	No
Was any injured conveyed to hospital by ambulance?	-
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH AND ATTACHMENT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNC2451L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	-
Contact Number	-

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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' 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.

Policyholder's Signature / Date & Time

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

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

Sketch Plan

21/07/22 2:45pm 21/07/22 2:45pm 21/07/2022

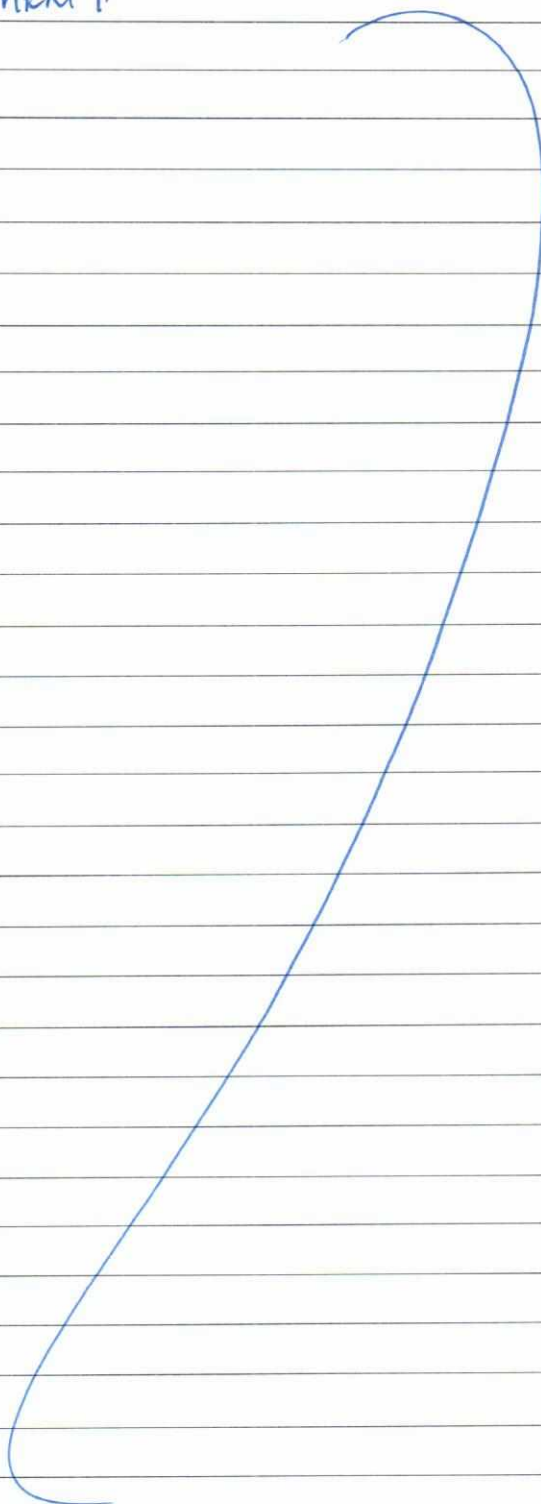
GHM MOH GREEN HDB DRIVEWAY

A) SKT8899K
B) SNC2451L

PARKING LOT


Describe Circumstance of the Accident


REFER TO ATTACHMENT.

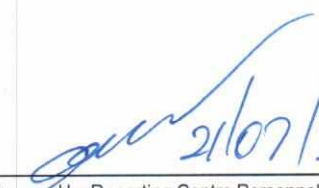


Declaration

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

 21/07/22 2.45pm
Policyholder's Signature / Date & Time

 21/07/22 2.45pm
Driver's Signature (if driver is not the policyholder) / Date & Time

 21/07/2022
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)



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.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
Tel: 6389 6111 Fax: 6222 1033
Website: www.sg.cntaiping.com
Co. Reg. No. 200208384E

DETAIL OF ACCIDENT

PLEASE EXPLAIN CLEARLY THE CIRCUMSTANCES UNDER WHICH THE ACCIDENT TOOK PLACE.

SKETCH: Please see video clips as attached

On 20/07/22, at 1819HR, after dropping off my friend at the Ghim Moh Green HDB driveway, i was about to drive off when, Vehicle No. SNC 2451 L, (BYD e6 electric, Black), stop right in front of my vehicle to alight a passenger. The driver proceed to make a 3-points turn in order to drive off. After doing so, the driver proceeds to make a left turn and was about to drive off, so i decided to release my brake and drive off too, however, the vehicle suddenly stops. (see video clip). I try to brake immediately, but it seems that an impact was made. I came out to check on both vehicles' condition and found no significant damage to both the vehicles. I spoke to the driver about the incident and we exchanged our contact no. Before we enter our vehicles, i offered the driver to file a claim if he is not satisfied as i could not see significant damage.

NOTE:- Every communication you receive in connection with this matter should be forwarded to the Company without delay.

DATA PRIVACY STATEMENT

In accordance with the Personal Data Protection Act 2012, I consent to the collection, use, disclosure of and/or process of my personal data (whether contained in the Claim Form or otherwise obtained) by China Taiping Insurance (Singapore) Pte Ltd, its affiliates and service providers (within or outside Singapore), for the purpose relating to the evaluation of the claim and to provide advice and information relating to the claim to me by Short Message Service (SMS), Multimedia Messaging Service (MMS) and fax messages (notwithstanding the registration of my telephone or mobile number in the Singapore's Do Not Call Registry)

Yes, I have read and agreed to the above Data Privacy Statement.


Signature of Claimant

Name: Lim Tiong Kiat
NRIC/FIN/Passport No S8402620D
21 July 2022

Date

Insured Signature

Driver Signature

FOR OFFICE USE ONLY

NAMED DRIVERS:-

- a. _____
- b. _____
- c. _____
- d. _____

ENDORSEMENTS:-

- a. _____
- b. _____
- c. _____

PERIOD OF INSURANCE:-

FROM: _____ TO: _____

EXCESS:-

- a. Section I :-
- Section II :-
- b. Unnamed Driver :-
- TOTAL =
- NO CLAIM BONUS =



中国太平
CHINA TAIPING

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CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
Tel: 6389 6111 Fax: 6222 1033
Website: www.sg.cntaiping.com
Co. Reg. No. 200208384E

MOTOR ACCIDENT ADVICE FORM

(Applicable to Windscreen Claim)

Agency	Cowell Insurance (agency) Pte Ltd			Claim No	
1) PARTICULARS OF INSURED					
Name	Lim Tiong Kiat		Policy No	DMPCSNW00147532100	
Address	Blk 6A Boon Tiong Road, #14-43, S164006			Contact Nos (H) (HP)	81388668
Occupation	Manager	Registration No	SKT8899K	Make	Hyundai(White)
Year Model	2019/Tucson	C.C./ Tonnage	1.6CC	Amount Insured	Refer to Policy
2) ACCIDENT INFORMATION					
Date of Accident	20 July 2022			Time	1820HR
Place	Ghim Moh Green HDB common driveway			Approximate Speed	5KM/HR
Name of Police Station Reported To	NA				
3) PARTICULARS OF DRIVER					
Name of Person driving your vehicle	Lim Tiong Kiat	Age	38	Address	Blk 6A Boon Tiong Road
Licence No	S8402620D	Date of Expiry	NA	Relationship to owner	Same person
If Assured was not driving, does driver own a motor vehicle? If so, please state:				Contact Nos (H) (HP)	81388668
Your Car No	Name of Insurance Co	Occupation of Driver			
SKT8899K	China Taiping Insurance	Manager			
4) DETAILS OF DAMAGE TO YOUR VEHICLE					
One pinch of scratch mark					
5) DAMAGES TO THIRD PARTY PROPERTY					
a. Registration Number(s) and details of damage to the other vehicle(s) involved					
SNC 2451L No significant mark, phone unable to get any clarity image due to resolution issue when zooming in for close up image. Car was black in color.					
b. Any other property					
NIL					
6) INJURY TO PERSONS					
Name	Address		Extend of Injury		
NIL					
NIL					
7) WITNESS					
Passenger's Name	Address		Other Witness Name	Address	
NIL					
NIL					
8) Have you obtained an estimate for repair? If so, give name of repairers and amount of estimate.				Not yet, To be advice	
No liability attaches this Company UNLESS the vehicle is inspected after accident and the estimate for the cost repairs approved.					

Motor Private Car

MX1F

N SN

AN0055A

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. DMPCSNW00147532100

Engine No.: G4FJKU315381
Cha. No.:KMHJ3812VKU964445

1. Index Mark and Registration Number of Vehicle SKT8899K

2. Name of Policy Holder LIM TIONG KIAT

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment 21/07/2021 (12:23:47)

Named Drivers Ex Sect. I S\$500.00
Additional Ex Other than Named Drivers:
Ex Sect. I - Age <= 25 S\$3,000.00
Ex Sect. I - Age >= 26 S\$500.00
* Age as at date of accident
EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance 19/09/2022

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.

HIRE PURCHASE CO.: STANDARD CHARTERED BANK(S) LIMITED

* 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: COWELL INSURANCE (AGENCY) PTE LTD
Authorised Officer


Authorised Signatory