VEHICLE NO: SKT 200D	MAKE & MODEL: Methodels Benz A250 Auto Manual		
DATE OF ACCIDENT	26 / 08 / 2022		
TIME OF ACCIDENT	1815 hg AM / EM		
LOCATION OF ACCIDENT	along upper thomson Road toward Macritinie Road		
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE JAIM		
NAME OF OWNER	Terence Lee Tze Ghee		
EMAIL: terencelects 91@gmail.co			
NRIC	S9148176F		
CLAIM TYPE	OD / THIRD(PARTY / REPORTING ONLY		
FLEET POLICY:	YES / NO ?		
INSURANCE CO.	MMC IMONE		
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft		
POLICY NO.	5121396008-01		
NAME OF DRIVER	AS ABOVE / IF NO:		
NRIC	59148176F		
DATE OF BIRTH	28 / 12 / 1991		
ANY PASSENGER	YES / NO :		
NAME OF PASSENGER			
GENDER OF PASSENGER	MALE / FEMALE		
OCCUPATION	Outdoor / Indoor		
DATE OF DRIVING PASS	14 / 05 / 2012		
GENDER	Male / Female		
CONTACT NO.	Mobile: 979 309 Office:		
EMAIL:	terenceceta 91 @ smail. com		
ADDRESS	BIK 45 Bright Hill drive #09-19 5(573895)		
DOES DRIVER OWN OTHER VEHICLES?	NO) / If yes : Reg No: INSURER.		
RELATIONSHIP	Employee / If No: DW/lY		
WEATHER CONDITION			
ROAD SURFACE	Clear / Raining / Other: Dry / Wet / Other:		
ANY INJURIES			
CONVEYED BY AMBULANCE	No/ If yes: Who? Tevence lee Tze Gner		
POLICE REPORT			
NOTICE OF INTENDED PROSECUTION GIVE	No/ If yes . Where? N? NO/IF YES: WHO?		
VEHICLE B NO.	SNA 9666 Any Passenger:		
NAME	3144 1000 4 2 0		
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? WAS THERE ANY AUDIO RECORDED?	VES / CO		
SCENE ACCIDENT PHOTOS TAKEN?	YES / NO		
Who is Reporting			
	Driver / Owner / Both		
Original Language Used Have you been approach by unknown person	English / Mandarin / Others:		
	unisoliciting (s) /		

SKETCH PLAN

IMPORTANT NOTICE

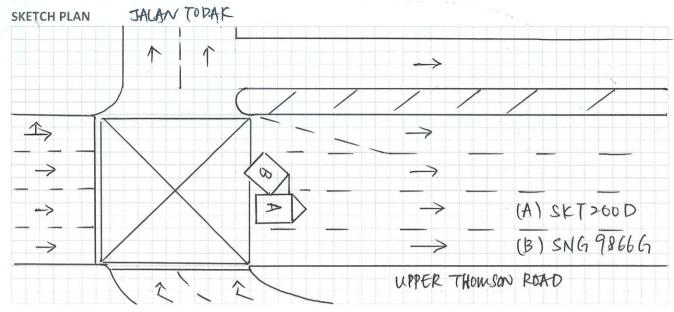
- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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:
 - 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	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:
	Date & Time:	NRIC/FIN No.:

I hereby authorise SME Motor Pte Ltd to send my Accident report to my workshop _____ via email / fax Signature: ____



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
On 26/08/2022 at about 1815 hrs at along upper Thomson
Road towards MacRitchie Road after Jalan Todak.
I was travelling on the second lare at along Upper
Thomson Road and Suddenly a Vehicle (B) make a abrupt
lane switch without checking his blindspot and without cautions,
I tried to swerre towards the right to avoid the collision
but vehicle (B) still proceed to hit onto the left portion of
my vehicle (A).
rehicle involving in this situation:
Vehicle (B): SKT200D Vehicle (B): SNG 9866G
Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

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/FIN No .:

GIARMIC SketchFlanForm V3

Own Y drum SKT 200D.





OWNER & durer



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 14 May 2012

of the driver; and other motor vehicles =< 2500kg

Licence No: S9148176F



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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5121396008-01 Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

Chassis Number : WDD1771462J126118

2. Name of Policyholder : TERENCE LEE TZE GHEE

3. Effective Date of Insurance : 13 Jun 2022 4. Expiry Date of Insurance : 12 Jun 2023

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/her 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.

: SKT200D

Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

 EXCESS (SECTION 1)
 : \$\$600

 EXCESS (SECTION 2)
 : N/A

 WINDSCREEN EXCESS
 : \$\$100

 ADDITIONAL EXCESS
 : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO
INSURE WITH COE : YES
NCD PROTECTION : YES
ROADSIDE ASSISTANCE AND WELLNESS COVER : YES
TRANSPORT ALLOWANCE : NO
EXCESS WAIVER : NO

PRIMARY DRIVER : TERENCE LEE TZE GHEE

NAMED DRIVER (1) : N/A
NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : DBS BANK LTD

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : CASA MERAKI PTE. LTD. (00000573856)

Date of Issue : 17 May 2022 15:05 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

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Chief Executive