

ADDITIONAL Assessment Centre Services: [with 1 Jan 02] **SN10822960001**

Date In: 06/09/2002 14:57	Job description	Date & Time Completed	Done by
Ref No: NCA/C772200213914	SAS e-filing		
Veh No: GSF 1236A	E-mail (within 2hrs, AUC 2hrs)		
D.O.A: 06/09/2002 09:00	1-Motor Claim Form		
OD: TP / Reporting Only	1-Motor W/O (Within: 02.2hrs, TP 4hrs)		
	1-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner / Wksp		

Preferred Wksp / INC Assgn Wksp / QW: () Toll: () Fax: ()

TP Particulars: Yeh No: **SN 99715** INC () / Non-INC ()

Owner / Driver: () Tel: ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % [Note: Est. Status (W/O): NI: 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	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	Action

NA2202385

Item/Particulars	Invoice Preparation Charge	Bill	Revised
1) AR: Accident Reporting (\$30)			
2) DA: Damage Assessment (\$100)		INC (\$30)	
3) TF: Towing Fee		\$10/\$45	
4) FT: Follow-Through Survey		\$120	
5) PT: Follow-Through Survey (Resurvey)		\$30	
* For claim against INC Only (w/ef 10 Jan 2005)			
6) TR: Re-inspection		\$75	
7) NI: Ids DA + SMART Survey		\$160	
8) NI/IC Additional Services			
QNT:			
* N5: Courtesy Car / Tpt Allowance		\$5	
* N6: Repair Coordination		\$10	
* N7: Post Repair Inspection		\$25	
* N8: DV / Collect Excess Coordination		\$5	
TP (NI) / TP (P/n INC) against INC		\$20	
9) NI 2: Ids Mobile		\$0	
Invoice dated		Fees Charged	
Invoice dated		Fees 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 Actual 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	06/09/2022 14:51 (SGT)
Reported by	Owner
Date of Accident	06/09/2022 09:00 (SGT)
Exact Location of Accident	Geylang Rd, Singapore
Additional Location Information	TOWARDS KALLANG
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF1236A
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	POON TRADING PTE
Company Reg No	2XXXXX284R
Email Address	into@takwingtrading.com
Mobile Phone No	(Phone) +65-92987959
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Fiat
Model	Doblo
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1598

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00075922201

DRIVER

Name of Driver	POON DAI WANG
NRIC No	SXXXX453G
Date Of Birth	18/07/1997
Occupation	Outdoor

Date Of Driving Pass	21/03/2016
Driving experience	6 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92987959
Alt. Phone Number	-
Email Address	into@takwingtrading.com
Address	BLK 348D YISHUN AVENUE 11 #03-603
Address complement	-
Postcode	760348
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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 - Change/cross lane
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)	4
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	-

PASSENGER 1

Name	HASSAN ISMAIL
Gender	Male

PASSENGER 2

Name	MIA ROBEL
Gender	Male

PASSENGER 3

Name	BANNA AL HASAN
Gender	Male

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
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Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKN9971J
Vehicle Manufacturer	BMW
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	QIU SHUI PING
NRIC No	SXXXX707D
Contact Number	(Phone) +65-97466197
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN



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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, 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.

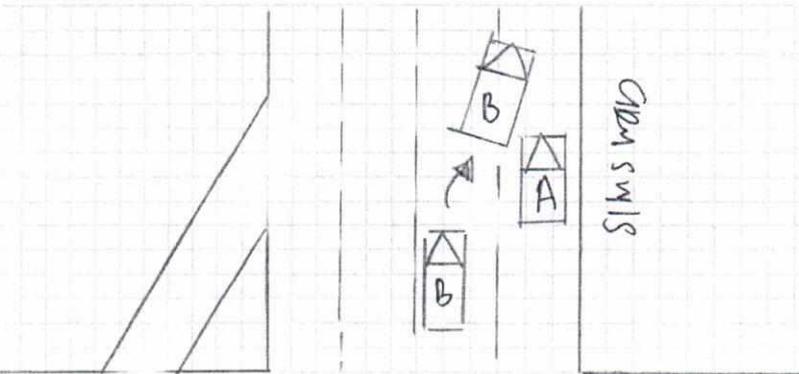


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
[Signature] 06/09/2022

Sketch Plan



- (A) 8BF 1236A
- (B) SKN 9971J



Describe Circumstances of the Accident

On 06-09-2022 at about 0900hrs, I parked my vehicle along
Geylang Rd towards Kallang. My vehicle was stationary. All of a
sudden I saw a vehicle SKN 9471J swerve to my lane and collided
into my stationary vehicle. That's all.



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



Witnessed by Reporting Centre
Personnel

Date of Accident : 06.09.2022 Accident Time: 09:00hrs (24-HR-Format)
 Accident Place : Seylang Rd towards Kallang
 Vehicle No. (Car Plate No.) : SBF 1236A Make/Model: Fiat Doblo Cargo Maxi 1.6 MTJ
 Insurance Company : China Policy No: PNCVSNW00575922201 6 LA2e
 Owner or Company Name /IC No. : Poon Trading Pte. (202122284R)
 Owner or Company Contact No. : _____ Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : Poon Dai Wang (S97244536)
 DRIVER'S Date Of Birth : 18.07.1997 DRIVER'S License Pass Date 21.03.2016
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner
 DRIVER'S Address : 348D Yishun Avenue 11 # 03-603 S(764348)
 DRIVER'S Contact No./ Alt No. : 1) _____ 2) 92987959
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : info@takwing-trading.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): Apax include driver
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): NIL

Other Party Driver's Particular (if any)

Vehicle No: SKN 9971 J	Vehicle No: _____
Vehicle Make/Model: BMW	Vehicle Make/Model: _____
Name Driver: Qiu Shui Ping	Name Driver: _____
IC No. Driver/Contact: S2744707D / 97466197	IC No. Driver/Contact: _____

*** NEW - Passenger's name & gender:**

- ① Kossram Ismail (m)
- ② Mica Robel (m)
- ③ Banna Al Hasan (m)



Motor Commercial

MZ300/C
R SN
AN0715A
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.	DMCVSNW00075922201	Engine No.: 263A50007561319	
		Cha. No.: ZFA26300006C64647	
1. Index Mark and Registration Number of Vehicle	GBF1236A	AUTOSAFE	
		=====	
2. Name of Policy Holder	POON TRADING PTE.		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	29/06/2022 (00:00:00)	Excess Sect I .	S\$450.00
		EX ON WINDSCREEN .	S\$100.00
4. Date of Expiry of Insurance	28/06/2023		

5. 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: ALL INS MARKETING PTE LTD
Authorised Officer

Authorised Signatory

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	284R
Vehicle Details	
Vehicle No.:	GBF1236A
Vehicle to be Exported:	No
Intended Deregistration Date:	08 Oct 2022
Vehicle Make:	FIAT
Vehicle Model:	DOBLO CARGO MAXI 1.6 MTJ AMT GLAZE
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No.:	263A50007561319
Chassis No.:	ZFA26300006C64647
Maximum Power Output:	-
Open Market Value:	\$19,608.00
Original Registration Date:	29 Jun 2016
First Registration Date:	29 Jun 2016
Transfer Count:	1
Actual ARF Paid:	\$981.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	28 Jun 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$48,002.00
COE Rebate Amount:	\$17,867.00
Total Rebate Amount:	\$17,867.00

The information contained herein is correct as at 06 Sep 2022

OK