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SN0822980002 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 08/09/2022 14:58 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (08/09/2022 14:58 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed</u> by the <u>Policyholder and/or the Actual Driver</u>

- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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,

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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

08/09/2022 14:58 (SGT) Both 07/09/2022 09:00 (SGT) Loyang Ave, Singapore EXIT 2 (TOWARDS TPE) Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SKV2257S

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

Email Address Mobile Phone No Alternative Phone No No LIAO XUELIAN SXXXX872G dingli_christina@yahoo.com.sg (Phone) +65-88098886

VEHICLE PARTICULARS

Manufacturer Model

Variant

Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Lexus Nx200t

Private use

No - Claiming third party Private car

Auto 1998

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

China Taiping Insurance (Singapore) Pte. Ltd. DMPCSNW00178402100

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

LIAO XUELIAN SXXXX872G 28/02/1981 Indoor

Date Of Driving Pass 21/07/2006 Driving experience 16 YEARS AND 2 MONTHS Gender Female Mobile Number (Phone) +65-88098886 Alt. Phone Number Email Address dingli_christina@yahoo.com.sg Address BLK 458 PASIR RIS DRIVE 4 #08-295 Address complement Postcode 510458 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) 2 Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name UNKNOWN Gender Female 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? No DETAILS OF OTHER VEHICLE PROPERTY 1 Vehicle Registration Number SMY6047R Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour	
Vehicle Category	Private car
Name of Driver	1=
Contact Number	-
Address	
Address complement	_
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	:-
No. Of Passenger (Including Driver)	1-

IMPORTANT NOTICE

- 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. 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)

l 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' law yers/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, involces, 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
- (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

& Time

Withessed by Reporting Centre AVENUE

EX17 2 (FOLLARDS TPE

Sketch Plan

) SKV 22573

Describe Circumstances of the Accident
On the stated date and time, I was driving along
LOYANG AVE EXIT 2 (TOWARDS EXPRESSMAY TPE) at a slipt road
There incoming vehicle right my right and 1 stop.
Within a second vehicle B (Smy 6047 R) collided onto my
rear portion. I alight and check the situation and we exchange
particular and left the since.
Velide A. SKV 2) 578
Velicle B SMY 6047 R.
V2000C 12 21.17 GO 17 P.

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	07.09.2022	ime: 0900Ш	12 · N	A STATE OF THE PARTY OF THE PAR	
location of accident	LOYANG ADE EXTL 2 (TOWARDS	EXPRESSU	WAY TRE 1	
	Details of Own V	the second secon	10 1 10 10 10 V		
Vehicle Number		-111616	Make/Model:	LEVILE MORO	l-de:
Insurer	: CHINA TAIPING	Passenge	r (incl. Driver):	the contract of the contract o	1000
Palicy No	: DMPC8NW00178402100		Policy Type: 0		./-
<u>Policyholder</u>			23*	1 1000 100 100 100 100	
Name	: LIAO XUELIAN		NRIC/FIN no.:	\$8175872	G.
	88098886		-		-1 (
Drive					
	LIAO KUE HAN	mid-ham region	NRIC/FIN no: S	381758720	51.
	88098886.		D.O.B:	28.02.19	81
Email	dingli-chiistina ayahoo.	om. 88 '	Occupation:	1N000R.	
	BIK 458 PASIR RIS DRIVE 4 #	68-295	510458)		
In the second control of the second control		Relationship with	Policyholder: _	owner.	
General Information					
Weather conditions:		Road surface			
Police report:		Video Footage			
Prosection Letter:		es against whom			
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	Name	Veh No.	Seatbelt (Y/N)	(Y/N)	
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Vehicle no.:	Vehicle B SMY 6047 R		Vehicle C		
Driver name:	3111/604/2				
NRIC/ FIN no.:					
Contact no:					
Insurance Co:			-		
Remarks:				ļ.	
(Made/Model, Passenger, property Info & etc)					
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	Detail of Witner Witness 1				
Name:	Writiness 1		Witness 2	-	
Contact no.:					
Claim Type:	Own Damage/Ihird Party/ Reporting Only	Policyholder/	7. The state of th	为"自己"	
Workshop	And Demage/ Little Party/ Neporting Only	driver	R.		
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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

AN0687A Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 18 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00178402100

Ergine No.: 8ARW109147

Cha. No.:JTJBARBZX02038892

1. Index Mark and Registration

SKV2257S

AUTOSAFE

Number of Vehicle

2. Name of Policy Holder

LIAO XUELIAN

Named Drivers Ex Sect. I

\$\$1,500.00

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

14/09/2021 (00:00:00)

Additional Ex Other than Named Drivers:

4. Date of Explay of Insurance

13/09/2022

Ex Sect. I - Age <= 25 Ex Sect. I - Age >= 26 \$\$3,000.00 \$\$500.00

* Age as at date of accident

EX ON WINDSCREEN .

\$\$100.00

Persons or Classes of Persons entitled to drive*

(a) The Policyholder

(b) Any other person who is driving on the Policyhalder'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 \$\$1,000 will apply to the Insured and Named Drivers in the event of Cwn Damage Claim at our Authorised Workshops for each Policy Year. 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: CREDENCEL INSURANCE AGENCY

Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 👘 3 Anson Road #16-00 Springleaf Tower Singapore 079909

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6222 1033

www.sg.cntaiping.com

Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No. SKV2257S

Make / Model
TOYOTA / LEXUS NX200T LUXURY S/R

Vehicle Type:
P11 - Passenger Station Wagon/Jeep/Land Rover
Vehicle Attachment 1:
With Sun Roof

Vehicle Scheme:

Normal

Chassis No.:

JTJBARBZX02038892

Propellant:

Petrol

Engine No.:

8ARW109147

Motor No.:

Engine Capacity:

1998 cc

Power Rating:

Maximum Power Output:

175.0 kW (234 bhp)	
Maximum Laden Weight: 2350 kg	
Unladen Weight: 1755 kg	
Year Of Manufacture : 2015	
Original Registration Date : 04 Sep 2015	
Lifespan Expiry Date :	
COE Category: B - Car above 1600cc or 97kW (130bhp)	
Quota Premium: \$62,140.00	
COE Expiry Date : 03 Sep 2025	
Road Tax Expiry Date : 03 Sep 2022	
PARF Eligibility Expiry Date : 03 Sep 2025	
Inspection Due Date : 03 Sep 2024	
Intended Transfer Date : 21 Sep 2022	
CO2 Emission : 184.00 (g/km)	
CEV/VES Rebate Utilised Amount :	
CO Emission :	
HC Emission :	

NOx Emission: