

Shelf 229 C0004

12/09/2022 15:40	Job description	Date & Time Completed	Done by
File No: 13A/C112200893917	SAS e-filing		
Alt No: SWP 929 J	E-mail (within this, A/C 3hrs)		
O.A: 09/09/2022 19:28	1-Motor Claim Form		
D: (TP) / Reporting Only	1-Motor W/O (within 0.5 hrs, TP 4hrs)		
P Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (Tell:	Fax:	
P Particulars: Yeh No: SAC 2513M. INC () / Non-INC ()	Tell:		
Owner / Driver: (
Policy No: () Period: () Cover Type: ()			
Confirmed by: () Date: () Time: ()			
Insured/Driver Liability: () % (Note: Est. Status (WO): N: 0-20%; P: 21-79%; P: 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: (If no line 6788 6616)			
1) Apply for Transport Allowance () / Courtesy Car ()			
2) QC Check/ Post Repair Inspection ()			
3) Upload Resurvey Photo (Repair Cost > \$3000) ()			
Injury: ()			
Date: () Time: () Done by: ()			
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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	12/09/2022 15:40 (SGT)
Reported by	Both
Date of Accident	09/09/2022 19:28 (SGT)
Exact Location of Accident	Rangoon Rd, Singapore
Additional Location Information	TOWARDS RACE COURSE ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SND929J
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TOH KOK SOON (ZHUO GUOSHUN)
NRIC No	SXXXX089A
Email Address	koay.xinwang@gmail.com
Mobile Phone No	(Phone) +65-90091808
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	GLE 63S AMG
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	5461

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00113292200

DRIVER

Name of Driver	TOH KOK SOON (ZHUO GUOSHUN)
NRIC No	SXXXX089A
Date Of Birth	12/03/1972
Occupation	Indoor

Date Of Driving Pass	20/07/1992
Driving experience	30 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90091808
Alt. Phone Number	-
Email Address	koay.xinwang@gmail.com
Address	BLK 43 CAMBRIDGE ROAD #03-12
Address complement	-
Postcode	210043
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	Side Swipe
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 SKETCH AND POLICE REPORT T/20220910/7022

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC2513M
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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	TOH KOK SOON (ZHUO GUOSHUN)
Gender	Male
Phone No	(Phone) +65-90091808
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SND929J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 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 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

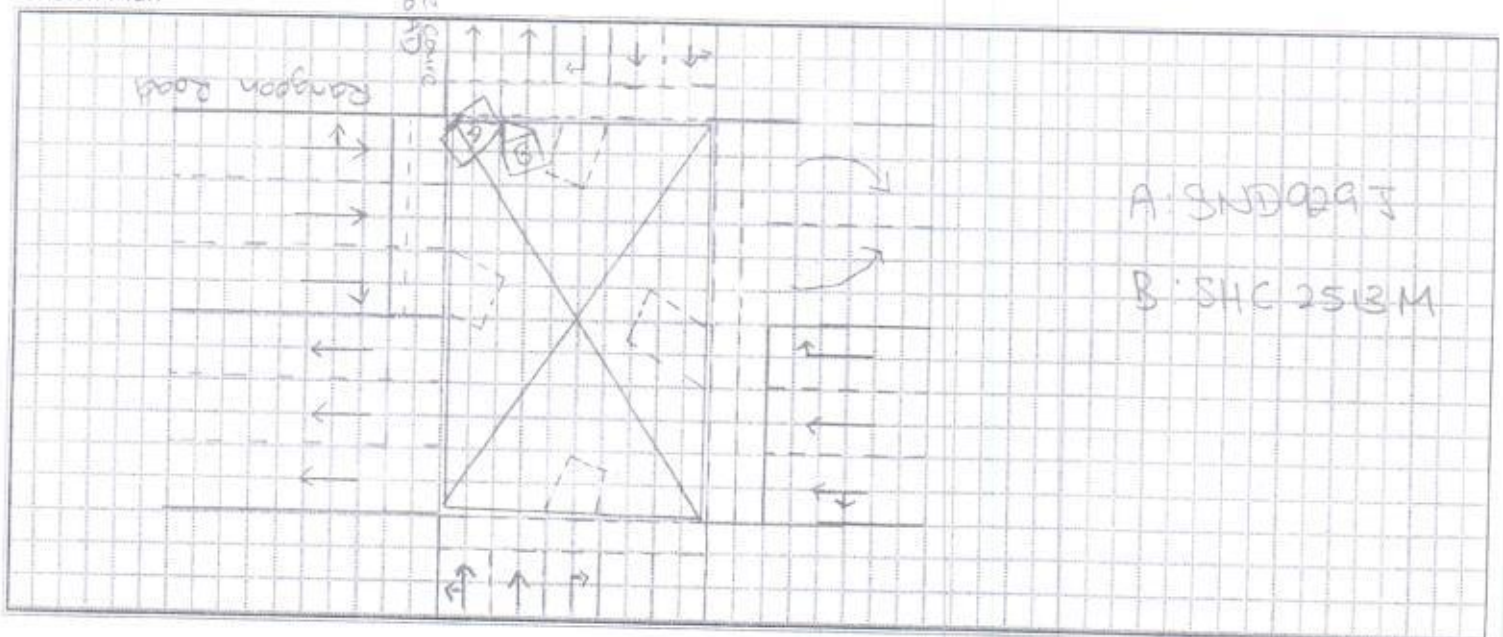
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

12/09/2022
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

On the 9th Sep 2022 @ 1928 Hrs, I was driving along Rongean Road intend turn left into Race Course Road. At the traffic of Rongean Road / Race Course Road I was waiting for pedestrians to cross before I turn left. While I was making/negotiating Left Hand turn there was a vehicle squeezing from my left, as to avoid that vehicle I turn toward the right lane of Race Course Road. Suddenly vehicle B (SHC251341) turned abruptly from the opposite direction. Due to his careless driving the said vehicle encroached into my lane and collided against my vehicle (SND9293). After the collision, my vehicle was not able steer due to the hard impact to my wheels. We both drivers exchange particulars and I engaged towing service to shift my car to repair shop.

POLICE REPORT T/20220910/7022

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



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



SINGAPORE POLICE FORCE



T/20220910/7022

1 of 3

Report No. T/20220910/7022

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/09/2022 14:01		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TOH KOK SOON		Address: 43 CAMBRIDGE ROAD #03-12 SINGAPORE 210043			
ID Type / ID No.: NRIC NO / S7232089A		Contact No.: Home/Office:		Mobile: 90091808	
Nationality: SINGAPORE CITIZEN		Email: SAMTOH2089@HOTMAIL.COM			
Sex: Male	Age: 50	Date of Birth: 12/03/1972	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: manager		Driving Licence Information: Class:		Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/09/2022 19:30	Type of Location: X-Junction
Location: RANGOON ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHC2513M	Car					0
SND929J	Car	MERCEDES BENZ	AMG GLE 63 S 4MATIC (R22 LED SR)	White		0



**SINGAPORE
POLICE FORCE**



T/20220910/7022

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

2 of 3

Report No. T/20220910/7022

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SND929J	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001132 92200	05/05/2022	01/08/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TOH KOK SOON	ID No.	S7232089A
Related Vehicle	SND929J (Car)	Contact No.	90091808
Hospital/Clinic	HEALTHPLUS CLINIC & SURGERY	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	10/09/2022	Date	NIL
No. of Days granted Medical Leave	03	Degree of	Serious

Brief Details.

On the 9th Sep 2022 @ 1927 Hrs, I was driving along Rangoon Road intend turn left into Race Course Road. At the traffic of Rangoon Road / Race Course Road I was waiting pedestrians to cross before I turn left. Awhilst I was making / negotiating left hand turn, the vehicle B (SHC2513M) turned abruptly from the opposite direction. Due to her careless driving the said vehicle encroached into my lane and collided against my vehicle (SND929J) . After the collision, my vehicle was not able steer due to hard impact to my wheels, we both drivers exchange particulars and I engaged towing service to shift my car to repair shop.



**SINGAPORE
POLICE FORCE**

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



T/20220910/7022

3 of 3

Report No. T/20220910/7022

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 /
MUHAMMAD NOOR BIN ABDUL RAHMAN
Contact No.: 65476219

NP168

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

Date/Time:
10/09/2022 14:01

Classification Of Case:

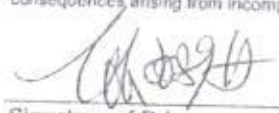
Send/Fax to: _____

Submitted: _____

SINGAPORE ACCIDENT STATEMENT

BASIC INFORMATION			
Date of Accident:	09.09.22	Time of Accident:	1928 Hrs.
Exact Location:	Rangon Road toward Race course Road		
DETAILS OF OWN VEHICLE			
Vehicle Registration No.	SND929J	NRIC / FIN / Passport no:	S72320899
Name of Registered Owner:	Toh Kok Soon (Zhao Guoshun)		
Owner's Email:	koay.xinwang@gmail.com	koay.xinwang@gmail.com	
Owner's Address:	Blk 43 Cambridge Road #103-02 S(210043)		
Vehicle Make:	Mercedes Benz	Vehicle Model:	GLE 63S AMG
Engine Capacity (cc):	5500	Transmission:	Auto/ Manual
Type of Claim:	Own Damage / Third Party / Reporting Only		
Vehicle Category:	Private / Commercial / Motorcycle / Private Hire		
Name of Insurance Co:	China Taiping		
Type of Policy:	Comprehensive / Third Party / Third Party, Fire & Theft		
Policy Number:	DMPCSNW00113292200		
DRIVER			
Name of Driver:	<input checked="" type="checkbox"/> same as		
NRIC / FIN / Passport no:		Date of Birth:	12-03-1972
Occupation:	Indoor/ Outdoor	Driving Pass Date:	20 Jul 1992
Contact Number:	9009 1808	Gender:	Male / Female
Address:			
Relationship with Owner:	Owner / Employee / Spouse / Child / Hirer / Other:		
Translator Name:		Translator NRIC:	
Translator Contact no:		Translator email:	
GENERAL INFORMATION OF THE ACCIDENT			
Type of Collision:	Chain collision / Side Swipe / Front to Rear / Others:		
Weather Condition:	Clear / Raining / Others:	Road Surface:	Dry / Wet
Video available:	Yes / No		
Was anybody injured?	Yes / No	Police Report Made?	Yes / No
No. of passenger onboard (including driver):	One		
DETAILS OF OTHER VEHICLE			
	Vehicle 1	Vehicle 2	Vehicle 3
Vehicle Registration No:	SHC 2513M		
Vehicle Make / Model:			
Name of Driver:			
NRIC / FIN / Passport no:			
Contact Number:			
Name of Insurance Co:			
DETAILS OF WITNESS			
Name:	Contact Info:		
DETAILS OF INJURED PERSON			
	Person 1	Person 2	Person 3
Name / in which vehicle?:	Toh Kok Soon		

Driver's Declaration: I declare that the information given in this report are true and accurate to the best of my collection and I bear full responsibility for any consequences arising from incomplete or inaccurate information that are submitted.


Signature of Driver

Date and time



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.

Motor Private Car

MX1/B

N SN

AN0727A

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.

DMPCSNW00113292200

Engine No.: 15798260084520

Cha. No.: WDC2923752A012165

1. Index Mark and Registration
Number of Vehicle

SND 929 J

2. Name of Policy Holder

TOH KOK SOON (ZHUO GUOSHUN)

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

05/05/2022
(15:21:06)

Excess Sect I . S\$5,000.00

Excess Sect. I (Outside Singapore) S\$10,000.00

4. Date of Expiry of Insurance

01/06/2023

EX ON WINDSCREEN . S\$1,000.00

5. Persons or Classes of Persons entitled to drive*

As per Named Driver(s) stated below.

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.

TOH KOK SOON (ZHUO GUOSHUN)

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.

HIRE PURCHASE CO.: HONG LEONG FINANCE LTD

* 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

Issued By:

Cy

SENG HUP AUTO PTE LTD
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

杨亚美

Authorised Signatory

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

6389 6111

6222 1033

www.sg.cntaiping.com