		100	
	3. · · · · · · · · · · · · · · · · · · ·	6 100 19 15 1500	A
ONAL Assessment Centre	Settilces: Multishoot.	3409249000	Donahu
11/14 Lagran 11/14	Job description .	Date of Pine Completed .	. Done by
10: NBB/1M 2229153N	. SAS e-illing	, ,	
SWY 3117K	E-mail (while this, Ale the	) , , ,	
A: 16 08 2802 13:15	I-Motor Claim Form	1	
C. C	1-Motor YY/O OYIME OF	2hrs, 77 4hrs).	1 11 11 11 11 11 1
(17) Reporting Only .	I-Photo Uploaded.		
· · · · ·	Assessment/Survey Repo	ort · l	
nsurer:	Assit Report by FRX / H	and to Owner/ WKID	F RX1
orred WKsp/INC Assign WKsp/QW1(		7911	
auticularit Yelt Not	"SON 4115C"	4C( )/Mon-tho( ).	)
vner / Driver: (		) Cover Type: ( '	<u> </u>
olicy No: ( · ' ) P	erlod! ( Date.	. Timu:	)
1501		Ni 0-20% P: 21-79% P: 8	0-100%)
nsured/Driver Liability: ( %)	[Note-221" 202100 [11		
/ CB enistration: ( ' . )	AA BLEEDAL 1 DO /		Crizio In Company
). Loading 1 >	* The second sec		Christian in a company
neral Remarks ) Yealk-In Customer's	Information strictly Confiden	tiel & Strictly NO refer of repai	rer.
) Walk-In Customer ( Custoffiel a)	WELL URGENTLY.	1 1	1 1 1
			the state of the s
· ) Total Loss Case 1 to e-mail It	roice: YES ( ) / NO (	)   Toyring Co! (	AND THE PROPERTY OF THE PARTY O
· ) Total Loss Case 1 to e-mail It	101061 A408 ( ) \ 100 (1	) (Toving Co) (	(Carry Individual States of the
Total Loss Case   1 to s-mail 111  Drive-In ( ) / Toyed-In ( , ) ; Inv	Kentan di Kanada da K	)」「Towing Cot( Date Tiffe Comと	AND THE PROPERTY OF THE PARTY O
Drive-In ( )/Towed-In ( ,) ; Inv	) / Courtesy Caz ( )	) I Towns Coi (	(Cd) / make Bank by
Drive-In ( )/Towed-In ( ,) ; Inv	)/ Courtesy Car ( )	)。(Towing Cot ( Dates Tine Com))	Bendby
Drive-In ( )/Towed-In ( ,) ; Inv	)/ Courtesy Car ( )	)」「Toyring Cot( Dive THUCO開設	(Cd.) Karaka Banka by
. ) Total Loss Case 1 to e-mail 11.  Drive-In ( ) / Towed-In ( , ) ; Inv  contacks a light Contachine (6788/661  1) Apply for Transport Allowance ( 2) QC Check/ Fost Repair Inspection  3) Upload Resurvey Photo [Repair Cos	)/ Courtesy Car ( )	) (Towing Co) ( Days The Comp	Beneby
Total Loss Case 1 to e-mail 11.  Drive-In ( ) / Towed-In ( , ); Inv  Circa kis a life of the line of 88 661  Apply for Transport Allowance (  2) QC Check / Post Repair Inspection  3) Upload Resurvey Photo [Repair Cos	)/ Courtesy Car ( )	)」「Towing Cot( Dave The Come	Beneby
Total Loss Case 1 to e-mail 11.  Drive-In ( )/ Towed-In ( , ); Inv  emarks: [Million of the case of th	)/ Courtesy Car ( )	) (Towing Co. (	Beneby
Total Loss Case 1 to e-mail 11.  Drive-In ( )/ Towed-In ( , ); Inv  emarks a lift of norther cases 661  Apply for Transport Allowance (  2) QC Check/ Post Repair Inspection  3) Upload Resurvey Photo [Repair Cos	)/ Courtesy Car ( )	)、「Towing Cot( Date Title Com社会	Beneby
Total Loss Case 1 to e-mail 11.  Drive-In ( )/ Towed-In ( , ); Inv  emarks a lift of norther cases 661  Apply for Transport Allowance (  2) QC Check/ Post Repair Inspection  3) Upload Resurvey Photo [Repair Cos	)/ Courtesy Car ( )	) (Towing Co) (	Beneby
Total Loss Case 1 to e-mail 11.  Drive-In ( )/ Towed-In ( , ); Inv  emarks a lift of norther cases 661  Apply for Transport Allowance (  2) QC Check/ Post Repair Inspection  3) Upload Resurvey Photo [Repair Cos	)/ Courtesy Car ( )	) (Towing Cot (	Beneby
Total Loss Case 1 to e-mail 11.  Drive-In ( )/ Towed-In ( , ); Inv  emarks a lift of norther cases 661  Apply for Transport Allowance (  2) QC Check/ Post Repair Inspection  3) Upload Resurvey Photo [Repair Cos	)/ Courtesy Car ( )	Y ( Towning Cot (	Dentoy
Total Loss Case 1 to e-mail in Orive-In ( )/ Towed-In ( ,) ; Involve-In ( ,) ; Invol	)/ Courtesy Car ( )	Towning Cot (	Dentoy
Total Loss Case 1 to e-mail 11  Orive-In ( )/ Towed-In ( , ) ; Inv  emarks a Sulfig refline (6788/66)  Apply for Transport Allowance ( 2) QC Check/ Post Repuir Inspection  3) Upload Resurvey Photo [Repair Cos  Injury /  125(17)(17)(17)	)/ Courtesy Car ( )	Towning Cot ( Dissa Time Comits  Involve Frederigion Chaele  DATA Acident Reporting (\$30)	TNC (Sto)
Total Loss Case 1 to e-mail in Orive-In ( )/ Towed-In ( ,) ; Involve-In ( ,) ; Invol	)/ Courtesy Car ( )	Towning Cot (  Deve Time Comes  Involve & redgration Consci.  1) ARI Action Reporting (\$30):  2) DAI Dames Attention (\$100):  3) TFI Taylor Fee	THC (350) 5:003(1) 5:100
Total Loss Case 1 to e-mail 11  Drive-In ( )/ Towed-In ( , ) ; Yny  Cana his Mill Carline (6758 56)  Apply for Transport Allowance ( 2) QC Check/ Post Repuir Inspection  3) Upload Resurvey Photo [Repair Cos  Injury /  1255 (2017) ( ) Addition ( )	)/ Courtesy Car ( )	Towning Cot ( Dissa Time Comes  Involve Frederication Check  Involve Frede	THC (340)  5 (0/3) (1)  5 (0/3) (1)  5 (0/3) (1)
Total Loss Case 1 to e-mail in Drive-In ( ) / Towed-In ( , ) ; Yny Carachis ( ) / Towed-In ( , ) ; Yny	)/ Courtesy Car ( )	Description Con ( Description Company  Involve Freeder attent Company  Involve Freeder attention (S100)  Involve Fre	THC (340)  THC (340)  THC (340)  THO (340)  THO (340)  THO (340)  THO (340)
Total Loss Case 1 to e-mail in  Drive-In ( ) / Towed-In ( , ) ; Yny  Comarks ( ) / Towed-In ( , ) ; Yn	)/ Courtesy Car ( )	Deve The Competer  Deve The Competer  Involve Previous (100)  1) ARIAction Reporting (100)  2) DAI Dames Attention (100)  3) TFI Towing Fiel  4) FTI Follow Through Survey  For slaiming attlast INIQ Only five  6) TRY Re-in specifor  The Idaa DA + SMRT Survey	THC (340)  5 (0/341)  5 (0/341)  7 (10) 17 (100)
Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , )	)/ Courtesy Car ( )	Towning Cot (  Disease The Complete  Involve Frequentian Charles  Involve Frequentian Charles  Involve Frequentian Charles  Involve Frequentian Charles  Involve Frequentian County  Involve Frequenti	THE (310)  THE (310)  S(20)  TYPY) \$300  TYPY) \$300  TYPY) \$300  TYPY) \$310
Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , )	)/ Courtesy Caz ( )  E> \$3000);;; ( , , )	Description Complete  Involve Presentation (Chrest  ) ARIAculant Reporting (\$30)  2) DAI Dames Attentreed (\$100)  3) TFI Towins Fie  4) FTI Follow Through Survey  For claiming attlast INCO Only fw  6) TRy Revision position  7) Nit Isaa DA + SMRT Survey  8) NTUC Additional Servious  1002  113; Courtery Carl Tpt Allowan	THE (350)
Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , )	)/ Courtesy Caz ( )  E> \$3000);;; ( , , )	Involve Previous Comes  Involve Previous (Comes  Involve Previous (Come	TNC (350)  100 (350)
Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , )	)/ Courtesy Caz ( )  E> \$3000);;; ( , , )	Description (Christian Description Description (Christian Description (Christian Description Description (Christian Description Description Description Description Description (Christian Description Descrip	TRIC (350)  TRIC (350)  TRIC (350)  TRIC (350)  TRIC (350)  TRIA (350)  TRIC (
Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , )	)/ Courtesy Caz ( )  E> \$3000);;; ( , , )	Description (Company Company C	THE (350)  THE (350)  THE (350)  STORY (31)  STORY (31
Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In ( , ) ; Yny Drive-In ( ) / Towed-In (	)/ Courtesy Caz ( )  E> \$3000);;; ( , , )	Description (Christian Description Description (Christian Description (Christian Description Description (Christian Description Description Description Description Description (Christian Description Descrip	THE (310)  THE (310)  THE (310)  THE (310)  THE (310)  STORAGE

SN09229G0008 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 16/09/2022 17:14 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (16/09/2022 17:14 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report <u>correctly</u> 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 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.

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

16/09/2022 17:14 (SGT) 16/09/2022 13:15 (SGT) PIE, Singapore TOWARDS TUAS Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SMY3717K

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

Email Address Mobile Phone No Alternative Phone No No

TEO CHENG HONG SXXXX216G

winson\_tingwei@hotmail.com (Phone) +65-94506991

VEHICLE PARTICULARS

Manufacturer Model

Variant accident

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

Toyota Noah

Employment

No - Claiming third party

Private car Auto 1797

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number Tokio Marine Insurance Singapore Ltd 22-MQ000860-R01

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

TEO CHENG HONG SXXXX216G 26/09/1952 Outdoor

Date Of Driving Pass 05/09/2005 Driving experience 17 YEARS Gender Male Mobile Number (Phone) +65-94506991 Alt. Phone Number Email Address winson tingwei@hotmail.com Address BLK 181B BOON LAY DRIVE #15-638 Address complement Postcode 642181 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

No Was any foreign vehicle involved in the accident? 2 Number of vehicles involved in the accident 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? 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? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Yes

Yes

FILE TOO BIG WITH OWNER

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SJN4715C Vehicle Manufacturer Toyota Vehicle Model Estima Vehicle Variant Vehicle Colour Vehicle Category Private car 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	TEO CHENG HONG	
Gender	Male	
Phone No	(Phone) +65-94506991	
Address		
Address Complement		
Post Code	-H (#X	
Approximate Age Years Old		
Injuries Sustained	SLIGHT INJURY	
Injured person in which vehicle?	SMY3717K	
Were seat belts worn?	Yes	
Was this injured conveyed to hospital by ambulance?	No	

### SKETCH PLAN

### IMPORTANT NOTICE

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

Lunderstand, 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

vehicle B STN 4715C

Describe Circumstance of the Accident On 16/09/2022 Chart 13-15pm. I was driving clarg
PIE towards that expressionly. Total 3 lanes I am at 2nd
line middle. I notice introd Rund have Road work construction
and all cors slow down so I slow down as well, Suddenly
vehicle B" SJN 4715C" collided my ver cost partices
with impact very heavy forces my car pushed forward. I have
video tootage recorded the accident. After left the accident scene
I felt book body pain and unwell so I decided to consult
Juster and given MC 2 days.

Declaration

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

160

100

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)

2

Date: 16/09/2022 Time: 13./Spm (24 hr format)
Along PIE towards that
ARS / DETAILS OF OWN VEHICLE
SMY 3717 K Make & Type": To YOTA # NOAH
TEO CHENG HONG
506452169
9450 6991 Email/Fex No: Winson tingwei @ lotmail.
the state of the s
☐ Private Usage / ☐ Commercial or Company's Usage
☐ Yes / BNo If No. Please state action to be taken
Third Party Claim (SYH / Other workshop?) / Reporting Only
China / EQ / Etiga / MSIG / Tokio Marine) Great American
Comprehensive D Third Party / Third Party Fire & Theft
22-MQ000860-R01
TEO (HENG Hong Gender Male) Female
506452169
26/09/1952 (dd/mm/yyyy)
□ Indoor / □ Outdoor
05/09/2005
9450 6991
BIK 181B BOON LAY Drive #15-638 S (642181)
Email: Winsun ting we, @ hotmaililam Fax:
Owner DEmployee / Spouse / Friend / Others:
Veh No; 1) 2) 3)
Ins Co: 1) 2) 3)
To pay Others
Chain Collision / Side-Swipe / Front to Rear Others:
Clear / Raining / Others:
Wet / Ory / Others:
□No / ☑Yes (Police Report required)
□No / □Yes
21/07 12/65
→ ☑No / ☐Yes Veh No:
Veh Category:
Tio / Dyes
□No / Pres Too big to upload. With owner.
≥No / □Yes If Yes, Please state which Police Station
DNo / Dyes If Yes, against whom?
((0))
( 01 ) Name: Name:

I I TI TI TI TO TO TO THE TOTAL CONTROL OF THE TOTAL CONTROL OT THE TOTAL CONTROL OF THE TOTAL CONTROL OT THE TOTA

DETAILS OF OTHER VEHICLE(S) / PROP	ERTIES	
Vehicle Registration Number *	1) SJN 4715C	(2)
Vehicle Make / Model / Colour	TOYOTA Estima	1 6412
Damage to Vehicle/Property? Vehicle Category *		
Name of Driver		
NRIC/Passport Number		
Contact Number		
Address		
Insurance Company Name		
DETAILS OF WITNESS		
Name		
Contact No. / Email Address		

## Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No : M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T. (65) 6221 6111 F (65) 6221 4355 / (65) 6224 0895 E tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Manne Group



## 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)

Policy No.: 22-MQ000860-R01 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle SMY3717K

Chassis No.: ZWR800415878

2. Name of Policyholder

TEO CHENG HONG

 Effective date of the Commencement of Insurance for the purposes of the Act

02/03/2022

4. Date of Expiry of Insurance

01/03/2023

5. Persons or Class of Persons entitled to drive\*

The Policyholder

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

### 6. Limitations as to use\*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.

Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- 3) Use for the carriage of passengers for hire or reward by any person except for private hire services
- 4) Use for hire or reward except for (3) and rental by the Policyholder.
- \* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

### IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMAT	TON		Account:	2891DDA
Insurance Plan: Limit for total loss or theft: Policy Excess: Financial Interest:	Comprehensive Essential Prevailing Market Value Own Damage Claims Excess-Third Party (Sect II) Young/Inexperienced Driver Windscreen Excess PRIME MOTOR & LEASING	SGD 2,500 SGD 2,000 SGD 1,500 SGD 100 PTE LTD	(In Addition To	o Own Damage Claims Excess)

User Name: TMIS Direct from TM Onli Printed 28/02/2022