1 /7 /	Caminai	1111111	10 4224	+VPTXUY		- nectors and a single
ATTONAL Asyessment Centre	Services vin		Onte &Time C	Completed	Done by	
13 (16) 2022 (6) (40)	Job description SAS e-filing	14 - 4				
61 NO: NABICITIZE 10 18414						,
16h No: SUI 62811	E-mail (within \$ht	The state of the s	- " 1	-		7
1000 29 10 D802 17/50	1-Motor Claim	and the same of the same of the same of			and the state of t	
	I-Motor W/O (/* (1) (2)		and the same and the same	- •
DD (TP) Reporting Only	i-Photo Upload			- 1	tonic transfer on a second	
Management of the second secon	Assessment/Surv				management argume, band \$4.14.1 . \$	
P Insurer:	Ass't Report by	Fax / Hand to	Ovner/Wisp			
referred Wksp / INC Assign Wksp / QW: (Tel!	PART AND MARKET TO 1 A PART	ax:	-
P Particulari Veli No: 98	PAULE	, INC(M-26/1/	c();		
Owner / Driver: (The same of the sa	Tek)	
Policy No: () Peri	ied: (Cover Type:			NAMES OF THE OWNER OF
Confirmed by : '(La Posta Maria	Date:		ter tren	10010	-
The state of the s	lote-Est Status (W		M. F. 61.1/2	70. 1.30.	14.02.4	
	Varranty: YES ()/ NO (-
Excess: (S) Loading: \$1,00		mile Her by the north to		15 x 15 x 15 5 5	1000	
TO THE RESIDENCE OF THE PARTY O		Side of the Street	- 1 2 2 2 3 CO			
) Walk-in Customar: Customers infor	mation strictly Con	mognasia svi	12/19/10/12/01	man it is an area at the		- manager promoting on the
) Total Loss Case : to e-mail Insure	T URGENILY.					
The state of the s	344D4 1/N	0/)	relive Cost)
Drive-In ()/ Towed-In (); Invoice	: YES()/N		owing Cort) hu
Drive-ln ()/ Towed-ln (); Invoice	: YES()/ N		mineral property and the second property of t	Comple'sa	Ps. Co. Done	y
Drive-In ()/ Towed-In (); Invoice emarks: http://dischortines/6788(616) http://dischortines/67	: YES()/ N		mineral property and the second property of t	Completed	Page Done	by
Drive-In () / Towed-In (); Invoice entablished PriNG hardines 6788 (616) at) Apply for Transport Allowance () / C) QC Check / Post Repair Inspection	: YES()/N		mineral property and the second property of t	Completed	Done	by
Drive-In ()/ Towed-In (); Invoice emarks: he MING had lines 6788 (616) a) Apply for Transport Allowance ()/ C) QC Check / Post Repair Inspection	: YES()/N		mineral property and the second property of t	Completud	Carlo Done	by Annual Control of the Control of
Drive-In ()/Towed-In (); Invoice entablished MING had lines 6788 (616) of) Apply for Transport Allowance ()/C) QC Check / Post Repair Inspection	: YES()/N		mineral property and the second property of t	Completua		and the second s
Drive-In ()/ Towed-In (); Invoice emaplished MING harlings 6788(61618)) Apply for Transport Allowance ()/ C) QC Check / Post Repair Inspection) Upload Resurvey Photo [Repair Cost > 93 Injury:	: YES()/N		mineral property and the second property of t	Completed		
Drive-In ()/ Towell-In (); Invoice entablished P(ING horlines 6788(616))) Apply for Transport Allowance ()/ C) QC Check / Post Repair Inspection) Upload Resurvey Photo [Repair Cost > 93 Injury :	: YES()/N		Ditassing	Compleiva	Done Done	
Drive-In ()/ Toweld-In (); Invoice emarks: *** *** *** *** *** *** *** *** *** *	: YES()/N		Ditassing	Completed		A M
Drive-In () / Towell-In (); Invoice emaplistics of ING had lines 6788 (616) a) Apply for Transport Allowance () / C) QC Check / Post Repair Inspection) Upload Resurvey Photo [Repair Cost > 93 Injury :	: YES()/N		Ditassing	Compleiva		
Drive-In () / Towell-In (); Invoice emaplisthe	: YES()/N		Ditassing	Comple!		
Drive-In () / Towed-In (); Invoice emaplisable (ING holdings, 6788, 6616) al Apply for Transport Allowance () / C QC Check / Post Repair Inspection Upload Resurvey Photo (Repair Cost > 93 Injury / ata Tuna' (Agtion)	: YES()/N)				WASTER ST
Drive-In () / Towed-In (); Invoice emplished AING Edilines 6788 6616) Apply for Transport Allowance () / C) QC Check / Post Repair Inspection) Upload Resurvey Photo [Repair Cost > \$2 Injury : at / Tuna	: YES()/N) Inveice Pro	paration G	r.dusta		
Onive-In () / Towed-In (); Invoice embalistical AING had line (6788) (616) Apply for Transport Allowance () / C) QC Check / Post Repair Inspection) Upload Resurvey Photo (Repair Cost > \$2 Injury: http://www.aptions	: YES()/N Courtsy Car(Inveice Pri	Diswins (SECHISTS A	(350)	WATER CO.
Drive-In () / Towed-In (); Invoice emaplication of ING Edilines of 88,0010) Apply for Transport Allowance () / C) QC Check / Post Repair Inspection) Upload Resurvey Photo [Repair Cost > \$2 Injury : ato Tuna	: YES()/N Courtsy Car(Invesce Practice (1) AR: Accide (2) DA: Derrey (3) TF: Tewing	paration C	SECHISTS A		WATER CO.
Drive-In () / Towed-In (); Invoice emaplistic PING had line (6788,6616) Apply for Transport Allowance () / C) QC Check / Post Repair Inspection) Upload Resurvey Photo (Repair Cost > \$2 Injury : Interval Actions Althory : Ith aniai Refriculars :	: YES()/N Courtsy Car(Invoice Pro Invoice Pro Invoice Pro I) AR : Accide 2) DA : Derray 3) TF: Towns 4) FT: Yellow	paration Cinteres (37.	PECHICLES IN	(155) 510/545 5100	WASTER ST
Drive-In () / Towed-In (); Invoice emaplistic PING had line (6788,6616) Apply for Transport Allowance () / C) QC Check / Post Repair Inspection) Upload Resurvey Photo (Repair Cost > \$2 Injury : Interval Actions Althory : Ith aniai Refriculars :	: YES()/N Courtsy Car(Invoice Pro Invoi	paration Cinterporate (Cinterporate Cinterporate Cinterpo	RECHIEVES	200 (15 5) 200 (15 5) 200 (15 5) 200 (15 5) 200 (15 5) 200 (15 5) 200 (15 5)	WASTER ST
Prive-In () / Towed-In (); Invoice emaplished PING herlines of 88 (616) Apply for Transport Allowance () / C) QC Check / Post Repair Inspection) Upload Resurvey Photo (Repair Cost > 93 Injury : ***********************************	: YES()/N Courtsy Car(Invoice Pro Invoic	Discussion Contracts Contr	RECHIEVES	2 (856) 2 (856) 3 (0/542) 5 (50) 2 (856)	NATURAL CONTRACTOR OF THE PARTY
Drive-In ()/ Towed-In (); Invoice emaplished of ING harlines 6788 (616)) Apply for Transport Allowance ()/ C) QC Check / Post Repair Inspection) Upload Resurvey Photo (Repair Cost > \$2 Injury: Arthronia Actions Injury:	: YES()/N Courtsy Car(Invoice Pro Invoic	Dried Line poration Ci alkacordes G Antisment G Por Through Survey Leadin A F SMFET Survey Internal Services	ECHISTS IN	(1550) 5 (15	NATURAL CONTRACTOR OF THE PARTY
Drive-In ()/ Towed-In (); Invoice entablished (ING hot lines 6788 6616)) Apply for Transport Allowance ()/ C) QC Check / Post Repair Inspection) Upload Resurvey Photo [Repair Cost > \$2 Injury : ato Tuna (Actions iver/Owner puttet No: amaged Portion: ************************************	: YES()/N Courtsy Car(Invoice Pro Invoi	Delawing Control of the Control of t	ECHISTS IN	2 (1550) 2 (1550) 2 (1550) 3 (150) 3 (150) 3 (150) 3 (150) 3 (150) 3 (150)	NATURAL NATURA
Entire in () / Towes - In (); Invoice Semaphysiae Ain's hadding of 88 (616) Apply for Transport Allowance () / C D QC Check / Post Repair Inspection Diplosed Resurvey Photo [Repair Cost > 93 Injury: Onto Tuna Airtigns iver/Owner: ontot No:	: YES()/N Courtsy Car(Invoice Pro (1) Ar. Accide (2) DA. Donay (3) Fr. Towlor (4) Fr. Follow (5) Fr. Reside (7) Nititian D (8) Niuc Aid (9) Ni. Control (Ni.	Drigoritos Daration Ci Daration Ci Daration Ci Daration Ci Paration Survey Later	(Bessey)	(1550) (1550)	A. A. C. C.
Drive-in ()/ Towed-in (); Invoice Semantics the MING hot lines 6788 (616) Apply for Transport Allowance ()/ C Decomply for Post Repair Inspection Diplosed Resurvey Photo (Repair Cost > \$2 Injury : Onto Tunal Actions Siver/Owner: ontact No: comaged Portion: Some aged Portion:	: YES()/N Courtsy Car(Invoice Pro Invoi	Discottion Discottion Discottion Discottion Discottion Contract Servey Leadin A Fonest Servey Leadin A Fonest Servey Leadin Contract	(Besarrey) (Cost Cost	(359) 510/545 510/545 510/545 5100 520 510 510 510 510 510	AATT
Drive-in () / Towed-in (); Invoice Remarks for MING hadding of St. Goldon Apply for Transport Allowance () / C D QC Check / Post Repair Inspection Diplosed Resurvey Photo [Repair Cost > \$3 Injury : Onto Time: Applians Liver/Owner: onto t No: comaged Portion: C Checked by (Engr-in-Charge):	: YES()/N Courtsy Car(Invoice Pro Invoi	Drigorition Drigorition Drigorition Drigorition Drigoritis Drigoritis Control Servey Lacabase Servey	(Besarrey) (Cost Cost	(350) (3	MARKED MARKET MA



SINGAPORE ACCIDENT STATEMENT

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 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

31/10/2022 16:40 (SGT) 29/10/2022 17:30 (SGT) Serangoon Rd, Singapore TOWARDS PIE Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLT6281T

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address**

Mobile Phone No Alternative Phone No No

ALBERTO MARINATO SXXXX259E

chinhuahua@hotmail.com (Phone) +65-93874709

VEHICLE PARTICULARS

Manufacturer

Model Variant

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

your vehicle? Vehicle Category

CC

Transmission

BMW

318

Private use

No - Claiming third party

Private car Auto

1499

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number China Taiping Insurance (Singapore) Pte. Ltd. DMPCSNW00251322203

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

YIP KAI YIN (YE KAIYING) SXXXX348E 15/05/1979 Indoor



Date Of Driving Pass	20/11/2018	
Driving experience	3 YEARS AND 11 MONTHS	
Gender	Female	
Mobile Number	(Phone) +65-93874709	
Alt. Phone Number	-	
Email Address	chinhuahua@hotmail.com	
Address	32 STURDEE ROAD #20-11	
Address complement	•	
Postcode	207853	
Is the driver the policyholder?	No	
If No, Relationship of the Driver with the Insured	Spouse	
Does Driver Own Other Vehicles?	No	
Vehicle Registration Number of Other Vehicle Owned by Driver	110	
verticle registration realiber of Other verticle Owned by Driver		
Insurance Company of Other Vehicle Owned by Driver		
meanance company of earler vertice extremely briver	-	
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?	Ne	
	No	
Number of vehicles involved in the accident	2	
Was anybody injured in the Accident?	No	
Was any injured conveyed to hospital by ambulance?	ī	
Was any other vehicle or property damaged?	Yes	
Number of Passengers (Including Driver)	1	
Has the driver been approached by unknown person(s)	No	
soliciting/offering accident claims assistance? Translator's name	No	
	1=1	
Translator's ID	-	
Translator's phone number	-	
Translator's email	-	
Original language used in the statement	8	
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		
PLEASE REFER TO SKETCH FLAN		
ATTACHMENT(S)		
Are accident photos available for attachment?	Yes	
Was there any video captured by Car Camera?	No	
DETAILS OF OTHER	R VEHICLE PROPERTY 1	《探影诗》的《 第二章》

Vehicle Registration Number	GBF9447E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	

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)

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

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

Sketch Plan				
				LVALA SLIT BUELT
	P			Vehil GBF A441E
	K. S.	A		
	2 0 G	B	+++++++++++++++++++++++++++++++++++++++	
	- F- Ser	· ├────────────────────────────────────		
	1111 14	D1 2		

Describe Circumstance of the Accident
On the Stated time & Date, I was Dalling
my vehicle along serangoon road towards pie on lane
2 of 4 lanes. Traffic was moderate I was driving
60 knph suddenly a vehicle abruptly swerve out from
lune 3 d cut in my lane as result collided
onto my trant left portion. We alighted our
vehicle exchange particular 1 left the scane shortly

Declaration

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

Policybolder'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)

3/ /10

Date of Accident	: 79/10/7072 Accident Time: 1730 (24-HR-Format)
Accident Place	: Serangoun Road tods PIE
Vehicle No. (Car Plate No.)	: SLT6281T Make/Model: BMW 318
Insurance Company	: China Tai ping Policy No: DMPCSNW0025152220
Owner or Company Name /IC No.	: Alberto Marinato (5788 9259E)
Owner or Company Contact No.	: 93874769 Owner's Hp Company Tel
DRIVER'S Name / IC No.	: YiP kai Yin (Ye kailing) 37913348E
DRIVER'S Date Of Birth	: 15/05 /1979 DRIVER'S License Pass Date 70 Nov 2018
Relationship of Owner & Driver	: Spouse\Parent\Children\Sibling\Employee\Others:
DRIVER'S Address	: 32 sturdee Road #20-11 5207853
DRIVER'S Contact No./ Alt No.	:1) 9387 4709 2)
DRIVER'S Occupation : INDO	OOR \ OUTDOOR (e.g. working inside or outside office)
Email Address	: CHIHHUAHUAGhotmail .com
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Repo	rting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Dri	ver): 0\
Was there any video Captured by con-	camera: YES \ NO
Vehicle. No: B 4BF 9447 E	y Driver's Particular (if any) Vehicle, No:
Vehicle Make \Model:	Vehicle Make \Model:
Name Driver:	
IC No. Driver/Contact:	- varie Dilvei.

* NEW - Passenger's name & gender:



中国太平保险 (新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

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)

MX1F R SN

AN0478A Cov. Type:C

CERTIFICATE No.

DMPCSNW00251322203

Engine No.: F7931789B38B15A

Cha. No.:WBA8E32050A020299

Index Mark and Registration

SLT6281T

Number of Vehicle

2. Name of Policy Holder

ALBERTO MARINATO

3. Effective date of the Commencement of

03/11/2022

Named Drivers Ex Sect. I

\$\$500.00

Insurance for the purposes of the Regulations, (00:00:00) Ordinance or Enactment

Additional Ex Other than Named Drivers:

4. Date of Expiry of Insurance

02/11/2023

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

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 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 roward 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/Theit) 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 Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: MAYBANK AS HP OWNER

* 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.

Agent Assistance (IH) Hotline: 6287 7077

Issued By: INSURE HUB PTE LTD

Authorised Officer

Authorised Signatory

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

Q6389 6111

6222 1033

www.sg.cntaiping.com