

NA2300043		Invoice Preparation Checklist	Am't (\$)	Am't (\$)
			1st Bill	Add Bi
Insured's Particulars :-		1) AR : Accident Reporting (\$30);		
		2) DA : Damage Assessment (\$100); INC (\$80)		
Driver/Owner:		3) TF : Towing Fee \$40/\$45		
		4) FT : Follow-Through Survey \$120		
Contact No:		5) FT : Follow-Through Survey (Resurvey) \$30		
		For claiming against INC Only (wef 10 Jan 2005)		
Damaged Portion:		6) TR : Re-inspection \$75		
		7) N1 : Idac DA + SMRT Survey \$160		
		8) NTUC Additional Services:-		
Checked by (Engr-In-Charge):		ON*		
		*N5: Courtesy Car / Tpl Allowance \$5		
		*N6: Repair Co-ordination \$10		
		*N7: Post Repair Inspection \$25		
		*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments :-		TP (N11) : TP (Non INC) against INC \$20		
		9) N12: Idac Mobile 30		



# 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	05/01/2023 14:08 (SGT)
Reported by	Both
Date of Accident	04/01/2023 19:39 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	FORT ROAD AND MEYER ROAD CROSS JUNCTION TRAFFIC LIGHT
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV8442K
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE CHOON KEITH
NRIC No	SXXXX731F
Email Address	isaowl66@gmail.com
Mobile Phone No	(Phone) +65-90283289
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Renault
Model	Scenic
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 hire
Transmission	Auto
CC	1461

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNA00018192202

### DRIVER

Name of Driver	LEE CHOON KEITH
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Occupation .....	Outdoor
Date Of Driving Pass .....	29/03/1984
Driving experience .....	38 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90283289
Alt. Phone Number .....	-
Email Address .....	isaowl66@gmail.com
Address .....	APT BLK 467 ADMIRALTY DRIVE
Address complement .....	# 06-199
Postcode .....	750467
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? .....	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 .....	Sembawang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18005549999
Police Station Address .....	4 Sembawang Crescent Singapore 757633
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

#### 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 .....	GBA1005B
Vehicle Manufacturer .....	

Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	THAM KOK WENG
NRIC No .....	SXXXX484E
Contact Number .....	(Phone) +65-98331330
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 .....	LEE CHOON KEITH
Gender .....	Male
Phone No .....	(Phone) +65-90283289
Address .....	APT BLK 467 ADMIRALTY DRIVE
Address Complement .....	# 06-199
Post Code .....	750467
Approximate Age Years Old .....	-
Injuries Sustained .....	CHEST PAIN
Injured person in which vehicle? .....	SMV8442K
Were seat belts worn? .....	-
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.
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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 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.

*Xanthus*  
05/01  
11:41

Policyholder's Signature / Date & Time

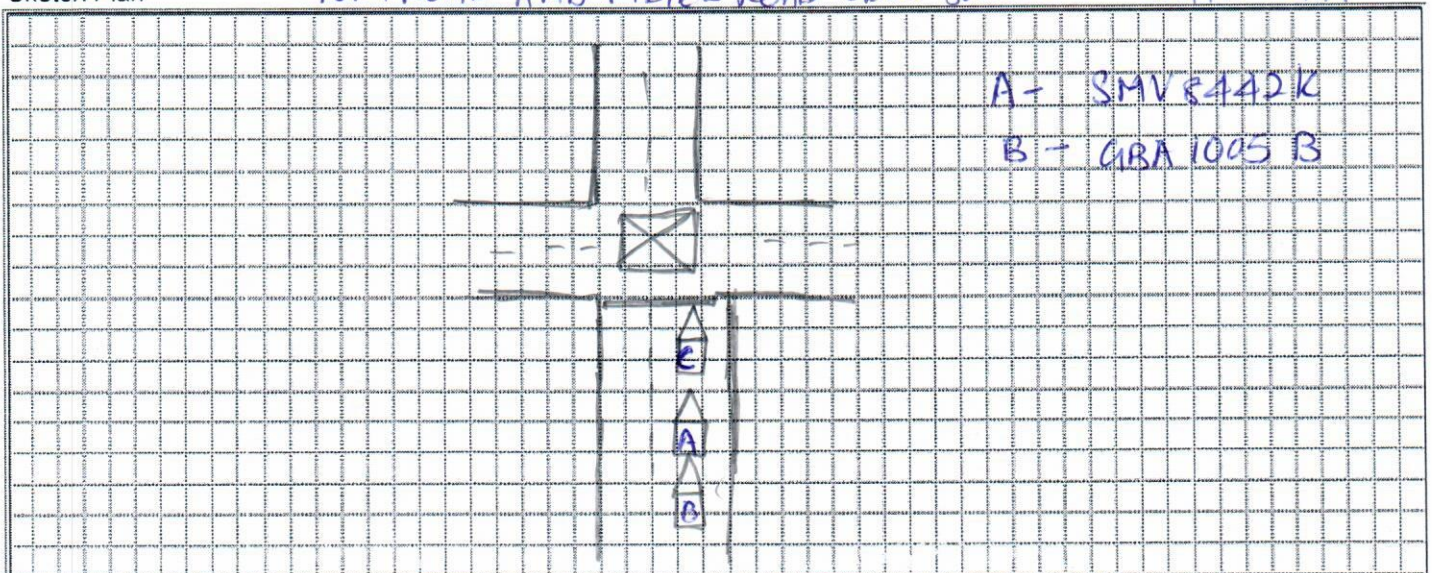
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

*gnul* 5/1/2023

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

Sketch Plan

FORT ROAD AND MEYER ROAD CROSS JUNCTION TRAFFIC LIGHT



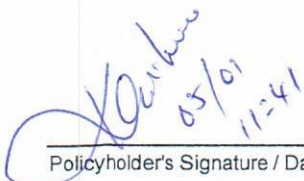


Describe Circumstance of the Accident

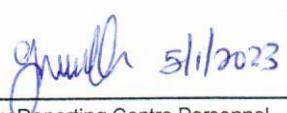
I stop at the traffic light, waiting for Green arrow.  
Then the ~~car~~ pickup truck kissing on my back ~~of~~ of the car.

Declaration

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

 05/01 11:41  
Policyholder's Signature / Date & Time

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

 5/1/2023  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

**CONFIDENTIAL**

**Annex E**

**NOTICE OF COMPLIANCE**

This is to confirm that Leo Choon Keith, NRIC S1782731F, has reported to the Police a non-injury traffic accident which occurred along Meyer Rd and Fort Rd junction bay on 04/01/2023 at 1939hrs involving the following:

- a) **SMV8442K**,  
Driver – Leo Choon Keith, S1782731F, hp: 90283289
- b) **GBA1005B**  
Driver – Tham Kok Weng, S7881484E, hp: 98331330


- 2 If this accident was reported to the Police within 24 hours of its occurrence,  
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt Geraldine Quek Jie Yi

Date: 05/01/2023 Time: 1001hrs

ESD Ref:

Police Post/Unit: Sembawang NPC

  
SEMBAWANG NPC  
8 Sembawang Crescent  
Singapore 757633  
Tel: 1800-5549999  
Fax: 63522499

Original – to be issued to informant  
Duplicate – to be submitted to Traffic Police

**CONFIDENTIAL**

Version as of 15 Jan 2002



## ACCIDENT STATEMENT

ACCIDENT DATE: 04 / 01 / 2023 (DD/MM/YYYY), TIME: 19 : 39 (HH:MM)

LOCATION: Fort Road & Meyer Road Cross JUNCTION TRAFFIC LIGHT

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SMV 8442 K  
b) INSURANCE COMPANY: CHINA TAIPING  
c) POLICY NUMBER: DMHCSNA00018192202  
d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT  
e) MAKE & MODEL: Renault Grand scenic : AUTO / MANUAL  
f) TYPE: SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS  
g) VEHICLE CATEGORY: PRIVATE / COMMERCIAL / MOTORCYCLE  
h) PURPOSE OF USING AT ACCIDENT TIME: private use  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE THIRD PARTY CLAIM / REPORTING ONLY

### 2. INSURED / POLICY HOLDER

- a) NAME: Leo choon Keith (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S1782731F CONTACT: 9028 3289  
c) ADDRESS: APT BLK 467 ADMIRALTY DRIVE # 06 - 199  
S750467

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 07 / 05 / 1966 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) YEARS OF DRIVING EXPERIENCE: 29/03/1984

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: CLEAR / RAINING / OTHERS

b) ROAD SURFACE: DRY / WET / OTHERS

6. WAS ANYBODY INJURED (YES / NO) Chest pain

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: BEMBANG

### 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: G1A 1005 B MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: THAM KOK WENG  
c) NRIC/FIN/PASSPORT: S7881484E CONTACT: 9833 1330

### 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

Email = isaow166@gmail.com

fax =

VIDEO = Yes, with owner





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 Hire 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)

MZ406L/B

R SN

AN0695A

Cov. Type:C

CERTIFICATE No.

DMHCSNA00018192202

Engine No.: K9KF649D060469

Cha. No.: VF1RFA00464067731

1. Index Mark and Registration  
Number of Vehicle

SMV8442K

AUTOSAFE  
\*\*\*\*\*

2. Name of Policy Holder

LEO CHOON KEITH

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

23/10/2022  
(00:00:00)

Excess Sect. I . \$S\$1,250.00

Excess Sect. I (Outside Singapore) \$S\$2,500.00

Excess Sect. II \$S\$1,250.00

4. Date of Expiry of Insurance

22/10/2023

Excess Sect. II (Outside Singapore). \$S\$2,500.00

EX ON WINDSCREEN . \$S\$100.00

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.

LEO CHOON KEITH

6. Limitations as to use:\*

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

(2) Use for social domestic pleasure purposes and business purposes 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.

HIRE PURCHASE CO. : TECK WEI CREDIT PTE 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: .....

Authorised Officer

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