

Date In	03-02-23	Job description	Date & Time Completed	Done by
Ref No	NA/CT123001136/d4	SAS e-filing		
Veh No	G8L 6380 B	E-mail (within 8hrs. APT 2hrs)		
DOA	02-02-23 17:00	i-Motor Claim Form		
OD/TP	Reporting Only	i-Motor W/O (Within: OD 2hrs. TP 4hrs)		
TP Insurer		i-Photo Uploaded		
		Assessment/Survey Report		
		Ass't Report by Fax / Hand to Owner/Wksp		

TP Particulars: Vch No: GBL 1668 E INC () / Non-INC ()

Policy No: () Period: () Cover Type: ()

Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20% P: 21-79% F: 80-100%]

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of repairer.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co. ()

Date & Time Completed		Done by
Apply for Transfer Allowance () / Customs Fee ()		

Upload Resurvey Photo [Repair Cost > \$30000]	()		
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11/11/11

1

1. The first part of the document is a title page. It contains the title of the document, the author's name, and the date of the document. The title is "The first part of the document is a title page." The author's name is "The author's name is the author of the document." The date of the document is "The date of the document is the date when the document was written."

Invoice Preparation Checklist						Ist Bill	Add E

er/Owner:	3) TF: Towing Fee	\$40/\$45
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For claiming against INC Only (wef 10 Jan 2005)	
6) TR: Re-inspection	\$75

Checked by (Engr-In-Charge): _____ ON* _____

Comments:	* N7: Post Repair Inspection	\$25
	* N8: DV / Collect Excess Coordination	\$5

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	03/02/2023 14:32 (SGT)
Reported by	Driver
Date of Accident	02/02/2023 17:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	HAMILTON ROAD CARPARK H0003 OUTSIDE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBL6380B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	QI HE CONSTRUCTION PTE LTD
Company Reg No	2XXXXXX674M
Email Address	optionsgarage@hotmail.com
Mobile Phone No	(Phone) +65-81515118
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv350
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00125362201

DRIVER

Name of Driver	YANG KANG
Passport No/FIN	GXXXX955R
Date Of Birth	01/10/1993
Occupation	Outdoor

Date Of Driving Pass	21/04/2022
Driving experience	10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81515118
Alt. Phone Number	-
Email Address	optionsgarage@hotmail.com
Address	60F TANJONG KATONG ROAD
Address complement	-
Postcode	436954
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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	Raining
Road Surface	Wet

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)	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 THE ATTACHED STATEMENT

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	GBL1668E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

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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 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)

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;

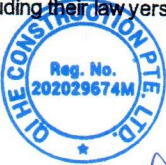
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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.

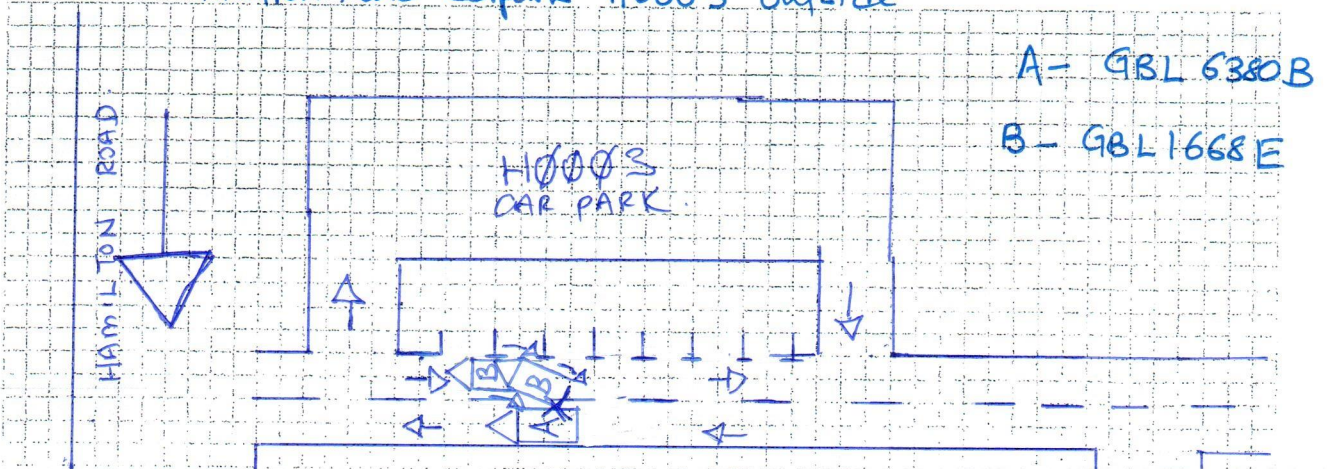


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan Hamilton Road Carpark H0003 outside



Describe Circumstances of the Accident

DATE 02/02/2023 TIME ABOUT 1700HRS. I WAS STATIONARY
ALONG A SMALL ROAD BESIDE OF HOODS CARPARK OF HAMILTON
ROAD. MY VEHICLE WAS STATIONARY ON THE LEFT SIDE
AT THE CORRECT DIRECTION. THERE WAS A VEHICLE "B" GBL 166&E
ON THE OPPOSITE DIRECTION REVERSING TOWARDS MY VEHICLE.
I PRESSED MY HONK BUT VEHICLE "B" STILL COLLIDED
ONTO MY VEHICLE RIGHT REAR PORTION AREA. MY SLIDING DOOR,
PANEL AND RIM ARE DAMAGED. WE EXCHANGED DETAIL AND MOVED
TO INSURANCE CLAIM.

Declaration

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



Policyholder's Signature / Date &
Time

臨

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

3/2/23
d by Reporting Centre

Witnessed by Reporting Centre
Personnel

VEHICLE NO: GBL 6380 B

MAKE & MODEL: NISSAN NV350

AUTO/MANUAL

DATE OF ACCIDENT	02 / 02 / 2023	C.C.
TIME OF ACCIDENT	1700HRS	AM / PM
LOCATION OF ACCIDENT	HAMILTON ROAD CAR PARK H0003 OUTSIDE	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	Q1 HE CONSTRUCTION PTE. LTD.	
EMAIL	OPTIONS GARAGE@HOTMAIL.COM	OFFICE: MOBILE: 8151 5118
NRIC	D02029674M	
CLAIM TYPE	OD / THIRTY PARTY / REPORTING ONLY	
FLEET POLICY	YES / NO	
INCURANCE CO.	CHINA TAIPING	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	DMCV8NW00125362201	
NAME OF DRIVER	AS ABOVE / IF NO: YANG KANG	
NRIC	G2215955R	
DATE OF BIRTH	01 / 10 / 1993	
ANY PASSENGER	YES / NO	
NAME OF PASSENGER		
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	21 / 04 / 2022	
GENDER	MALE / FEMALE	
CONTACT NO.	Mobile: 8151 5118 Office: Home:	
EMAIL		
ADDRESS	60F TANJONG KATONG ROAD 436954	
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No: INSURE:	
RELATIONSHIP	Employee / If No: OWNER	
WEATHER CONDITION	Clear / Raining / Other: HEAVY RAIN	
ROAD SURFACE	Dry / Wet / Other:	
ANY INJURIES	No / If yes, Who?	
CONTACT NO.		
ROLICE REPORT	No / If yes, Where?	
NOTICE OF INTENDED PROSECUTION?	No / If yes, Who?	
VEHICLE B NO.	GBL 16682 Any Passenger:	
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / NO	
WAS THERE ANY AUDIO RECORDED?	YES / NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / NO	
WHO IS REPORTING	DRIVER / OWNER / BOTH	
Original Language Used	English / Mandarin / Others:	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO	

Motor Commercial

MZ300/C

CERTIFICATE OF INSURANCEMotor 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)

R SN

AN0597A

Cov. Type:C

CERTIFICATE No.

DMCVSNW00125362201

Engine No.: QR20020258R

Cha. No.:VR2E26136573

1. Index Mark and Registration
Number of Vehicle

GBL6380B

AUTOSAFE
=====

2. Name of Policy Holder

QI HE CONSTRUCTION PTE. LTD.

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

24/11/2022

(00:00:00)

Excess Sect I.

S\$500.00

EX ON WINDSCREEN.

S\$100.00

4. Date of Expiry of Insurance

23/11/2023

5. Persons or Classes of Persons entitled to drive*

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.

6. Limitations as to use.*

- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: MITSUBISHI HC CAPITAL ASIA PACIFIC PTE. LTD.

* Limitations rendered inoperative by Section 6 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: ABS INSURANCE AGENCY 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

6389 6111

6222 1033

www.sg.cntaiping.com