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To Panajoulars: Veli Not OB 54725	, INC(,)/ Non-IN	C()'
Owner / Driver: (Tel:)
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SN08233M0002 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 22/03/2023 12:49 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (22/03/2023 12:49 (SGT))



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 <u>completed by the Policyholder and/or the Actual Driver</u>
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

22/03/2023 12:49 (SGT) Driver 21/03/2023 18:05 (SGT) Jurong Town Hall Road, Singapore TOWARDS BOON LAY BEFORE JURONG EAST ST 11 Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SDH220S

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

Email Address Mobile Phone No Alternative Phone No No TANG LI FUN SXXXX720Z

cklee1954@yahoo.com.sg (Phone) +65-98258128

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

Transmission CC

Nissan

Sylphy

Private use

No - Claiming third party Private car

Auto 1598

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number AIG Asia Pacific Insurance Pte. Ltd. 1900170751-03

DRIVER

Name of Driver NRIC No

Date Of Birth Occupation

LEE CHEOK KWONG SXXXX742I 02/02/1954 Indoor

Accident report SN08233M0002

Page 1 of 17

Date Of Driving Pass	
Date Of Driving Pass Driving experience	17/09/1981
Gender	41 YEARS AND 6 MONTHS
	Male
Mobile Number Alt, Phone Number	(Phone) +65-97524719
Email Address	-
Address	cklee1954@yahoo.com.sg
	BLK 2 DELTA AVENUE #17-38
Address complement Postcode	404000
	161002
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?	Spouse
Vehicle Registration Number of Other Vehicle Owned by Driver	No
verlicle registration number of other verlicle owned by briver	
Insurance Company of Other Vehicle Owned by Driver	-
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?	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)	3
Has the driver been approached by unknown person(s)	<u> </u>
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	·
PASSENGER 1	
Name	LEE HOW INN
Gender	Male
Goldon	Male
PASSENGER 2	
Name	LEE AI QI
Gender	Female
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 P[LAN AND POLICE REPORT T/	20230322/7027
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes Yes

Accident report SN08233M0002

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	CB5472S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	-
Contact Number	-
Address	_
Address complement	_
Postcode	
Insurance Company Name	India International Insurance Pte Ltd
Nature Of Damage	_
Details of property damaged in accident	
No. Of Passenger (Including Driver)	_

INJURED PERSONS DETAILS

INJURED 1

INSONED	
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	LEE CHEOK KWONG Male (Phone) +65-97524719 SLIGHT INJURY SDH220S Yes No
INJURED 2	
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	LEE HOW INN Male SLIGHT INJURY SDH220S Yes No
INJURED 3	
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn?	LEE AI QI Female - - - - SLIGHT INJURY SDH220S 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 Formmust be completed by the Policyholder and/or the Authorised 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. 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

, lu	4	Lux	Jun 20/03/20
	gnature / Date &	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
Sketch Plan			
Juone	1 A		R) SPH 220S
Tum Hall	/B/ A		B CB5472 8
	A		
	B		

Describe Circumstances of the Accident	•
Oh 21-13. 2023 at about 1905/41-7 was trav	elino along
Jurone form Hall Rd Twde Boon Lap War Before	during Edst & Til.
H. I was hading staight, all of a cudden a bus	CB 64718 Rom
my left had sineme outo my lane and collided outo	my front LH side
portion. Plat's all	
,	
Police RAPORT 7/20230322/7027.	
·	

Declaration

We declare the foregoing particulars are true in every respect.

- 0000

Policyholder's Signature / Date &

Time

Luxu

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

Witnessed by Reporting Centre

Personnel





1 of 3

Report No. T/20230322/7027

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Vide Report No.:	Station Diary No.:	
	to had the beautiful to the constitution	
Address: 2 DELTA AVENUE #17-38 SINGAPORE 161002		
Contact No.: Home/Office:	Mobile: 97524719	
Email: CKLEE1954@YAHOO.COM.S	SG	
Type of Informant: Driver		
Language: English	Institution / School Name:	
Driving Licence Information: Class:	Date of Expiry:	
	Address: 2 DELTA AVENUE #17-38 SII Contact No.: Home/Office: Email: CKLEE1954@YAHOO.COM.S Type of Informant: Driver Language: English Driving Licence Information:	

General Inform	mation of the Acci	dent		
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/03/2023 18:05	Type of Location: Straight Road
Location:				
JURONG TO	WN HALL ROAD			
Weather:		Road Surface:		Road Speed Limit:
Clear		Dry		
Traffic Flow: One Way	Traffic Control: Not Controlled			Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side		d To Side		Anyone conveyed by ambulance:

Vehicle No.	Type	Make	Model	Color	Conditio	No of
CB5472S	Bus/Coach/Mi nibus					0
SDH220S	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

2 of 3 Report No. T/20230322/7027

CONTINUATION OF REPORT

Driver						
Name	LEE CHEOK KWONG		ID No.		S0121742I	
Related Vehicle	SDH220S (Car)			Conta	ct No.	97524719
Hospital/Clinic			Class Driving Licence Expiry	e &	Class: NIL Date of Expiry: NIL	
Date	NIL		Date		NIL	
	ted Medical Leave	03	Degree of		Slight	
Passenger						
Name	LEE AI QI			ID No.		NIL
Related Vehicle	SDH220S (Car)		Conta	ct No.	NIL	
Hospital/Clinic	NIL		Class Driving Licence Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date	NIL Date				NIL	
	nted Medical Leave NIL Degree of		NIL			
Passenger	《京苏山文》(李明)	10 miles (10 miles)				
Name	LEE HOW INN			ID No		S9137138C
Related Vehicle	SDH220S (Car)			Conta	ct No.	NIL
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

On 21.03.2023 at about 1805hrs, I was travelling along Jurong Town Hall Towards Boon Lay Way before Jurong Town East Street 11. As I was heading straight, all of a sudden a bus CB 5472S from my left had swerve onto my lane and collided onto my front LH side portion. Due to the impact, I consulted a doctor & was given 3 days of mc. That's all.





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

3 of 3 Report No. T/20230322/7027

CONTINUATION OF REPORT

Sketch Plan	
Informant is	not able to provide sketc

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 22/03/2023 12:33
Officer In Charge Of Case: TP / TPIB / FAHKRUL RAZI BIN SUHAIME Contact No.: 65470000	Classification Of Case:



	Date of Accident	: 21-3-23 Accident Time: 1815 Wrs. (24-HR-Format)
	Accident Place	: Julions turn Hall kd Tinds Boon Law Way B4 Julions
	Vehicle. No. (Car Plate No.)	: SDH 2200 Make/Model: Nisan Supty 1.6 CM East STII
	Insurace Company	: A16 Policy No: 1900170751-03
	Owner or Company Name /IC No.	: Tan6 Li Tun (813797207)
	Owner or Company Contact No.	:Owner's Hp 98 258 28 Company Tel
	DRIVER'S Name / IC No.	Lee CHeok Knopp - 50/2/742I
	DRIVER'S Date Of Birth	: 02 02. 1954 DRIVER'S License Pass Date 17.09. 1981
	Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others:
	DRIVER'S Address	: 2 Peta Avenve *17-38 s(161002)
	DRIVER'S Contact No./ Alt No.	:1) <u>2) 97524719</u>
	DRIVER'S Occupation	: INTOOR \ OUTDOOR (e.g. working inside or outside office)
	Email Address	: cklee 1954 Byahar-com.sq
	Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
	Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
	Number of Passengers (Including D	river): 3pax
	Was there any video Captured by ca Exact purpose for which vehicle was Any Injury (If YES, Pls state):	s being used at the time of accident: Private)use \ Work purpose
	Other P	arty Driver's Particular (if any)
	Vehicle, No: CB 94728	Vehicle, No:
	Vehicle Make\Model:	Vehicle Make\Model:
	Name Driver:	Name Driver:
	IC No. Driver/Contact:	IC No. Driver/Contact:
	* NEW D	
G	* NEW - Passenger's name &) Lee How Inn - M	
X	The mon and	
(3	Lee HI WI -(F)	

Name of Policyholder

: Tang Li Fun

Period of Insurance

: 30 Sep 2022 To 29 Sep 2023

Engine No.

: HR16941917C

Chassis No.

: MNTBBAB17Z0035555

Vehicle No.

: SDH220S

Policy No.

: 1900170751-03

Endorsement No.

Issued Date

: 11 Aug 2022 11:27

ABOUT THE COVER

Make/Model

: NISSAN SYLPHY 1.6 PREMIUM

Engine Capacity/Tonnage: 1,598.00 CC Driver Restriction

· NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2019 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

as the Policyholder.

b) Any other person who is driving on the Policyholder's order or with his/her permission.

This Policy will indemnity the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of S\$\$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Tang Li Fun - \$600 (Own Damage), \$600 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1.TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513

2.TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 628099 62622212 3.Autolution Industrial Add: 19 Ubl Road 4 Singapore 408623 64909666

4.7sn Chong Motor Sales Add: 913 Bukit Timah Road Singapore 599523 64594091 64694092 64594093 5.7sn Chong Motor Sales Add: 19 Lorong 8 Toa Payoh Singapore 319255 63570753

For other Approved Reporting Centres/AiG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AiG wabsite www.aig.sg or AiG SG Mobile App. Simply search and download *AiG SG* from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

If We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compansation) Act (Cap. 189), Part IV of the Road Transport Act, 1997 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500610417

TAN CHONG CREDIT PTE LTD-TYT

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Insurance Pie. Capyright @ 2019 AIG Acta Pacific Reg.

Lid.

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589623 ANSP-MOTOR Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIGSGLIOBIL FAPP

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	720Z	
Vehicle No.:	SDH220S	
Vehicle to be Exported:	No	
Intended Deregistration Date:	07 Apr 2023	
Vehicle Make:	NISSAN	
Vehicle Model:	SYLPHY 1.6 CVT	
Primary Colour:	Grey	
Manufacturing Year:	2019	
Engine No.:	HR16941917C	
Chassis No.:	MNTBBAB17Z0035555	
Maximum Power Output:	85.0 kW (113 bhp)	
Open Market Value:	\$16,713.00	
Original Registration Date:	30 Sep 2019	
First Registration Date:	30 Sep 2019	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$16,713.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	29 Sep 2029	
PARF Rebate Amount: Intended COE Rebate Details	\$12,534.00	
COE Expiry Date:	29 Sep 2029	
COE Category:	A - Car up to 1600cc & 97kW (130bhp)	
COE Period(Years):	10	
QP Paid:	\$31,759.00	
COE Rebate Amount:	\$20,572.00	
Total Rebate Amount:	\$33,106.00	

The information contained herein is correct as at 22 Mar 2023