

NATIONAL Assessment Centre Services			
Date In: 10/04/2023 11:35	Job description	Date & Time Completed	Done by
Ref No: NBA/CT228003629/19	SAS e-filing		
Vali No: SMZ 90674	1-Email (within 2hrs, A/C 2hrs)		
D.O.A : 07/04/2023 10:27	1-Motor Claim Form		
OD : TP : Reporting Only	1-Motor W/O (within OD 2hrs, 2P 1hrs)		
	1-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Willis		

General Remarks:	
()	Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of referral.
()	Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In () / Towed-In ()	Invoice: YES () / NO () ; Towing Co: ()

Injury :	
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99	100

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	10/04/2023 11:35 (SGT)
Reported by	Actual Driver
Date of Accident	07/04/2023 10:27 (SGT)
Exact Location of Accident	580 Hougang Ave 4, Block 580, Singapore 530580
Additional Location Information	SHELTER
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ9067H
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	UPMARKET
Company Reg No	5XXXX859L
Email Address	jasminechenhx@gmail.com
Mobile Phone No	(Phone) +65-91450368
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Suzuki
Model	Jimny
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	1460

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00110872201

DRIVER

Name of Driver	CHONG LI TING, SONIA
NRIC No	SXXXX286I
Date Of Birth	31/01/1995
Occupation	Indoor

Date Of Driving Pass	16/11/2021
Driving experience	1 YEAR AND 5 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91450368
Alt. Phone Number	-
Email Address	jasminechenhx@gmail.com
Address	BLK 513 WOODLANDS DRIVE 14 #02-189
Address complement	-
Postcode	730513
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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	Hit and run / Vandalism / Damaged whilst parked
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?	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 SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC9144D
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

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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.

X   X

Policyholder's Signature / Date & Time

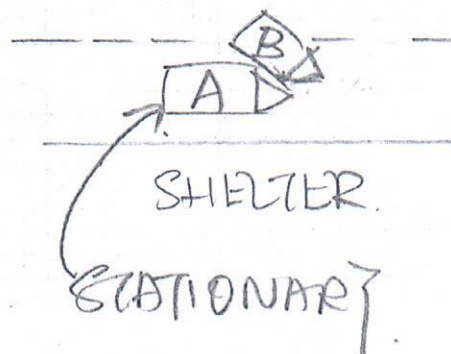
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

BIK 580 HOUGANG AVENUE 4

SITACAR



[A] SM29067H

[B] PC9144D


Describe Circumstances of the Accident

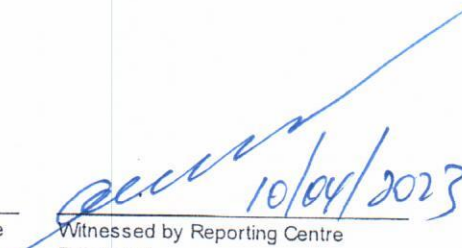
I WAS PARKED (STATIONARY) AT THE SHELTER
DROP OFF POINT WAITING MY FRIEND. SUDDENLY
A VAN REVERSING & HIT TO MY FRONT.
NO BODY INJURY IN THIS ACCIDENT.

Declaration

We declare the foregoing particulars are true in every respect.

X  
Policyholder's Signature / Date &
Time

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

 10/04/2023
Witnessed by Reporting Centre
Personnel

VEHICLE NO: SM29067H	MAKE & MODEL: SUZUKI JIMNY	(3) AUTO/MANUAL
DATE OF ACCIDENT	07/04/2023	*CC. 1500
TIME OF ACCIDENT	1027 AM/PM	
LOCATION OF ACCIDENT	BIK 580 HONGANG AVE 4 SHILTER	
EXACT PURPOSE USED AT TIME OF ACCIDENT	(EMPLOYMENT) / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	UP MARKET	
EMAIL: JASMINECHENHX@GMAIL.COM	Office:	MOBILE: 91450368
NRIC	53395859L	
CLAIM TYPE	OD / (THIRD PARTY) / REPORTING ONLY	
FLEET POLICY:	YES/NO	
INSURANCE CO.	CHINA TAIPING	
TYPE OF COVERAGE	(Comprehensive) Third Party / Third Party Fire & Theft	
POLICY NO.	DMPCLSNW00110872201	
NAME OF DRIVER	AS ABOVE / IF NO. CHONG LITING, SONIA	
NRIC	S9503286I	
DATE OF BIRTH	31/01/1995	
ANY PASSENGER	YES/NO: 0	
NAME OF PASSENGER		
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / (Indoor)	
DATE OF DRIVING PASS	16/NOV/2021	
GENDER	Male / (Female)	
CONTACT NO.	Mobile 91450368 Office: Home:	
EMAIL:	JASMINECHENHX@GMAIL.COM	
ADDRESS	BIK 513 WOODLANDS DRIVE 14#02-189S 730513	
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No.	INSURER: OWNER
RELATIONSHIP	Employee / If No. FRIEND	
WEATHER CONDITION	(Clear) / Raining / Other:	
ROAD SURFACE	(Dry) / Wet / Other:	
ANY INJURIES	(No) / If yes, Who?	
CONVEYED BY AMBULANCE	(No) / If yes, Who?	
POLICE REPORT	(No) / If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO/IF YES, WHO?	
VEHICLE B NO.	PC9144D 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	
**WORKSHOP:	ISK Auto WORKSHOP	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES (NO)	



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 Private Car

MX4F

R SN

AN0420A

Cov. Type:C

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, 1950 (Malaysia)

CERTIFICATE No.

DMPCSNW00110872201

Engine No.: K15B1040208

Cha. No.:JB74W111026

1. Index Mark and Registration
Number of Vehicle

SMZ9087H

2. Name of Policy Holder

UPMARKET

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

24/05/2022
(00:00:00)

Named Drivers Ex Sect. I S\$500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 S\$3,000.00

Ex Sect. I - Age >= 26 S\$500.00

* Age as at date of accident

EX ON WINDSCREEN . S\$100.00

4. Date of Expiry of Insurance

23/05/2023

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:*

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward 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/Theft) will be doubled. One time Waiver of Excess for the first S\$500 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.: SWEET SENG 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



Issued By: INXPRESS INSURANCE AGENCY PTE LTD
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

杨亚美

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

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Business
Owner ID: 859L

Vehicle Details

Vehicle No.: SMZ9067H
Vehicle to be Exported: No
Intended Deregistration Date: 06 May 2023
Vehicle Make: SUZUKI
Vehicle Model: JIMNY SIERRA 1.5JC AUTO
Primary Colour: Beige
Manufacturing Year: 2019
Engine No.: K15B1040208
Chassis No.: JB74W111026
Maximum Power Output: 75.0 kW (100 bhp)
Open Market Value: \$23,183.00
Original Registration Date: 24 May 2021
First Registration Date: 24 May 2021
Transfer Count: 0
Actual ARF Paid: \$9,457.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 23 May 2031
PARF Rebate Amount: \$7,092.00

Intended COE Rebate Details

COE Expiry Date: 23 May 2031
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$41,801.00
COE Rebate Amount: \$33,631.00
Total Rebate Amount: \$40,723.00

The information contained herein is correct as at 10 Apr 2023

OK