

NATIONAL Assessment Centre Services

(Part 1 of 2)

NAI707152658

Date In: 17/4/2018 19:28
Ref No: NBO184/20220244
Veh No: SFC 1133G
D.O.A: 16/11/2017 19:30
OD: (TP) Reporting Only

Job description	Date & Time Completed	Done by
SAS e-filing		
E-mail (with 3 hrs, A/C 2 hrs)		
1-Motor Claim Form		
1-Motor VVO (with 100 hrs, 3P, 100%)		
1-Photo Uploaded		
Assessment/Survey Report		
Ass'l Report by Fax / Hand to Owner/Whsp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars: Yeh No: SCJ 3594M, INC () / Non-INC ()
Owner / Driver: () Tel: ()
Policy No: () Period: () Cover Type: ()
Confirmed by: () Date: () Time: ()
Insured/Driver Liability: () % (Note: EsL Status (WO): N: 0-20%; P: 21-79%; F: 80-100%)
Year of Registration: () Warranty: YES () / NO ()
Excess: (\$) Loading: \$1,000 () / \$2,000 ()

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

Remarks	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Reserve Photo (Repair Cost > \$3000) ()		

Injury: ()

Date/Time	Action

NAI707152

Human's Particulars	Invoice Preparation Checklist	Amount	Adm. Bill
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100) INC (\$30)		
Assigned Portion:	3) TP: Towing Fee \$40/\$40		
	4) FT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$20		
	6) TR: Re-inspection \$75		
	7) NI: 1 day DA + SMRT Survey \$140		
	8) NTUC Additional Services		
C. Checked by (Bgr-In-Charge):	9) NI: Courtesy Car / Tpl Allowance \$3		
	10) NI: Repair Consideration \$10		
	11) NI: Post Repair Inspection \$25		
	12) NI: DV / Collect Excess / Operational \$3		
	13) NI: 1 day DA + SMRT Survey \$140		
	14) NI: 1 day DA + SMRT Survey \$140		
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Invoice dated: Invoice checked: Invoice dated: Invoice checked:

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 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 ability.
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 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 Report	17/11/2017 19:05
Date Of Accident	16/11/2017 19:30
Exact Location Of Accident	WATERFRONT BASEMENT 1 CARPARK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SFC1133G
Insured/Policyholder	
Name Of Registered Owner	HITACHI CAPITAL ASIA PACIFIC PTE LTD
Co Reg No	-
Email Address	TAN.JUNMING@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-92221133
Alternative Phone No	OFFICE-92221133
Vehicle Particulars	
Manufacturer	AUDI
Model	A3 SEDAN
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MSD/VPCP/17-002252-00
Cover Note Number	
Driver	
Name of Driver	TAN JUNMING(CHEN JUNMING)
NRIC No	S8128229C
Date Of Birth	22/09/1981
Occupation	INDOOR
Date Of Driving Pass	01/02/2000
Driving Experience	17 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92221133
Fax Number	
Contact Number	OTHERS-92221133
EEmail Address	TAN.JUNMING@YAHOO.COM.SG

Address	120 PUNGGOL WALK #05-42
Postcode	828770
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LEASING CAR
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

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 this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PUNGGOL N.P.C
Police Station Address	ROAD: 21A TEBING LANE , POSTCODE: 828837 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20171116/2187

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLJ3594M
Vehicle Make/Model/Colour	TOYOTA CAMRY
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
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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 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 lodgment 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:

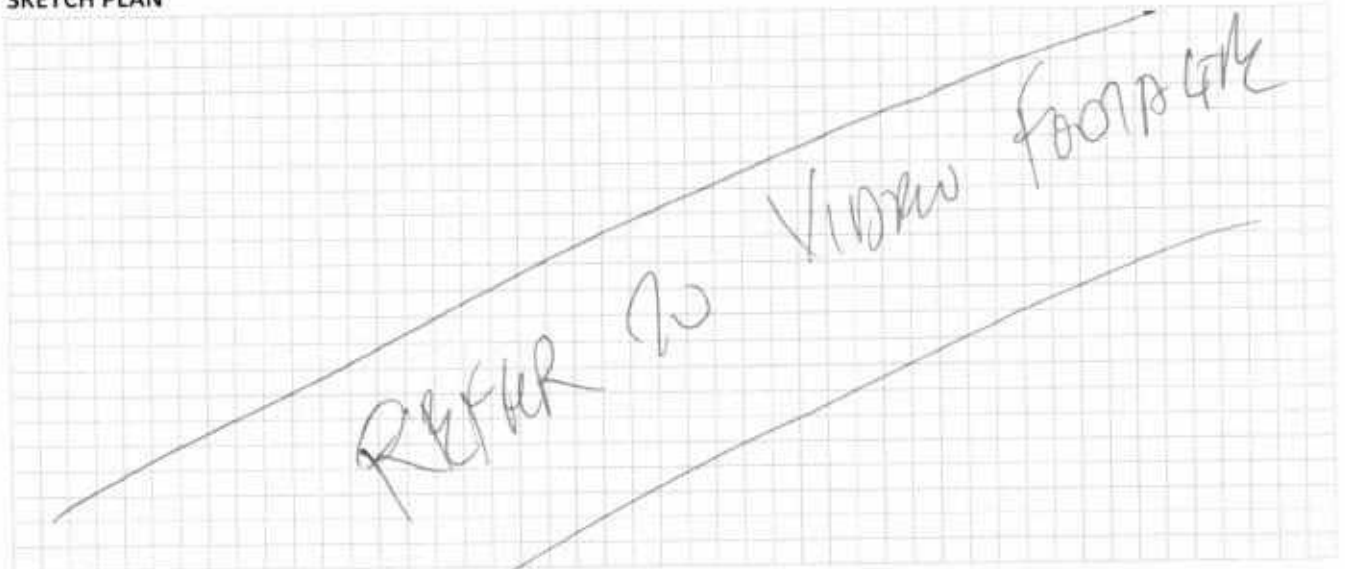
- (a) I/We, my/our workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my Insurer (collectively the "**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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 17/11/17

Reporting Centre Personnel's Signature
Name: Lesly Wood
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Area for describing the circumstances of the accident, containing horizontal lines for text entry. The text "P/S REFER TO POLICE REPORT 7/2017/116/2087" is written diagonally across the area in a large, handwritten font.

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 17/11/17
11:45 am

Reporting Centre Personnel's Signature
Name: [Signature]
NRIC/FIN No.: [Signature]



**SINGAPORE
POLICE FORCE**



T/20171116/2187

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

1 of 3

Report No. T/20171116/2187

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/11/2017 23:08	Vide Report No.:	Station Diary No.: 61
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Informant's Particulars

Name of Informant: TAN JUNMING			Address: 120 PUNGGOL WALK #05-42 SINGAPORE 828770	
ID Type / ID No.: NRIC NO / S8128229C			Contact No.: Home/Office: Mobile: 92221133	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 36	Date of Birth: 22/09/1981	Type of Informant: Vehicle Owner	
Race: Chinese			Language: English	Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 2B,3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/11/2017 19:25	Type of Location: Carpark
Location: Along Road 1 PUNGGOL CENTRAL				
Waterway Point, B1 carpark				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFC1133G	Car	AUDI	A3 SEDAN 1.0 TFSI S TRONIC (LED)	White	Slightly Damaged	0
SLJ3594M	Car	TOYOTA	CAMRY 2.0 AUTO ABS AIRBAG	Black	No Damage	1



**SINGAPORE
POLICE FORCE**



T/20171116/2187

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

2 of 3

Report No. T/20171116/2187

CONTINUATION OF REPORT

Brief Details.

On 16/11/2017 at about 1900hrs, I parked my vehicle SFC1133G at Waterway Point B1 carpark and left.

On 16/11/2017 at about 1945hrs, I went back to my vehicle. I start the car engine and I heard a sound from the car camera sensor. As such I made a check on the recording and it shows that on 16/11/2017 at 1928hrs, one vehicle SLJ3594M from the rear had reversed and hit against my vehicle rear. One of the passenger from vehicle SLJ3594M went down to make a check and went back to inform the driver. The vehicle moved forward and parked his vehicle. I made a check on my vehicle and discovered that there were scratches found at the rear of my vehicle. There were no notes left on my vehicle. The vehicle SLJ3594M is still parked behind my vehicle as such I left a note with my contact number for him to call me.

The person did call me however he denied that his vehicle had hit onto my vehicle as his vehicle does not have any scratches. As first, I wanted to have a private settlement with him however he denied. I have the in-car build CCTV recordings with me.



**SINGAPORE
POLICE FORCE**



T/20171116/2187

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

3 of 3

Report No: T/20171116/2187

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
F /
Sgt 2 IVIN ONG HONG CHUAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
16/11/2017 23:08

Officer In Charge Of Case:
TP / HRT /
SSI 2 SOH PENG GUAN
Contact No.: 65476171

Classification Of Case:

Authentication Stamp
NP168

ACCIDENT STATEMENT

ACCIDENT DATE: 16/11/2017 (DD/MM/YYYY), TIME: 19:28 (HH:MM)

LOCATION: WATERWAY POINT B1 Car Park

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SFC1133G
 b) INSURANCE COMPANY: MSIG
 c) POLICY NUMBER: MSD/VPCP/17-002252
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Audi A3 Sedan
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PERSONAL
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) (NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: HITACHI CAPITAL ASIA PACIFIC PTE LTD (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No of passengers
 (including driver)
(01)

DRIVER

- a) NAME: TAN JUNMING (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8126296 CONTACT: 92221133
 c) ADDRESS: 120 PUNGGOL WALK #05-42 (S)828770

* d) DATE OF BIRTH: 22/09/1991 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING LICENSE: 01/02/2000

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

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

IF YES, PLEASE STATE WHICH POLICE STATION: Punggol NPC

8. THIRD PARTY VEHICLE

No of passenger
 (including driver)
(02)

a) VEHICLE NUMBER: SLJ3594M MODEL: TOYOTA CAMRY

b) DRIVER'S NAME: _____

c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

No of passenger
 (including driver)
()

d) VEHICLE NUMBER: _____ MODEL: _____

e) DRIVER'S NAME: _____

f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = tan.junming@yahoo.com.sg

fax = _____

VIDEO _____

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8128229C



Name

TAN JUNMING
(CHEN JUNMING)

陈 骏 名

Race
CHINESE

Date of birth: 22-09-1981 Sex: M

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S8128229C

Name

TAN JUNMING (CHEN
JUNMING)

Birth Date: 22 Sep 1981

Issue Date: 25 Jan 2003



1000146457H



S8128229C

NRIC No: S8128229C



Date of issue
16-05-2012

120 PUNGGOL WALK #05-42
SINGAPORE 828770

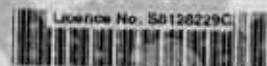
NRIC No: S8128229C

Date: 09/12/2015

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2B Motorcycles not exceeding 200 cc
Class 3 Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

PASS DATE
15 Jan 2001
01 Feb 2000



Licence No: S8128229C

NP 42 SA

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
 Tel +65 6827 7888, Fax +65 6827 7800
 www.msig.com.sg

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)

18/09/2017

Excess : S\$1500/-SECT I

Others Excess : Refer to your policy schedule

A0215-101

CERTIFICATE No.

MSD/VPCP/17-002252-00

1. Index Mark and Registration

Number of Vehicle

SFC1133G

2. Name of Policy holder

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

3. Effective date of the Commencement of
 Insurance for the purposes of the
 Act

31/08/2017

4. Date of Expiry of Insurance

30/08/2018

5. Persons of 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 Vehicles 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.

And Provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

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.

3. Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

* 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 & Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

AUTHORIZED SIGNATURE

IMPORTANT NOTICE

This Certificate is not transferable to a new owner of the vehicle.

If for any reason the Insurance is terminated during its currency, the Certificate must be returned to the Insurer, or if the Certificate has been lost or destroyed a Statutory Declaration to that Effect has to be made. Failure to comply with this obligation is an offence under the compulsory Insurance Legislation. This Certificate must be returned if the insurance is suspended during its currency.

If you are involved in an accident, full details must be forwarded immediately to the Company.

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNR417152658 Vehicle Registration No: SFC1133G
Name (as shown in NRIC) : TONI JUMMALLY (C/O) JUMMALLY NRIC/FIN/Passport No : 88128229C
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No.: 92221133
Email Address : _____
Date of Accident : 16/11/2017 Time of Accident : 19:30
Place of Accident : WATERFRONT BOULEVARD 1 CARPARK
Insurance Company: M82G

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ACCIDENT LOCATION AS ABOVE

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Paul W. Brown
NRIC/FIN No.:
Date: 17/11/2017

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MINA4171526589 Vehicle Registration No : SFC 1133G
Name (as shown in NRIC) : TAN JUN MIN (Captain Jun Ming) NRIC/FIN/Passport No : 88128229C
(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : 92221133
Email Address : _____
Date of Accident : 16/11/2017 Time of Accident : 19:30
Place of Accident : WATERFRONT BOULEVARD 1 CARPARK
Insurance Company : M&L

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

to insert the CORRECT Police Report

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Rishi Wintals
NRIC/FIN No.:
Date: 20/11/2017