

NATIONAL Assessment Centre Services

Date In 24/11/17	Job description	Date & Time Completed	Done by
Ref No NA/INC/17022413/13	SAS e-filing		
Veh No SJQ5958X	E-mail (Action Recd. A/C 2hrs)		
D.O.A. 17/11/17 0940	i-Motor Claim Form	MT/0971035	
OD (TP) Reporting Only	i-Motor W/O (Within OE 2hrs TP 4hrs)		
	i-Photo Uploaded		
TP Insurer	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	TWINCAR	Tel:	Fax:
TP Particulars:	Veh No: QBB8032X	INC () / Non-INC ()	
Owner / Driver: (		Tel:	
Policy No: (	Period: (	Cover Type: (
Confirmed by: (	Date:	Time:	
Insured/Driver Liability: (	% [Note-Est. 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 refer of repairer.

() Total Loss Case : to e-mail Insurer URGENTLY.

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

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury : _____

Date/Time	Actions

NA/1707251

Claimant's Particulars :-	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Driver/Owner:	1) AR : Accident Reporting (\$30);		
Contact No:	2) DA : Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF : Towing Fee \$40; \$45		
	4) FT : Follow-Through Survey \$120		
	5) RT : Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR : Re-inspection \$75		
	7) NI : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (M1) : TP (Non-INC) against INC \$20		
	9) N12: Idac Mobile \$0		
	Invoice dated:	Fax Charged	
	Invoice dated:	Fax Charged	

Auditors' Comments :-

Cat 1:

Cat 2/3:

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	24/11/2017 10:12
Date Of Accident	17/11/2017 09:40
Exact Location Of Accident	PIE TWDS TUAS B4 TOA PAYOH EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ5958X
Insured/Policyholder	
Name Of Registered Owner	DART ALLIANCE AUTOMOBILE PTE LTD
Co Reg No	201707220W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96806027
Alternative Phone No	OFFICE-63140662

Vehicle Particulars

Manufacturer	NISSAN
Model	LATIO
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	MOTOR TRADE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5091952710
Cover Note Number	

Driver

Name of Driver	THOR YIN SENG, DESMOND (TU ENCHENG)
NRIC No	S8742862A
Date Of Birth	27/12/1987
Occupation	INDOOR
Date Of Driving Pass	08/07/2008
Driving Experience	9 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83283632
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 434 TAMPINES ST 43 #03-81
Postcode	520434
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB8032X
Vehicle Make/Model/Colour	
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	
Phone Number	
Email Address	

DETAILS OF INJURED PERSON 1

Name	THOR YIN SENG, DESMOND (TU ENCHENG)
------	-------------------------------------

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) 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.
- (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.



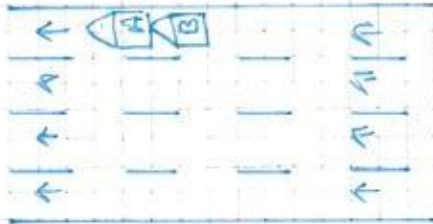
Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

PIE Toward Tuas Before Tua Payoh Exit.



A - 5JQ 5958X

B - 4BB 8032X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above date and time, I was driving along PIE toward tuas on the 1 lane of a 4 lanes expressway. Somewhere before tua payoh exit, vehicle ahead of me slowed down and stopped due to heavy traffic flow. As such I applied brake and stopped accordingly. Out of the sudden, vehicle B (4BB 8032X) came from the rear and collided directly onto the rear portion of my vehicle.

A - 5JQ 5958X

B - 4BB 8032X

DECLARATION

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

4



Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: *Shym* 24/11/17
NRIC/FIN No.:

Vehicle No.	55A 5958 X	Model / Make	Nissan Latio
Date of Accident	17/11/17		
Time of Accident	09.40 am	HRS	
Location of Accident	PIE Toward Tuas Before Toa Payoh Exit		
Exact purpose use during accident	Work Use		
Name of Owner	Jart Alliance Automobile Pte Ltd		
Telephone No.	H/P : 9680 6027	Home :	Office : 6314 0662
NRIC	201707220W		
Address	210 Turf Club Road #Lot-A42 The Grandstand S(287995)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	NTUC		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	5091952710		
Name of Driver	As Above (If No, Thor Yin Seng, Desmond)		
NRIC	587428624	Any Passengers :	Nil
Date of birth	27/12/1987		
Occupation	Outdoor	/	Indoor
Driving License Pass Date	8 Jul 2008		
Gender	Male / Female		
Contact No.	H/P : 8328 3632	Home :	Office :
Address	Blk 434 Tampines St 43 #05-01 S(520434)		
Driver have any own vehicle	No	If yes, Reg No.	
Relationship	Employee	If no, state	
Weather condition	Clear	Raining	Other
Road Surface	Dry	Wet	Other
Any Injuries	No	If Yes, Who?	
Name And Contact No.	Thor Yin Seng, Desmond		
Name And Contact No.			
Police Report	No	If Yes, Where?	
Vehicle B No.	G8B 8032 X	Any Passengers :	Nil
Name of Driver		Contact No. :	
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	Rear Portion		
Camera Recorder	Yes / No		
Email Address	grelover21 @ notingil.com		
PARTICULAR WORKSHOP	Twin car Automotive Pte Ltd		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Amos		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales @ n51.com.sg		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8742862A



Name

THOR YIN SENG, DESMOND
(TU ENCHENG)

涂恩誠

Race

CHINESE

Date of birth

27-12-1987

Sex

M

S8742862A

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S8742862A

Name:

THOR YIN SENG, DESMOND
(TU ENCHENG)

Birth Date: 27 Dec 1987

Issue Date: 10 Apr 2015



SG

4859444



NRIC No. S8742862A



Date of issue

11-04-2012

Address

APT BLK 434 TAMPINES STREET 43
#03-81
SINGAPORE 520434

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 08 Jul 2008



Licence No: S8742862A

NP 428A

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)

Certificate Number : 5091952710

Cover : Third Party

1. Index mark and Registration Number of Vehicle : N/A
Any Motor Vehicle the property of the Policyholder or in their custody or control. All steam-driven vehicles are excluded.
2. Name of Policyholder : DART ALLIANCE AUTOMOBILE PTE LTD
3. Effective Date of Insurance : 14 Jun 2017
4. Expiry Date of Insurance : 13 Jun 2018
5. Persons or Classes of Persons entitled to drive*
Refer to List Attached
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*
(a) Use only for Motor Trade purposes.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use solely for 'Breakdown' purposes is not deemed to be use for hire or reward.

* Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

POLICY TYPE	: MOTOR-TRADE INSURANCE
TYPE OF TRADE/BUSINESS	: CAR DEALERS
TOTAL NUMBER OF AUTHORISED DRIVER(S)	: 1
DETAILS OF AUTHORISED DRIVER(S)	: REFER TO LIST ATTACHED
EXCESS (SECTION I)	: N/A
EXCESS (SECTION II)	: N/A
SUM INSURED	: N/A

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)

Agency : IVAN INSURANCE AGENCY (00000614519)

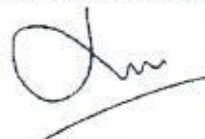
Date of Issue : 14 Jun 2017 17:10 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Claim Handling

Accident MT/0971035

Policy No.	5091952710	Vehicle No.		GST Registration No.	
Policyholder Name	DART ALLIANCE AUTOMOBILE PTE LTD			Policyholder NRIC	
Product Code	MOTOR TRADE INSURANCE	Cover Type	Third Party	Loading	
Motor Trade Plate No.	51Q5958X	Motor Trade Driver Name	THOR YIN SENG, DESMOND (TU I	Motor Trade Driver NRIC	
Contact No. (Mobile)	83283632	Contact No. (Office)	0	Contact No. (Home)	
Email Address		Special Remark		eCode	
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement (%)	0		

Accident Details

Report Date	24/11/2017 14:10	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	17/11/2017	Time of Accident hh:mm	09:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	PIE TWDS TUAS 84 TOA PAYOH EXIT				

Benefits

Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

Policyholder Mailing Address

Address 1	210 TURF CLUB ROAD	Address 2	#LOTA42 THE GRANDSTAND	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	LOT A42	Related Policy Number	5091952710		

OI Driver Info

Driver Name	THOR YIN SENG DESMOND (TU ENCHENG)	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S8742862A	Driver DOB	
Register Date of Driver License	06/07/2008	Driver Age	29	Driving Experience	
Contact No. (Mobile)	83283632	Contact No. (Office)	0	Contact No. (Home)	
Address 1	BLK 434	Address 2	TAMPINES STREET 43	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	#03-81				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
-------------------------------------	------	-------------	---

Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	DART ALLIANCE AUTOMOBILE P	Insured NRIC	
Contact No. (Mobile)		Contact No. (Home)		Contact No. (Office)	
Email Address		OI Vehicle Number		TP Vehicle Number	
Claim Description	/ GBB8032X ON 17 Nov 2017				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	GIA report	
Date Registered	24/11/2017 14:24	Claim Close Date		Date Received	
Report Taken By	ROSINDA	Workshop Repairer		Total Loss but Repaired	
<input type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.	MT/0971035	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	24/11/2017 00:00
Path *		Category *	Confidential Urgency

<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	De
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	SAS	Normal	SAS ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 No v 2017 14:23	Photos	Normal	Photos

Video List

Uploaded By/Date	Folder Date	File Name	Source
		<input type="button" value="Display in New Window"/>	<input type="button" value="Scan and uploading"/>