

NATIONAL Assessment Centre Services

Date In 02/12/17	Job description	Date & Time Completed	Done by
Ref No NA/05217022895/13	SAS e-filing		
Veh No SDS 7116 G	E-mail (within 3hrs, Aft 2hrs)		
DOA 30/11/17 1815	i-Motor Claim Form		
<input checked="" type="radio"/> 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: (HUA MENG)	Tel: ()	Fax: ()
TP Particulars:	Veh No: KERB	INC () / Non-INC ()
Owner / Driver: ()	Tel: ()	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: ()	Date: ()	Times: ()
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

NA1707448	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):	OD:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments :-	TP (N11): TP (Non INC) against INC \$20		
Cat 1:	9) N12: Idac Mobile \$0		
Cat 2/3:	Invoice date / Fee Charges		
	Invoice dated / Fee Charges		

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	02/12/2017 09:44
Date Of Accident	30/11/2017 18:15
Exact Location Of Accident	OUTSIDE 56K KING'S RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDS7116G
Insured/Policyholder	
Name Of Registered Owner	MR ROY MONOJ KUMAR
NRIC No	S1500671D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98182760
Alternative Phone No	OFFICE-65368466

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	S300
Exact Purpose for which vehicle was being used at time of accident	PARKED VEH
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3035781703
Cover Note Number	

Driver

Name of Driver	CHERYL LIM LI LI
NRIC No	S6843472F
Date Of Birth	10/11/1968
Occupation	INDOOR
Date Of Driving Pass	20/02/1991
Driving Experience	26 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98182760
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	56K KING'S ROAD
Postcode	268120
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	NO COLLISION
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?	NO
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?	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

SKETCH PLAN

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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 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:

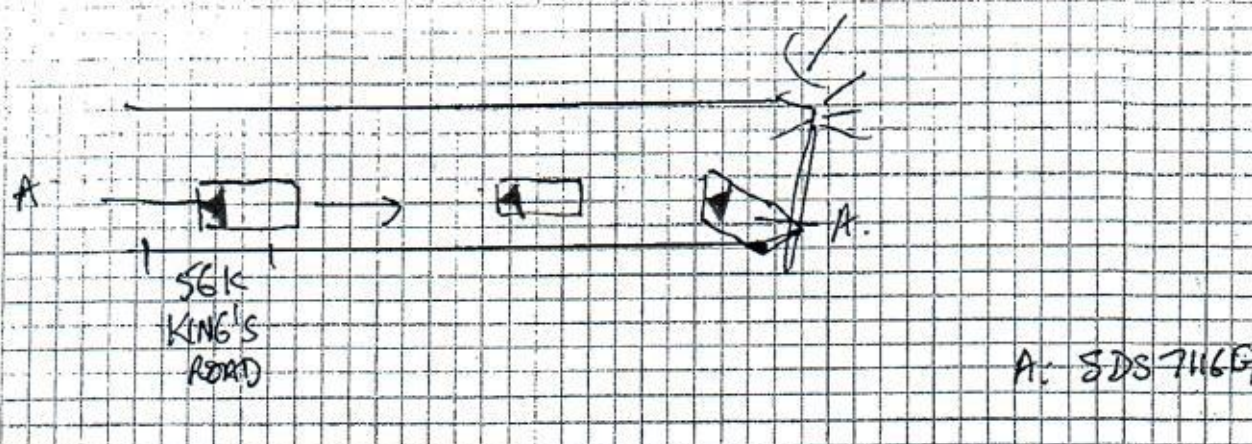
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
4.55pm 1/12/17


Driver's Signature
(If driver is not the policyholder)
Date & Time:
4.55pm 1/12/17

 02/12/17
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I park my car SDS 71166 on 30/11/17 at 6.15pm along 56K KING'S ROAD, outside my house and rang the door bell for my maid. Suddenly, I saw my car roll back down the road and then hit a curb and stop. There was no damage to other vehicles or property or any human beings were affected.

DECLARATION

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

Policyholder's Signature

Date & Time:

4.58pm 1/12/17

Driver's Signature

(If driver is not the policyholder)

Date & Time:

4.55pm 1/12/17

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

2/12/17

VEHICLE NO: SDS 7116G MAKE & MODEL: MERCEDES S 300
DATE OF ACCIDENT 30/11/17 / /
TIME OF ACCIDENT 6.15pm AM / PM
LOCATION OF ACCIDENT OUTSIDE 56K KING'S ROAD S268120
Exact Purpose use during accident DOMESTIC
NAME OF OWNER ROY MONOJ KUMAR
TELP NO 65368466
NRIC S15006713
CLAIM TYPE OD / THIRD PARTY / Reporting Only
INSURANCE CO. CHINA TAIPIING INSURANCE (SINGAPORE) PTE LTD
TYPE OF COVERAGE Comprehensive / Third Party / Third Party Fire & Theft
POLICY NO. PLM 281527
NAME OF DRIVER As above / If No: LIM LI LI CHERYL
NRIC S6843472F Any passengers: No
DATE OF BIRTH 10 / 11 / 68
OCCUPATION Outdoor / Indoor LEGAL OFFICER
DATE OF DRIVING PASS 20 / 02 / 1991
GENDER Male / Female
CONTACT NO. 98182760 Office: Home: 64680121
ADDRESS 56 K KING'S ROAD S268120
DRIVER HAVE ANY OWN Vehicle NO / If yes, Reg No.
RELATIONSHIP Employee / If No: WIFE
WEATHER CONDITION Clear / Raining / Other
ROAD SURFACE Dry / Wet / Other
ANY INJURIES No / If yes, Who?
CONTACT NO. 98182760
POLICE REPORT No / If yes, Where?
VEHICLE B NO. NIL Any Passenger: NIL
NAME
CONTACT NO. NIL
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. NIL
Have you been approach by unknown person soliciting (s) / offering accident claims assistance? YES NO
PARTICULAR WORKSHOP Lai Hui Meng Kce Motor PTE LTD
TELP NO 64538110
CONTACT PERSON
FAX NO.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S6843472F**

Name: **CHERYL LIM LI LI**

Birth Date: **10 Nov 1968**
Issue Date: **04 Jul 2016**



 002584775E

IDENTITY CARD NO. **S6843472F**



Name: **CHERYL LIM LI LI**
MRS CHERYL ROY
林琳麗

Race: **CHINESE**

Date of birth: **10-11-1968**

Country/Place of birth: **SINGAPORE**

Sex: **F**




S6843472F

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ 20 Feb 1991

NP 428A



5619767



NRIC No. **S6843472F**



Date of issue:
20-06-2016

Address:
**56K KING'S ROAD
SINGAPORE 268120**

MOTOR PRIVATE CAR

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)

PLM 281527

ORIGINAL

Engine No : 27294630659530
ChNo: WDD2211542A151091

CERTIFICATE No.

DMPCSN3035781703

1. Index Mark and Registration
Number of Vehicle

SDS7116G

2. Name of Policy Holder

MR ROY MONOJ KUMAR

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

05 August 2017

Named Drivers Ex Sect. I S\$1,500.00
Additional Ex Other than Named Drivers:

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

4. Date of Expiry of Insurance

04 August 2018

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

* Age as at date of accident

EX ON WINDSCREEN S\$100.00

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his 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\$1,000 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. : UNITED OVERSEAS BANK LIMITED AS HP OWNER

* 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

Authorised Officer

Authorised Signatory