

NATIONAL Assessment Centre Services

(ver 1 Jan 2008)

19A417164599

Date In: 14/12/2017, 15:27	Job description	Date & Time Completed	Done by
Ref No: NBA/MC17031844	SAS e-filing		
Veh No: SKW 2957A	E-mail (within 3hrs, AIC 3hrs)		
D.O.A: 07/12/2017, 14:30	f-Motor Claim Form	11/09/13124	14/12/2017
OD TP Reporting Only	f-Motor W/O (within 3hrs, TP 3hrs)		17:28
	f-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass'l Report by Fax/Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW: (Tel:	Fax:
TP Particulars: Yeh No: SKR 4202H	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%; P: 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 0016	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

NBA1707745	Invoice Preparation Checklist	By: ()	Checked by: ()
Human's Particulars:	1) AR: Accident Reporting (\$30)		
river/Owner:	2) DA: Damage Assessment (\$100)	INC (\$30)	
contact No:	3) TP: Towing Fee	\$40/\$43	
amaged Portion:	4) FT: Follow-Through Survey	\$120	
	5) PT: Follow-Through Survey (Resurvey)	\$10	
	For claims against INC Only (ver 1.0 Jan 2008)		
	6) TR: Re-inspection	\$15	
	7) NI: 1 day DA + SMRT Survey	\$160	
	8) NTUC Additional Services:		
	9) NTUC:		
C. Checked by (Bngr-In-Charge):	*N1: Courtesy Car / Tpi Allowance	\$5	
	*N6: Repair Co-ordination	\$10	
	*N7: Post Repair Inspection	\$15	
	*N8: DV / Collect Excess Coordination	\$5	
	TP (N1) + TP (N6) against INC	\$20	
	9) NTUC: 1 day Mobile	\$10	
	Invoice dated	File Charged	
	Invoice dated	File Charged	

Address	8 BINJAI HILL
Postcode	589924
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	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

PLEASE REFER TO SKETCH PLAN

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	SKR4202H ✓
Vehicle Make/Model/Colour	HYUNDAI ACCENT
Details Of Properties	
Name of Driver	ANNA
NRIC/Passport Number	
Contact Number	90210825
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

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	14/12/2017 15:27
Date Of Accident	07/12/2017 14:30
Exact Location Of Accident	INTERSECTION STAMFORD ROAD/VICTORIA STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW2957A /
Insured/Policyholder	
Name Of Registered Owner	MOTORWAY CAR RENTALS PTE LTD /
Co Reg No	199902927C
Email Address	WINTERDEUR@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-83633424
Alternative Phone No	OFFICE-83633424

Vehicle Particulars

Manufacturer	SSANGYONG
Model	ACTYON-2.0 2WD (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD /
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093336938 /
Cover Note Number	

Driver

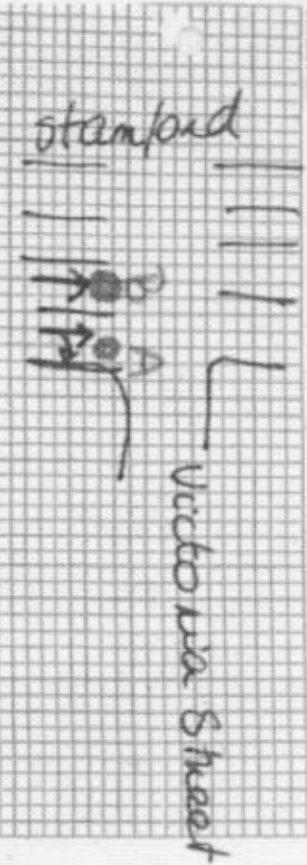
Name of Driver	WINTRAECKEN ANTOINETTE JOSEPHINA CLAIRE /
Passport No/FIN	G3016963N /
Date Of Birth	06/07/1973
Occupation	INDOOR
Date Of Driving Pass	28/05/2015
Driving Experience	2 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-83633424
Fax Number	
Contact Number	
EEmail Address	WINTERDEUR@HOTMAIL.COM

URGENT NOTICE

SKETCH PLAN

1. Please report URGENT the details of the accident to speed up the claims process.
2. This form must be submitted to the Police Station as soon as possible after the accident.
3. Information provided must be as ACCURATE and COMPLETE as possible. Any false information or withholding of material facts may allow insurance companies to DISPUTE your claim.
4. The layout and appearance of this form by insurance companies is not an indication of policy validity on the part of the insurance companies.
5. ALL INFORMATION MUST BE PROVIDED TO THE POLICE AND THE INSURANCE COMPANIES.
6. This report will be forwarded by the Police to the Insurance Companies established by the General Insurance Association of Singapore (GIA) for settling and file copies of this report will be sent to each insurer upon application by interested parties.
7. By the completion of this report to the insurer, you hereby consent to the making of this report at the insurer and to copies of the report being made available to the insurer.

Sketch Plan



Accident Circumstances of the Accident

Jam car A the other car B was from Anna Freddie (Hijacked) I went straight as allowed, Mrs Tweedie took a turn to the right and hit my car.

Declaration

I declare the foregoing particulars are true to my knowledge.

[Signature]
Signature of Insured / Driver
Date

[Signature]
Witnessed by Insurance Agent
Date

On 14/12/2017
Redi waters

Mrs Tweedie's car was in the second lane where you are just allowed to go straight

Claim Handling

The premium on this policy has not been collected.

Accident MT/0973724

Policy No.	5093336938 /	Vehicle No.	SKW2957A /	GST Registration No.	
Policyholder Name	MOTORWAY CAR RENTALS PTE LTD /			Policyholder NRIC	
Product Code	FLEET INSURANCE	Cover Type	drive PREMIUM	Loading	
Contact No.(Mobile)	83633424	Contact No.(Office)		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	14/12/2017 17:13	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe - Sai
Date of Accident	07/12/2017 /	Time of Accident hh:mm	14:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	INTERSECTION STAMFORD ROAD/VICTORIA STREET				
Benefits					
Excess					
Own damage Excess	1,000.00	Additional Excess	0.00	Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess	1,000.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
GST Registered Information					
GST Registered	Yes	GST Registration Date	01/08/1999		
GST Registration No.	199902927C	GST Status Verified	Yes		
Modification History					
Policyholder Mailing Address					
Address 1	1094 LOWER DELTA ROAD	Address 2	MOTORWAY BUILDING	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5093337471		
OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	WINTRAECKEN ANTOINETTE JO	Driver NRIC	G3016963N	Driver DOB	
Register Date of Driver License	28/05/2015	Driver Age	44	Driving Experience	
Contact No.(Mobile)	83633424	Contact No.(Office)		Contact No.(Home)	
Address 1	8 BINJAI HILL	Address 2	# BINJAI PARK	Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	SKW2957A	Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Modification History

Claim 001 OD-MX **New**

Claim Type *	OD-MX	Insured Name	MOTORWAY CAR RENTALS PTE	Insured NRIC	
Contact No.(Mobile)		Contact No.(Home)	NIL	Contact No.(Office)	
Email Address	rent@motorwaycarrentals.com	OI Vehicle Number	SKW2957A /	TP Vehicle Number	
Claim Description	SKW2957A / SKR4202H ON 7 Dec 2017				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	
Date Registered	14/12/2017 17:21	Claim Close Date		Date Received	
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss but Repaired	
<input type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.	MT/0973724 /	Claim No.	001		
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	14/12/2017 17:24		
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_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:24	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:24	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:22	SAS	Normal	SAS :
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:22	Photos	Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:22	Photos	Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:22	Photos	Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:22	Photos	Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:22	Photos	Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:21	Photos	Normal	Photos
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:21	Photos	Normal	Photos
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 14 Dec 2017 17:21	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"/>



Motorway Car Care Centre Pte Ltd
(CO REGD NO: 200600006)
1004 Lower Delta Road, Motorway Building, Singapore 160026
Tel: (65) 6460 3200 Fax: (65) 6278 6535
Website: www.motorway.com.sg

ACCIDENT STATEMENT FORM

Please attach this form together with Driver's, driving license and Insurance Certificate.

Date of Accident: 07/12/2017
Time of Accident: 2:30pm

Place of Accident: intersection Stamford Road /

Vehicle Registration Number: SKR 4202

Vehicle Make and Model: Hyundai Accent

Name of Driver: Anna Indecdie

Details of Other Vehicle - Parkside

Name of registered Owner: T1 van Deur

Vehicle Registration Number: Victoria Street

Name of Driver: Anna Indecdie

Vehicle Make and Model: 401 0015

Name of Driver: Anna Indecdie

Address: 818 Bayview Hill

HP: 9728 9825

Insurance Company Name: Comodo

Vehicle Registration Number: SKR 2957

Vehicle Make and Model: 55AB6 Yangtze 200 200

Name of Driver: Anna Indecdie

Purpose was being used at time of accident: Commuting to work

Action to be taken for repair your vehicle: Third party claim

Insurance Company: Liberty Insurance Ltd

Type of coverage: Comprehensive Third Party Fire & Theft, Third Party Only

Policy number: 141217

Details of Own Vehicle - Driver

Name of Driver: AYC Witracker

HP: 6801 6963

Date of Birth: 06/09/73

Occupation: N/A

Date of driver's license: 08/10/14

Address: 818 Bayview Hill

HP: 8503 3444

Email: witracker@hotmail.com

Relationship of the Driver with the insured: Employer / Partner

Information of the Accident: (Please attach)

Any personal or property damage? Yes / No

Weather condition: Clear

Road surface: Wet

Was notice of intended prosecution given: Yes / No

Was notice of intended prosecution given: Yes / No

Signature: Anna Indecdie

Date and time: 08/12/17 11:00



Motorway Car Care Centre Pte Ltd
(CO REGD NO: 200600006)
1004 Lower Delta Road, Motorway Building, Singapore 160026
Tel: (65) 6460 3200 Fax: (65) 6278 6535
Website: www.motorway.com.sg

Details of Other Vehicle - Property

Vehicle Registration Number: SKR 4202

Vehicle Make and Model: Hyundai Accent

Name of Driver: Anna Indecdie

Vehicle Registration Number: 401 0015

Name of Driver: Anna Indecdie

Name of Driver: Anna Indecdie

Vehicle Make and Model: 401 0015

Name of Driver: Anna Indecdie

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Vehicle Make and Model: 401 0015

Name of Driver: Anna Indecdie

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **G3016963N**

Name:

**WINTRAECKEN ANTOINETTE
JOSEPHINA CLAIRE**

Birth Date: **06 Jul 1973**

Issue Date: **28 May 2015**

Valid Till **27/05/2020**



SG
50

REPUBLIC OF SINGAPORE

FIN **G3016963N**



Name

WINTRAECKEN ANTOINETTE JOSEPHINA CLAIRE

Date of Birth

06-07-1973

Sex

F

Nationality

NETHERLANDS

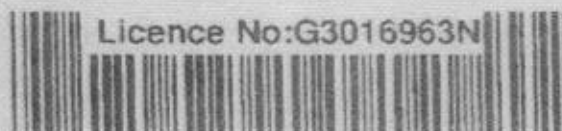
G3016963N

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

EFFECTIVE DATE

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg 28 May 2015

NP 428A



Licence No:G3016963N

FA1582866

DEPENDANT'S PASS

Immigration Regulations



FIN G3016963N

Date of Issue
23-05-2016

Date of Expiry
23-06-2019



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

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: 5093336938 /

Cover : drive PREMIUM

1. Index mark and Registration Number of Vehicle : **SKW2957A**
Chassis Number : KPTB0A1SSEP150017
2. Name of Policyholder : MOTORWAY CAR RENTALS PTE LTD
3. Effective Date of Insurance : 01 Sep 2017
4. Expiry Date of Insurance : 31 Aug 2018
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/her 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#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) Use for any purpose in connection with the Motor Trade.
- # 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.

EXCESS (SECTION 1)	: S\$1,000
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: UNITED OVERSEAS BANK LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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 : MOTORWAY CREDIT PTE LTD (00000614920)
Date of Issue : 10 Aug 2017 11:44 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Text size + -

0% 25% 50% 75% 100%

Register New Vehicle (Acknowledgement)**Vehicle Particulars**

IU: 1126101079

Vehicle No.:	SKW2957A	Vehicle Scheme:	Normal
Vehicle Type:	R11 - Private Hire (Self-Drive) Station Wagon/Jeep/Land Rover		
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	SSANGYONG	Vehicle Model:	ACTYON 2.0D 2WD AUTO
Chassis No.:	KPTB0A1SSEP150017	Engine No.:	67195002571863
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Diesel	Passenger Capacity:	4
Engine Capacity:	1998 cc	Power Rating:	-
Maximum Power Output:	129.0 kW (172 bhp)		
Unladen Weight:	1620 kg	Maximum Laden Weight:	2180 kg
Primary Colour:	Silver	Secondary Colour:	-
First Registration Date:	26 Oct 2015	Original Registration Date:	26 Oct 2015
Manufacturing Year:	2013	Open Market Value:	\$25,828.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$14,080.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$20,000.00 (100%), next \$5,828.00 (140%)

Owner Particulars

Owner Name:	MOTORWAY CAR RENTALS PTE LTD
Owner ID Type:	Company
Owner ID:	199902927C
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.:	1094
Registered Street Name:	LOWER DELTA ROAD
Registered Unit No.:	-
Registered Building Name:	MOTORWAY BUILDING
Registered Postal Code:	169205
COE No. / Expiry Date:	2015110103002094H / 25 Oct 2025
COE Bid Category:	B - Car (above 1600cc or 97kW (130bhp))
QP Paid:	\$59,889.00

**Transaction Details**

Business Transaction Ref. No.:	20151026085805590340
Business Transaction Date:	26 Oct 2015
Business Transaction Time:	08:58:05

Message

The above vehicle has been successfully registered.