

NATIONAL Assessment Centre Services

(wef 1 JAN 05)

MNA 117164946

Date In: 15/12/17 11:53	Job description	Date & Time Completed	Done by
Ref No: NA/INC 17023845/h4	SAS e-filing		
Veh No: GBA 4126 R	E-mail (within 8hrs, ATO 2hrs)		
D.O.A: 14/12/17 13:00	i-Motor Claim Form	MT/0973871	15/12/17 15:46
OD Reporting Only	i-Motor W/O (Within: OD 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: ()		Tel: ()	Fax: ()
TP Particulars:	Veh No: 4818 S	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 1707769

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Dat. 1:

Dat. 2 / 3:

Invoice Preparation Checklist

	Am't (\$)	Am't (\$)
	1st Bill	Add Bill
1) AR : Accident Reporting (\$30)	30.00	
2) DA : Damage Assessment (\$100); INC (\$80)		
3) TF : Towing Fee \$40/\$45		
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 + SMRI Survey \$160		
8) NTUC Additional Services		
OT*		
*N5: Courtesy Car / Tpt Allowance	\$5	
*N6: Repair Co-ordination	\$10	
*N7: Post Repair Inspection	\$25	
*N8: DV / Collect Excess Coordination	\$5	
TP (N11) : TP (Non-INC) against INC	\$20	
9) N12: Idac Mobile	\$0	

Invoice dated

Fee Charged

Invoice dated

Fee Charged

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	15/12/2017 11:53
Date Of Accident	14/12/2017 13:00
Exact Location Of Accident	EUNOS LINK SLIP RD TWDS UBI AVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA4126R
Insured/Policyholder	
Name Of Registered Owner	CARWAY LEASING & RENTAL
Co Reg No	53264813K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67440777

Vehicle Particulars

Manufacturer	DAIHATSU
Model	HIJET 660 M
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5068492334-03
Cover Note Number	-

Driver

Name of Driver	LIM HOCK SENG @ GOH KIAN HUA
NRIC No	S0230527E
Date Of Birth	15/03/1953
Occupation	OUTDOOR
Date Of Driving Pass	19/01/1972
Driving Experience	45 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86863777
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 118 CORPORATION DRIVE #08-444
Postcode	610118
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	CLEAR
Road Surface	DRY

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)	2

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 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	4818S
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	LIM HOCK SENG @ GOH KIAN HUA
Approximate Age	

Injuries Sustain	NECK
Injured person in which vehicle?	GBA4126R
Were seat belts worn?	YES
Was injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	ONG POH SUAN
Approximate Age	
Injuries Sustain	NECK
Injured person in which vehicle?	GBA4126R
Were seat belts worn?	YES
Was injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

Please Refer to sketch

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to statement

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:

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

Map Directions

Map

Building Directory

Photos

What's Nearby

Get Tips

Getting Here

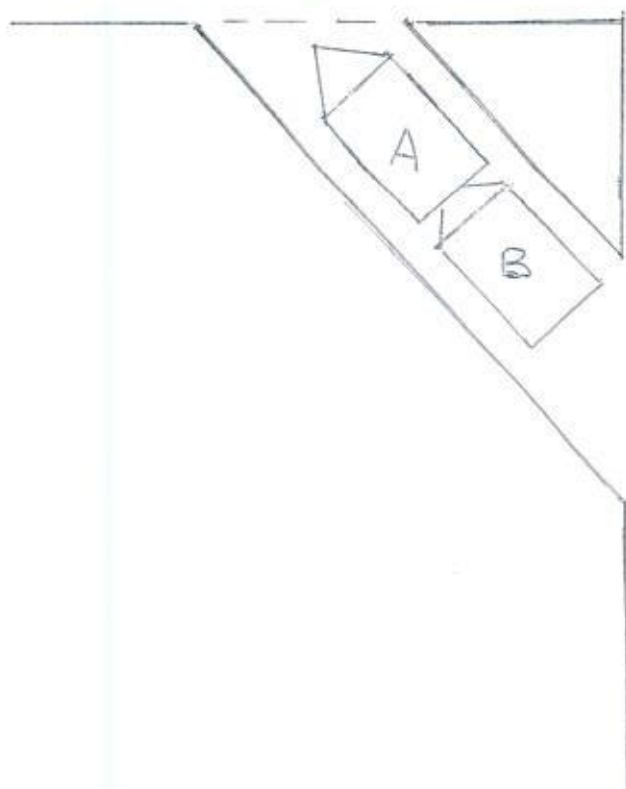
5 Things You Shouldnt Do If Hes Cheating On You

Keep Your Car Safe in S'cure & M'sia With real time 24hrs tracking & sms alert. Free 30 days trial available!

Get Free Maps

Ubi Ave 3

Accident site



FEEDBACK	LINK
FEEDBACK	LINK

A - GBA4126R

B-4818 S
(SST 9616 R)

Accident Report

On 14th of December 2017 at around 1300hrs , I was driving my vehicle (GBA4126R) along Eunos Link turning into the filter lane towards Ubi Ave 1. While waiting for on coming vehicles to clear, suddenly a vehicle bearing trade plate (4818S) hit onto the rear of my vehicle. I want to state that my vehicle was stationary when the accident happened. I'm making a third party claim.




Name : Lim Hock Seng

NRIC : S0230527E

REPUBLIC OF SINGAPORE DRIVING LICENCE

S0230527E



LIM HOCK SENG

Birth Date: 15 Mar 1953

Expiry Date: 16 Dec 2002



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S0230527E



Name
LIM HOCK SENG
@GOH KIAN HUA
林福成

Race
CHINESE

Date of Birth
15-03-1953

Sex
M

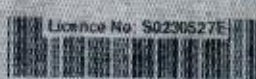
Country of Birth
SINGAPORE

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

Class	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	PASS DATE
Class 3		19 Jan 1972

NP 426A

Licence No: S0230527E



1732778



NRIC No: S0230527E



Blood Group
O+

Date of Issue
02-03-1994

APT BLK 118 CORPORATION DRIVE #08-444
SINGAPORE 610118

NRIC No: S0230527E

Date: 01-02-2001 (R)

No: 3936747

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 : 5068492334-03

Cover : Third Party

- | | |
|---|---------------------------|
| 1. Index mark and Registration Number of Vehicle | : GBA4126R |
| Chassis Number | : S320V0083657 |
| 2. Name of Policyholder | : CARWAY LEASING & RENTAL |
| 3. Effective Date of Insurance | : 27 Jul 2017 |
| 4. Expiry Date of Insurance | : 26 Jul 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. | |
| (b) Use for the carriage of passengers or goods 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 whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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)	: N/A
EXCESS (SECTION 2)	: S\$1,500
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: MARLENE VEHICLES TRADING
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 : INSMART (INSURANCE) AGENCY PTE LTD (00000615165)
Date of Issue : 23 Jun 2017 16:26 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Claim Handling

Accident MT/0973871

Policy No.	5068492334-03	Vehicle No.	GBA4126R	GST Registration No.	
Policyholder Name	CARWAY LEASING & RENTAL	Cover Type	Third Party	Policyholder NRIC	
Product Code	FLEET INSURANCE	Contact No.(Office)		Loading	
Contact No.(Mobile)	67440777	Special Remark		Contact No.(Home)	
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	No

Accident Details

Report Date	15/12/2017 15:40	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head
Date of Accident	14/12/2017	Time of Accident hh:mm	13:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	EUNOS LINK SLIP RD TWDS UBI AVE 1				

Benefits

Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	1,500.00	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	53 UBI AVENUE 1	Address 2	#03-01 PAYA UBI INDUSTRIAL I	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5094683034		

O1 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	
Unnamed driver Name	LIM HOCK SENG @ GOH KIAN T	Driver NRIC	S0230527E	Driving Experience	
Register Date of Driver License	19/01/1972	Driver Age	64	Contact No.(Home)	
Contact No.(Mobile)	86863777	Contact No.(Office)		Address 3	
Address 1	BLK 118 #08-444	Address 2	CORPORATION DRIVE	Post Code	
Address 4	SINGAPORE 610118	Address Type	Singapore address		
Unit No.	08-444				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" 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
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Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	CARWAY LEASING & RENTAL	Insured NRIC	
Contact No.(Mobile)	98627777	Contact No.(Home)		Contact No.(Office)	
Email Address		O1 Vehicle Number	GBA4126R	TP Vehicle Number	
Claim Description	GBA4126R / 4818S ON 14 Dec 2017				
Preferred Workshop Contact No.	0	Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	
Date Registered	15/12/2017 15:45	Claim Close Date		Date Received	
Report Taken By	LIEW SHAN HUI				

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/0973871	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	15/12/2017 15:46
Path *	Category * <input type="text"/> Confidential <input type="text"/> Urgency <input type="text"/>		
Browse... Clear Please Select <input type="text"/> NO <input type="text"/> 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 15 Dec 2017 15:46	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 15 Dec 2017 15:46	SAS	Normal	SAS ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 15 Dec 2017 15:46	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 15 Dec 2017 15:46	Photos	Normal	Photos
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 15 Dec 2017 15:45	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 15 Dec 2017 15:45	Photos	Normal	Photos

Video List

Uploaded By/Date	Folder Date	File Name	Source
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