

NATIONAL Assessment Centre Services

Date In: 27/12/17	Job description	Date & Time Completed	Done by
Ref No: NA/1117024432/13	SAS e-filing		
Veh No: GU13005	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 26/12/17 1600	i-Motor Claim Form		
OD: (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to	Owner/Wksp	

Preferred Wksp / INC Assign Wksp / QW: (TWINCAR	Tel:	Fax:
TP Particulars:	Veh No: SGR44346	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

NA1707990

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Int. 1:

Int. 2/3:

Invoice Preparation Checklist

	Amt (\$) 1st Bill	Amt (\$) Add Bill
1) AR: Accident Reporting (\$30);		
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 + 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 (N11): TP (Non INC) against INC \$20		
9) N12: Idac Mobile 30		

Invoice dated

Invoice dated

Fee Charged

Fee Charged

40-100

40-100

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	27/12/2017 14:40
Date Of Accident	26/12/2017 16:00
Exact Location Of Accident	PIE TWDS CHANGI SLIP RD INTO BEDOK NORTH AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GU1300J
Insured/Policyholder	
Name Of Registered Owner	DE WINE INTERNATIONAL LLP
Co Reg No	T10LL1283L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98360955

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORK
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	M489008
Cover Note Number	

Driver

Name of Driver	YEO SUAN LIEW
NRIC No	S1686128F
Date Of Birth	14/05/1965
Occupation	OUTDOOR
Date Of Driving Pass	27/04/1989
Driving Experience	28 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98360955
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 414 SEMBAWANG DR #04-718
Postcode	750414
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
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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

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	SGR4424G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.

De Wine International LLP

25 Kaki Bukit Road 4
#07-33 Synergy @ KB
Singapore 417800
Tel: +65 6384 7570 Fax: +65 6384 7570
Email: d.wine@singnet.com.sg
* Co. Reg. No. T1011283L

Policyholder's Signature
Date & Time:

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

 27/12/17
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

PIE Toward Changi Slip Road Into Bedok North Ave 3



A - GU 1300J

B - SGR 4424G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above date and time, I was driving along PIE toward changi slip road into bedok north ave 3 on a single lane road.

Before entering into bedok north ave 3, I stopped my vehicle completely as to give way to oncoming traffic. Out sudden vehicle B (SGR 4424G) came from the rear and collided directly onto the rear portion of my vehicle.

A - GU 1300J

B - SGR 4424G

DECLARATION

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

Tel: +65 6384 7570 Fax: +65 6384 7570
Email: info@singnet.com.sg
Co. Reg. No. T11011283L

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.:

[Signature]

27/12/17

Vehicle No.	GU13003	Model / Make	Toyota Hiace
Date of Accident	26/12/17		
Time of Accident	16.00	HRS	
Location of Accident	PIE Toward Changi slip Road Into Bedok North Ave 3		
Exact purpose use during accident	Work Use		
Name of Owner	De Wine International LLP		
Telephone No.	H/P : 98360955	Home :	Office :
NRIC	T10LL1283L		
Address	25 Kaki Bukit Road 4 #07-33 synergy @ KB S(417800)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	INDIA		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	M489008		
Name of Driver	As Above (If No) Yeo Suan Liew		
NRIC	S1686128F	Any Passengers : Nil	
Date of birth	14/5/1965		
Occupation	Outdoor	/	Indoor
Driving License Pass Date	27 Apr 1989		
Gender	Male	/	Female
Contact No.	H/P : 98360955	Home :	Office :
Address	Blk 414 Sembawang Dr #04-718 S(750444)		
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.			
Name And Contact No.			
Police Report	No	If Yes, Where?	
Vehicle B No.	SGR 4424G	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			
PARTICULAR WORKSHOP	Twincar Automotive Pte Ltd		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Dinos		
FAX NO	6741 0510		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1686128F

Name
YEO SUAN LIEW

楊全柳

Race
CHINESE

Date of Birth
14-05-1965

Sex
M

Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S1686128F

Name
YEO SUAN LIEW

Birth Date: 14 May 1965

Issue Date: 10 Mar 2003

000281722H

2070182

NRIC No. S1686128F

Blood Group
O+

Date of issue
28-05-1994

APT BLK 414 SEMBAWANG DRIVE #04-716
SINGAPORE 750414

NRIC No: S1686128F Date: 03-01-2000 No: 9253283

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

Class	Vehicle Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	27 Apr 1989

NP 428A

Licence No: S1686128F

IDAC	HOTLINE
STA Inspection	65556888
VICOM Assessment Centre	1800-2255822

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)

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 must be made. Failure to comply with this obligation is an offence under the legislation relating to compulsory Insurance.

The Certificate must be returned if the Insurance is suspended during its currency.

Agency Code: **35595SE** Excess: **Nil**
Third Party Only Young &/or Inexperience Drivers Excess: **SS2500/-Sect II for age <21 years or > 65 years &/or S'pore D.L. <2 years**

CERTIFICATE NO. M489008

- 1. Index Mark and Registration Number of Vehicle** **GU 1300 J**
- 2. Name of Policy Holder** **De Wine international LLP**
- 3. Effective date of the commencement of Insurance for the purposes of the Act** **19th January 2017**
- 4. Date of Expiry of Insurance** **18th January 2018**
- 5. Persons or 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 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 in connection with the Policyholder's business.
 - Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 - Use for social, domestic and pleasure purposes.

The Policy does not cover

 - Use for hire or reward or for racing, pace-making, reliability trial, or speed-testing.
 - Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

*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).

Date of Issue: **19/02.12.2016**



M.Z. 300C (GOODS CARRYING)
PRIVATE TYPE

for **India International Insurance Pte. Ltd.**
(APPROVED INSURERS)

Authorised Signatory

IMPORTANT NOTICE

Policyholders are hereby warned that under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap. 189), it shall be unlawful for any person to use or to cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

Policyholders are further warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

The Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agree to cover the new owner they will endorse the policy accordingly and will issue a new Certificate of Insurance in the new owner's name.

IN THE EVENT OF AN ACCIDENT NOTIFICATION SHOULD BE GIVEN IMMEDIATELY TO THE COMPANY. FAILURE TO DO SO WILL RESULT IN UNDERWRITERS DECLINING LIABILITY.

Agent/Broker Name: **Hock Kah**

10 Sin Ming Drive Singapore 575701
Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

28 Mar 2016

Our ref 2803160401N014031723

DE WINE INTERNATIONAL LLP
25 KAKI BUKIT ROAD 4
#07-33
SYNERGY @ KB
SINGAPORE 417800

Dear Sir/Madam

NOTIFICATION OF SUCCESSFUL AMENDMENT OF VEHICLE SPECIFICATION FOR VEHICLE NO. GU1300J

We wish to inform you that we have updated the following specification(s) for your vehicle, GU1300J, with effect from 28 Mar 2016. The Business Transaction Reference No. is 20160328154449979517.

Vehicle Details:	Original Specifications	New Specifications
Primary Colour :	Green	White

2. The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

1. Name	: DE WINE INTERNATIONAL LLP
2. Identification No. Type	: Limited Liability Partnership
3. Identification No.	: T10LL1283L
4. Place Of Passport Issue	: -
5. Vehicle No.	: GU1300J
6. Vehicle Type	: A50 - Goods (Closed) Van/Van Panel (Delivery)
7. Vehicle Scheme	: Normal
8. Vehicle Make	: TOYOTA
9. Vehicle Model	: HIACE DIESEL
10. Remarks	: The vehicle will be de-registered upon reaching its statutory lifespan on 18 Jan 2021. No COE renewal beyond that date will be allowed.