

19 MAY 17 170479

Preferred Wksp / INC Assign Wksp / QW: (

Human's Particulars		Machine's Particulars	
Driver/Owner:		1) AR: Accident Reporting (\$30)	\$3
Police No:		2) DA: Damage Assessment (\$100)	INC (\$80)
Damaged Portion:		3) TP: Towing Fee	\$40/\$45
		4) FT: Follow-Through Survey	\$10
		5) RT: Follow-Through Survey (Re-survey)	\$10
		Exemption against INC Only (See 10 Jan 2006)	
		6) TR: Re-inspection	\$3
		7) NI: Day DA + SMRT Survey	\$10
		8) NTUC Additional Services:-	
		OTV	
Checked by (Bngr-In-Charge):		*NI: Courtesy Car / Tpl Allowance	\$3
		*NI: Repair Coordination	\$10
		*NT: Post Repair Inspection	\$3
		*NR: DY / Collect Unacc Coordination	\$3
		TP (NI) / TP (Non INC) against INC	320
		9) N2: Idle Mobile	10
		Invoiced dated	(Not Charged)
		Invoice No.	Use Allowed
			STAMPED & SIGNED

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	28/12/2017 16:05
Date Of Accident	28/12/2017 10:00
Exact Location Of Accident	TAMPINES AVE 10 ENTER TO TPE TOWARDS CTE/SLE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB2371G
Insured/Policyholder	
Name Of Registered Owner	ADEMCO (FAR EAST) PTE LTD
Co Reg No	197700631N
Email Address	ANDREW.GOH@ADEMCOSECURITY.COM
Mobile Phone No	(LOCAL) +65-96898860
Alternative Phone No	OFFICE-63053000

Vehicle Particulars

Manufacturer	HYUNDAI
Model	H-1 STAREX-2.5 D CRDI (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	5087118746
Cover Note Number	

Driver

Name of Driver	GOH SAIK GUAN
NRIC No	S1826616D
Date Of Birth	11/11/1967
Occupation	OUTDOOR
Date Of Driving Pass	26/03/1992
Driving Experience	25 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96898860
Fax Number	
Contact Number	OFFICE-63053000
Email Address	ANDREW.GOH@ADEMCOSECURITY.COM

Address	BLK 752 PASIR RIS STREET 71 #06-90
Postcode	510752
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	2
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

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	SJB9239R
Vehicle Make/Model/Colour	TOYOTA AXIO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN LAY HONG LUCY
NRIC/Passport Number	S1578564J
Contact Number	96700215
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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.

X
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.:

Tampines Ave 10 turning right into TPE

TPE → PIE

TPE to SLE

SJB 9239R

GBB 2371G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28.12.2017 around 10.00 am while travelling with my company vehicle (G.B.B 2371G) to turning from ~~from Paser Rd Ave 10~~ Tampines Ave 10 Enter in-to TPE, due to traffic situation a major car (SJB 9239R) suddenly stopped in front of my and I do not have sufficient time to stop my vehicle and hit the rear of the major car (SJB 9239R). I take a photo of the condition of the damages of SJB 9239R, The motor car was damaged at rear of the Rear bumper, no one was injure on this accident.

DECLARATION

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

X



Policyholder's Signature
Date & Time:

henny

Goh Sairk Giam

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

28/12/2017
Reporting Centre Personnel's Signature
Name: *Pooi W...*
NRIC/FIN No.:

Claim Handling

Accident MT/0975520

Policy No.	5087118746	Vehicle No.	GBB2371G	GST Registration No.	
Policyholder Name	ADEMCO (FAR EAST) PTE LTD			Policyholder NRIC	
Product Code	FLEET INS/RANCE	Cover Type	Comprehensive	Loading	
Contact No.(Mobile)	96898860	Contact No.(Office)	63053009	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	Private Hire	Not available

Accident Details

Report Date	28/12/2017 16:23	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head
Date of Accident	28/12/2017	Time of Accident hh:mm	10:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	TAMPINES AVE 10 ENTER TO TPE TOWARDS CTE/SLE				

Benefits

Excess

Own damage Excess	600.00	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	Yes	GST Registration Date	01/04/1994
GST Registration No.	M200274849	GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	315 OUTRAM ROAD #10-06	Address 2	TAN BOON LIAT BUILDING	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5087118746		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	
Unnamed driver Name	GOH SAIK GUAN	Driver NRIC	S1826516D	Driving Experience	
Register Date of Driver License	26/03/1992	Driver Age	50	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1	BLK 752 #06-90	Address 2	PASIR RIS STREET 71	Post Code	
Address 4		Address Type	Foreign address		
Unit No.	06-90				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	GBB2371G	Driver Insurer Company	

Declaration

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

Claim 001 OD-MX

Next

Claim Type *	OD-MX	Insured Name	ADEMCO (FAR EAST) PTE LTD	Insured NRIC	
Contact No.(Mobile)	NIL	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address		OI Vehicle Number	GBB2371G	TP Vehicle Number	
Claim Description	GBB2371G / SJB9239R ON 28-Dec-2017				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GIA report	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	
Date Registered	28/12/2017 16:37	Claim Close Date		Total Loss but Repaired	
Report Taken By	ROSLI WAHAB	Workshop Repairer			

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/0975520	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	28/12/2017 16:38
Path *		Category *	Confidential
		Urgency	Normal

Browse Clear Please Select

ACCIDENT STATEMENT

ACCIDENT DATE: 28/12/2017 (DD/MM/YYYY), TIME: 10.00 (HH:MM)

LOCATION: TPE Tampine Ave 10 enter to TPE toward CTE/SLE

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: CBB 2371 G
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5087118746
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: HYUNDAI
 f) TYPE: SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS
 g) VEHICLE CATEGORY: PRIVATE / COMMERCIAL / MOTORCYCLE
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: Ademco (Far East) Pte Ltd (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 19970631N CONTACT: 8305 3600
 c) ADDRESS: 315 Cullum Rd #10-06
Singapore 69074

* CONTINUE TO 3, d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: GOH SAIK GUAN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 826616D CONTACT: 96898866
 c) ADDRESS: BLK 952 Pasir Ris St. 11 #06-90
S'pore 610752

* d) DATE OF BIRTH: 11/11/1967 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) DATE OF DRIVING LICENCE: 26/03/1992

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. c) WEATHER CONDITION: CLEAR / RAINING / OTHERS

d) ROAD SURFACE: DRY / WET / OTHERS

6. WAS ANYBODY INJURED (YES / NO)

7. c) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SJB 9239R MODEL: TOYOTA
 b) DRIVER'S NAME: TAN LAY HONG LUCY
 c) NRIC/FIN/PASSPORT: S1578564J CONTACT: 96700215

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SJB 9239R MODEL: TOYOTA
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

No of passengers
(Including driver)
(1)

No of passengers
(Including driver)
(1)

No of passengers
(Including driver)
()

Email: andrew.goh@ademiosecurity.com

fax: 11000

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1826616D



Name

GOH SAIK GUAN

吴锡源

Race

CHINESE

Date of birth

11-11-1967

Sex

M

Country/Place of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



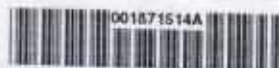
Licence Number S1826616D

Name

GOH SAIK GUAN

Birth Date: 11 Nov 1967

Issue Date: 30 Jun 2010



5659668



NRIC No. S1826616D



Date of issue

14-10-2016

Address

APT BLK 752 PASIR RIS STREET 71
#06-90
SINGAPORE 510752

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

Class 3 Motor Cars - < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg 26 Mar 1992



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 : 5087116746

Cover : Comprehensive

- | | |
|--|-----------------------------|
| 1. Index mark and Registration Number of Vehicle | : G882371G |
| Chassis Number | : KMFWBH7JR9U095523 |
| 2. Name of Policyholder | : ADEMCO (FAR EAST) PTE LTD |
| 3. Effective Date of Insurance | : 01 Jan 2017 |
| 4. Expiry Date of Insurance | : 31 Dec 2017 |

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 business or profession.
- (b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) 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)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: N/A
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 : NEWSTATE STENHOUSE (S) PTE LTD (00000690452)

Date of Issue : 23 Dec 2016 10:07 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive