

NATIONAL Assessment Centre Services

(wef. 1 Jan 09)

MMA 11800 S224

Date In: 11/11/18 12:01	Job description	Date & Time Completed	Done by
Ref No: NA/LPC 18000655164	SAS e-filing		
Veh No: SKH 9693A	E-mail (within 5hrs, A/C 2hrs)		
D.O.A: 10/11/18 14:20	i-Motor Claim Form		
OD: <input checked="" type="checkbox"/> 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: YM 2735 E	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

Claimant's Particulars :-	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30)	Inc Bill	Add Bill
Contact No:	2) DA: Damage Assessment (\$100); INC (\$40)		
Damaged Portion:	3) TP: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2009)		
	6) TR: Re-inspection \$75		
	7) N1: Idao DA + SMRI Survey \$160		
	8) NTUC Additional Services -		
	ON:		
	*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: Idao Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

Auditors' Comments :-

at 1: -

at 2 / 3: -

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	11/01/2018 12:01
Date Of Accident	10/01/2018 14:20
Exact Location Of Accident	YEW TEE MRT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH8693A
Insured/Policyholder	
Name Of Registered Owner	TAN YI LING EVELYN
NRIC No	S8228053G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97944676
Alternative Phone No	OFFICE-97944676

Vehicle Particulars

Manufacturer	BMW
Model	316I
Exact Purpose for which vehicle was being used at time of accident	PARKED VEHICLE
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z16VP05008512
Cover Note Number	-

Driver

Name of Driver	LIM JUN HEE ADAM (LIN JUNXI ADAM)
NRIC No	S8323549G
Date Of Birth	02/08/1983
Occupation	INDOOR
Date Of Driving Pass	31/10/2003
Driving Experience	14 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97944676
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 630 JURONG WEST ST 65 #10-412
Postcode	640630
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	RAINING
Road Surface	WET

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?	
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 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	YN2735E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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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1. Please report **correctly** the details of the accident to speed up the claims process.
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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:

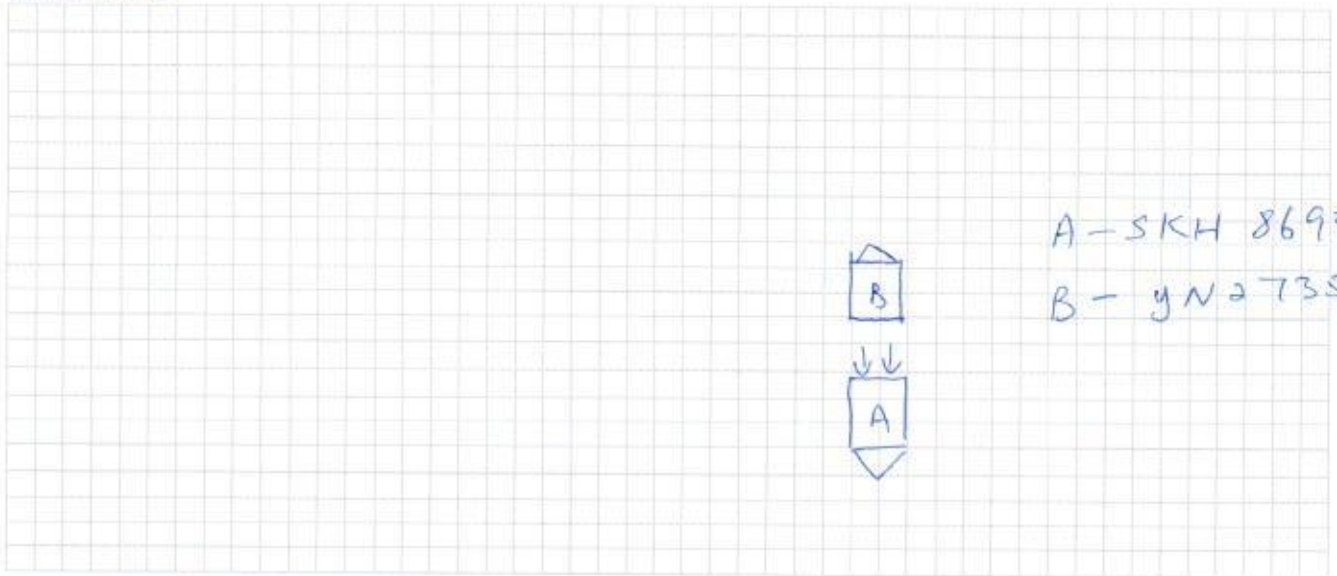


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 10/01/2018 at 2.21pm, I parked my car (A) at the Yew
 Tee MRT. Suddenly vehicle B reversed and hit on my
 rear portion.

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.:

Date of Accident: 10/01/2018	Accident Time: 2.21 pm	
Vehicle (A) No: SKH 8693A	Make Model: BMW	
Location: Jew Tee MRT		
Owner Name: Tan Yi Ling Evelyn		
Owner Address: BIK 630 Jurong West St 65 #10-412 S640630		
Owner NRIC: S8228053G	Email:	
HP:	Home:	Office:
Insurance Company: Lompac Insurance Bhd (Comprehensive / Third Party / Third Party Fire & Theft)		Insurance Policy No: 216VP05008512
Driver Name: Lim Jun Hee		
Driver NRIC: S8323549G	Date of Birth: 2/8/1983	
Driver Contact No: 97944676	Occupation: indoor	
Driving License Pass Date: 31/10/2003	Relationship With Owner: husband	

Claiming Under: (Own Damage Claim / Third Party Claim / Reporting Only)

Weather Condition: (Clear / Raining / Drizzling / After Rained)

Road Surface: (Wet / Dry)

Damage Portion of Vehicle(A): Rear / Front / Right Side / Left Side / Chain Collision

Anyone Injured: YES / <u>NO</u>	Name:
Police Report: YES / <u>NO</u>	If YES, Where:
Passenger In Vehicle (A):	
Witness Name:	NRIC: HP:

Vehicle (B) No: UN 2735E	Vehicle (C) No:
Driver Name:	Driver Name:
Driver NRIC:	Driver NRIC:
Contact No:	Contact No:
Insurance:	Insurance:
Damage portion of vehicle(B):	Damage portion of vehicle(C):

Vehicle (D) No:	Vehicle (E) No:
Driver Name:	Driver Name:
Driver NRIC:	Driver NRIC:
Contact No:	Contact No:
Insurance:	Insurance:
Damage portion of vehicle(D):	Damage portion of vehicle(E):

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8323549G



Name

LIM JUN HEE, ADAM
(LIN JUNXI, ADAM)

林俊喜

Race

CHINESE

Date of birth

02-08-1983

Sex

M

S8323549-G

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence No: S8323549G

LIM JUN HEE, ADAM
(LIN JUNXI, ADAM)

Pass Date: 02 Aug 1983

Valid Date: 31 Oct 2003



4514288

NRIC No. S8323549G



Date of issue

05-01-2010

Address

APT BLK 630 JURONG WEST STREET 65
#10-412
SINGAPORE 640630

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

31 Oct 2003

NP 428A





(Incorporated in Malaysia)

Singapore Office: 100, Beach Road #19-00, Shaw Tower, Singapore 189702.

Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-C

MX1

CERTIFICATE OF INSURANCE

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) THE REPUBLIC OF SINGAPORE.
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE).
ROAD TRANSPORT ACT 1987 (MALAYSIA).
MOTOR VEHICLES (THIRD PARTY RISK) RULES, 1959 (MALAYSIA).

Certificate No. : Z16VP05008512

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

BMW 316I 1.6
- SKH8693A

2. Name of Policy Holder

TAN YI LING EVELYN

3. Effective Date of the Commencement of Insurance
for the purposes of the Act

25/01/2016

4. Date of Expiry of Insurance

24/01/2017

5. Persons or Classes of Persons entitled to drive* (For certificate references MX1, see overleaf)
(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. Limitation as to use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRAIL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION THE MOTOR TRADE.

Excess : S\$ 600.00 (SECTION 1) INSURED / NAMED DRIVERS
S\$ 1,200.00 (SECTION 1) UNNAMED DRIVERS
S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS
S\$ 100.00 WINDSCREEN EXCESS

Condition : ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS

* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

H.P. Owner : UNITED OVERSEAS BANK LIMITED

CHIEF EXECUTIVE
(Singapore Branch)

User ID: FINANCIALHUB2
Date Issued: 13/01/2016