

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: 22/01/08	Job description	Date & Time Completed	Done by
Ref No: NA/CFI18001259/13	SAS e-filing		
Veh No: SKV9014E	E-mail (within 8hrs, A/C 2hrs)		
DOA 19/01/18 2100	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: (Tel:	Fax:
TP Particulars:	Veh No: SHC 6999T	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:-	Date & Time Completed	Done by
(INC hotline: 6788 6616)		
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NA1800428	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		1st Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30			
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)			
Cat. 1:	6) TR: Re-inspection \$75			
Cat. 2/3:	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	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 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	22/01/2018 12:58
Date Of Accident	19/01/2018 21:00
Exact Location Of Accident	DAIRY FARM RD TWDS UPP BUKIT TIMAH RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV9014E
Insured/Policyholder	
Name Of Registered Owner	LIM AH HO @FELICIA LIM
NRIC No	S1135988D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96332921
Alternative Phone No	OTHERS-96332921

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3017941700
Cover Note Number	

Driver

Name of Driver	LIM AH HO @FELICIA LIM
NRIC No	S1135988D
Date Of Birth	27/11/1955
Occupation	INDOOR
Date Of Driving Pass	11/03/1978
Driving Experience	39 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96332921
Fax Number	
Contact Number	OTHERS-96332921
Email Address	NOEMAIL

Address	BLK 26 TECK WHYE LANE #06-172
Postcode	680026
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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?	YES
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	SHC6999T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	LIM AH HO @FELICIA LIM
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Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

BACK & NECK

SKV9014E

YES

NO


SKETCH PLAN


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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:

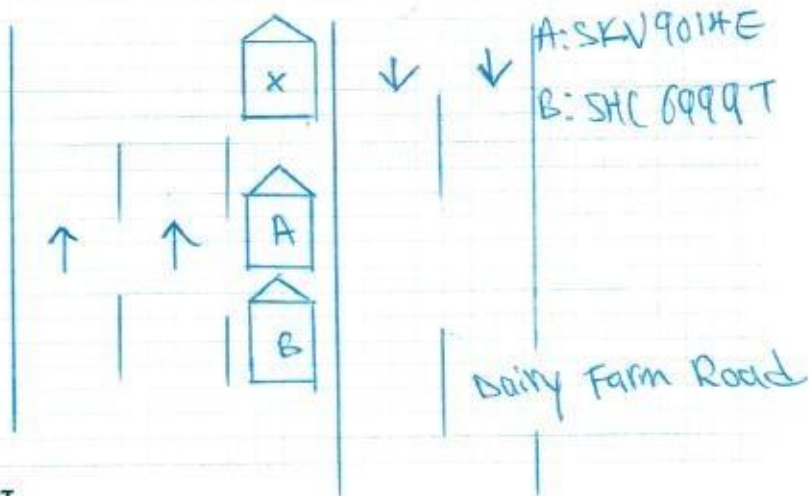
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

 22/01/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

township V22 of Trench Road



Refer Attach Statement

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

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


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

- Describe Circumstance of the Accident.

ON THE DAY 19.01.18 @2100HRS, I WAS DRIVING MY VEHICLE SKV9014E, ALONG DAIRY FARM ROAD, TOWARDS UPPER BT TIMAH ROAD, ON THE RH LANE.

VEHICLES AHEAD WAS STATIONARY DUE TO TRAFFIC LIGHT RED. MY VEHICLE WAS STATIONARY AS WELL.

SUDDENLY I FELT AN IMPACT FROM THE REAR AND NOTICED VEHICLE B(SHC6999T) HAD COLLIDED ONTO THE REAR PORTION OF MY VEHICLE.

DUE TO THE IMPACT, MY VEHICLE WAS DAMAGED ON THE REAR PORTION
VEHICLE B WAS DAMAGED ON THE FRONT PORTION

I FELT UNCOMFORTABLE AFTER THE ACCIDENT, WILL BE SEEKING FOR MEDICAL TREATMENT.

MY VEHICLE NO PASSENGER ON BOARD
VEHICLE B GOT 1 FEMALE PASSENGER ON BOARD

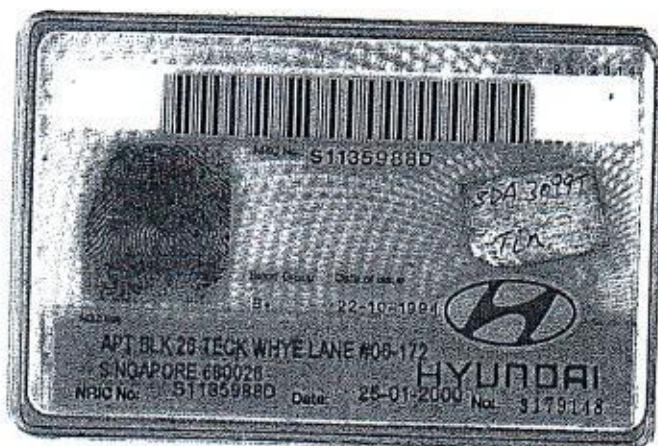
DAMAGES FOUND ON VEHICLE A, B



Driver's Signature
Saturday, January 20, 2018



4633 2921



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 No.	DMPCSN3017941700	Engine No : 215B4021732 Chassis No: RU11101731
1. Index Mark and Registration Number of Vehicle	SKV9014E	
2. Name of Policy Holder	LIM AH HO @ FELICIA LIM	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	28 FEBRUARY 2017	NAMED DRIVERS EX SECT. I\$500.00 ADDITIONAL EX OTHER THAN NAMED DRIVERS: EX SECT. I - AGE <= 25.....\$3,000.00 EX SECT. I - AGE >= 26.....\$500.00 * AGE AS AT DATE OF ACCIDENT
4. Date of Expiry of Insurance	27 FEBRUARY 2018	EX ON WINDSCREEN\$100.00
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 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 FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS.
THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING FACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS/THEFT) WILL BE DOUBLED.

ONE TIME WAIVER OF EXCESS FOR THE FIRST \$500 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

HIRE PURCHASE CO. : UNITED OVERSEAS BANK LIMITED AS HP OWNER

* 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).
Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:

Authorised Officer

Authorised Signatory

Enquire Transfer Fee

Vehicle Details

Vehicle No. :	SKV9014E
Vehicle Type :	P10 - Passenger Motor Car
Vehicle Attachment 1 :	No Attachment
Vehicle Scheme :	Normal
Vehicle Make :	HONDA
Vehicle Model :	VEZEL 1.5X CVT
Chassis No. :	RU11101731
Propellant :	Petrol
Engine No. :	L15B4021732
Engine Capacity :	1496 cc
Maximum Power Output :	96.0 kW (128 bhp)
Maximum Laden Weight :	1465 kg
Unladen Weight :	1190 kg
Year Of Manufacture :	2015
Original Registration Date :	07 Oct 2015
Lifespan Expiry Date :	-
COE Category :	A - Car up to 1600cc & 97kW (130bhp)
Quota Premium :	\$61,000.00
COE Expiry Date :	06 Oct 2025
Road Tax Expiry Date :	06 Apr 2018
PARF Eligibility Expiry Date :	06 Oct 2025
Inspection Due Date :	06 Oct 2018

Intended Transfer Date: 20 Jan 2018

CO2 Emission: 117.00 (g/km)

CEV/VES Rebate Utilised Amount: \$10,000.00

CO Emission: -

HC Emission: -

NOx Emission: -

PM Emission: -

The current road tax expiry is 06 Apr 2018. You may renew the road tax from 07 Jan 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 06 Apr 2018, late renewal fee(s) will be imposed. Please use [Enquire Road Tax Payable](#) to check on the late fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable (From 07 Apr 2018 to 06 Oct 2018)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	341.00	-	341.00
Total Amount Payable:			366.00

Amount Payable (From 07 Apr 2018 to 06 Apr 2019)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	682.00	-	682.00
Total Amount Payable:			707.00

You may print this page for reference.

OK Print