

# NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: 22/01/18	Job description	Date & Time Completed	Done by
Ref No: NA/INC18001266/13	SAS e-filing		
Veh No: PC274X	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 22/01/18 0730	i-Motor Claim Form	MT/0978943	
OD / TP: <u>Reporting Only</u>	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: UNKNOWN	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

NA1800470	Invoice Preparation Checklist		Ant (\$)	Ant (\$)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		1st Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	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:-			
	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: Idac Mobile 30			
Auditors' Comments:-	Invoice dated	Fee Charged		
Cat. 1:	Invoice dated	Fee Charged		
Cat. 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 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 15:36
Date Of Accident	22/01/2018 07:30
Exact Location Of Accident	TAMPINES ST 12 EXIT OF TAMPINES PRI SCHOOL GATE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC274X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HARUDIN BIN ABDOL HAMID
NRIC No	S0213202H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96721491
Alternative Phone No	OTHERS-96721491

### Vehicle Particulars

Manufacturer	GOLDEN DRAGON
Model	-
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	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	5079171284-01
Cover Note Number	

### Driver

Name of Driver	HARUDIN BIN ABDOL HAMID
NRIC No	S0213202H
Date Of Birth	15/06/1952
Occupation	OUTDOOR
Date Of Driving Pass	23/01/1978
Driving Experience	39 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96721491
Fax Number	
Contact Number	OTHERS-96721491
Email Address	NOEMAIL

Address	BLK 92 BEDOK NORTH AVE 4 #02-1497
Postcode	460092
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	SIDE SWIPE
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)	2
Passenger 1	NAME: : MUHAWINAH GENDER: : FEMALE

#### 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

I WAS EXITING MY VEH FROM TAMPINES PRIMARY SCHOOL GATE AT TAMPINES ST 12. MY VEH WAS STATIONARY, SUDDENLY VEH B FROM MY RIGHT LANE SQUEEZE HER VEH AND GRAZED ONTO MY VEH. AFTER THE IMPACT I ASKED HER TO REVERSED HER VEH, SO I CAN MOVED OUT AND TOLD HER TO WAIT OUTSIDE. I'M WAITING THE DRIVER OUTSIDE THE MAIN RD BUT THE DRIVER OF VEH B MAKE A RIGHT TURN AND DRIVE OFF. I HAVE ATTACHED THE VIDEO FROM THE SCHOOL CCTV.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
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

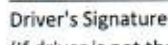
### IMPORTANT NOTICE

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 liability**.
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:

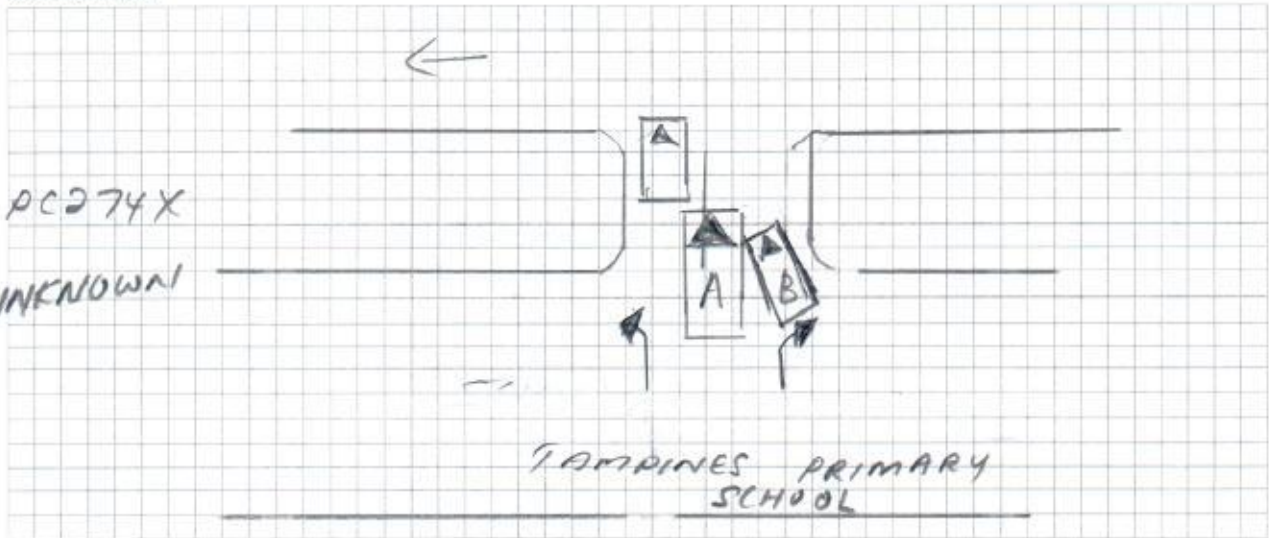
  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

SKETCH PLAN

→ TAMPINES ST 12

A- PC274X  
B- UNKNOWN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s refer to the 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:

 22/01/18

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



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0213202H



**HARUDIN BIN ABDOL HAMID**

Race  
**MALAY**

Date of Birth  
**15-06-1952**

Sex  
**M**

Country of Birth  
**SINGAPORE**

10378



NRIC No. **S0213202H**



Blood Group **B+** Date of issue **16-06-1993**

**APT BLK 82 BEDOK NORTH AVENUE 4 #02-1407**  
**SINGAPORE 460082**  
NRIC No: **S0213202H** Date: **02-08-2002** No. **4815523**

REPUBLIC OF SINGAPORE DRIVING LICENCE

**S0213202H**

**HARUDIN BIN ABDOL HAMID**

Date of Birth: **15 Jun 1952**

Issue Date: **27 Dec 2002**



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS:

Class	Description	Issue Date
Class 2B	Motorcycles <= 250 CC	07 Jan 1977
Class 2A	Motorcycles between 251 CC and 400 CC	07 Jan 1977
Class 2	Motorcycles > 400 CC	07 Jan 1977
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	09 Mar 1977
Class 4	Heavy motor cars and motor tractors > 2500 kg	12 Jan 1978

S / No. 9000259462

S0213202H

License No: S0213202H

NP 428A

Land Transport Authority


**VOCATIONAL LICENCE**

Licence No: **S0213202H**

Name: **HARUDIN B ABDOL HAMID**


Issue Date: **14/12/2009**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	23/01/1971



Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.

Date of Accident

Vehicle No. (For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5079171284-01	HARUDIN BIN ABDOL HAMID	S0213202H	GBS	Comprehensive	PC274X	PC274X	27/04/2017	26/04/2018



## Claim Handling

## Accident MT/0978943

Policy No.	5079171284-01	Vehicle No.	PC274X	GST Registration No.	
Policyholder Name	HARUDIN BIN ABDOL HAMID			Policyholder NRIC	S02
Product Code	BUS INSURANCE	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	96721491	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
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(%)	15	Private Hire	No

## ▼ Accident Details

Report Date	22/01/2018 19:31	Accident Report Within 24 hrs	Yes	Accident Type	Side
Date of Accident	22/01/2018	Time of Accident hh:mm	07:30	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	TAMPINES ST 12 EXIT OF TAMPINES PRI SCHOOL GATE				

## ▼ Benefits

## ▼ Excess

Own damage Excess	3,000.00	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	Yes
Modification History			

## ▼ Policyholder Mailing Address

Address 1	BLK 92 #02-1497	Address 2	BEDOK NORTH AVENUE 4	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	4601
Unit No.	02-1497	Related Policy Number	5079171284-01		

## ▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	HARUDIN BIN ABDOL HAMID	Driver NRIC	S0213202H	Driver DOB	15/01/1978
Register Date of Driver License	23/01/1978	Driver Age	65	Driving Experience	39
Contact No.(Mobile)	96721491	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 92	Address 2	BEDOK NORTH AVENUE 4	Address 3	SINGAPORE
Address 4		Address Type	Foreign address	Post Code	4601
Unit No.	#02-1497				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		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 **New**

Claim Type *	OD-MX	Insured Name	HARUDIN BIN ABDOL HAMID	Insured NRIC	S02
Contact No.(Mobile)	96721491	Contact No.(Home)	64485802	Contact No.(Office)	NIL
Email Address		OI Vehicle Number	PC274X	TP Vehicle Number	UNK
Claim Description	PC274X / UNKNOWN ON 22 Jan 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Rec
Date Registered	22/01/2018 19:35	Claim Close Date		Date Received	22/01/2018
Report Taken By	ROSILINDA	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

## Attachment

1/22/2018

Claim Handling(accident reporting Claim Task 001 OD-MX)

Accident No.

MT/0978943

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

22/01/2018 00:00

Path \*

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen









Choose File

No file chosen

Message Read

Category *		Confidential	Urgency *
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:35	SAS	Normal	SAS 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:35	NRIC/ Driving License	Normal	NRIC/ Driving License
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:35	Photos	Normal	Photos 2018

Video List

Uploaded By/Date	Folder Date	File Name	Source
		<div>Display in New Window</div>	<div>Scan and uploading</div>