

# NATIONAL Assessment Centre Services

Date In: 28/01/2018 09:39  
 Ref No: N/A/18001532/V  
 Veli No: 551 4635 D  
 D.O.A: 28/01/2018 09:45  
 OD / TP / Reporting Only

Job description: SAS e-illing  
 E-mail (with 3hrs, AIC 3hrs)  
 I-Motor Claim Form  
 I-Motor W/O (with 100 hrs, TP 3hrs)  
 I-Photo Uploaded  
 Assessment/Survey Report  
 Ass't Report by Fax/Hand to Owner/Wksp

Date & Time Completed: 28/01/2018 16:26  
 Done by: mtk979497

TP Insurer:

Preferred Wksp / INC Assign Wksp / OW:

TP Particulars: Yeli No: SMB 1453E  
 Owner / Driver: ( ) INC ( ) / Non-INC ( )  
 Policy No: ( ) Period: ( ) Cover Type: ( )  
 Confirmed by: ( ) Date: ( )  
 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: ( ) Work-in Customer / Customers Information strictly Confidential & Strictly NO refer of repeller.  
 ( ) Total Loss Case to e-mail Insurer URGENTLY.  
 Drive-In ( ) / Towed-In ( ) Invoice: YES ( ) / NO ( ) Towing Co: ( )

Remarks: UNO ball line 5788 0016  
 1) Apply for Transport Allowance ( ) / Courtesy Car ( )  
 2) QC Check / Post Repair Inspection ( )  
 3) Upload Resurvey Photo (Repair Cost > \$3000) ( )

Injury: ( )

Date Time: ( )

Actions: ( )

N/A/1800597

Human's Particulars: ( )  
 Driver/Owner: ( )  
 Contact No: ( )  
 Damaged Portion: ( )

C. Checked by (Engi-In-Charge): ( )

Comments: ( )

Invoice Preparation Checklist:

1) AR: Accident Reporting (\$30)	17
2) DA: Damage Assessment (\$100)	INC (\$40)
3) TP: Towing Fee	\$10/\$40
4) PT: Follow-Through Survey	\$120
5) PT: Follow-Through Survey (Resurvey)	\$20
6) TR: Re-inspection	\$120
7) NI: 12v DA + SMART Survey	\$160
8) NTUC Additional Services	
9) NI: 12v DA + SMART Survey	\$160
10) NI: 12v DA + SMART Survey	\$160
11) NI: 12v DA + SMART Survey	\$160
12) NI: 12v DA + SMART Survey	\$160
13) NI: 12v DA + SMART Survey	\$160
14) NI: 12v DA + SMART Survey	\$160
15) NI: 12v DA + SMART Survey	\$160
16) NI: 12v DA + SMART Survey	\$160
17) NI: 12v DA + SMART Survey	\$160
18) NI: 12v DA + SMART Survey	\$160
19) NI: 12v DA + SMART Survey	\$160
20) NI: 12v DA + SMART Survey	\$160

Invoice dated: ( )  
 Issued by: ( )  
 Not Charged: ( )  
 Date: ( )

## 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	25/01/2018 09:39
Date Of Accident	24/01/2018 09:45
Exact Location Of Accident	JALAN BUKIT MERAH(BUKIT MERAH VIEW JUNCTION)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGT4635D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MOMOTAN88
Co Reg No	53345412C
Email Address	TANZHIHONGKELVIN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98551347
Alternative Phone No	OFFICE-98551347

<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	WISH
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	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094062802
Cover Note Number	

<b>Driver</b>	
Name of Driver	TAN ZHI HONG ,KELVIN
NRIC No	S8831220A
Date Of Birth	27/08/1988
Occupation	INDOOR
Date Of Driving Pass	18/05/2009
Driving Experience	8 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98551347
Fax Number	
Contact Number	OTHERS-98551347
Email Address	TANZHIHONGKELVIN@GMAIL.COM



Address	BLK 128 BUKIT MERAH VIEW #18-28
Postcode	150128
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 - MAJOR/MINOR RD
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?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMB1453E
Vehicle Make/Model/Colour	SMRT
Details Of Properties	
Vehicle Category	BUS
Name of Driver	YEOH KIEN SENG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## SKETCH PLAN

### IMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
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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.

Policyholder's Signature

Date & Time: 24/01/18  
1654



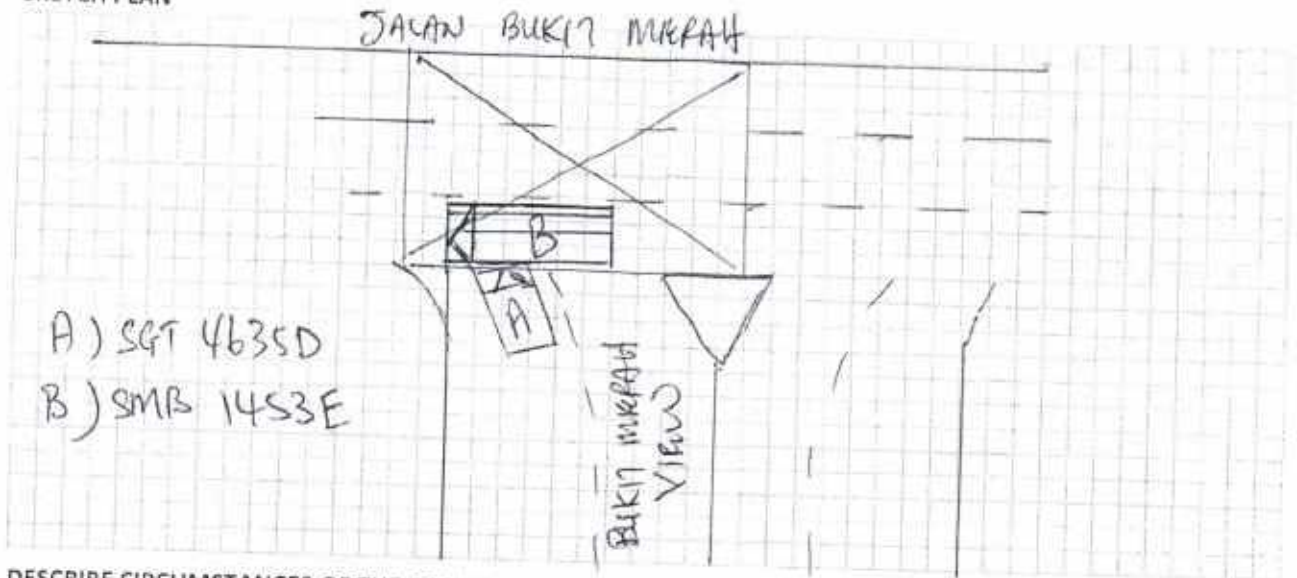
Driver's Signature  
(If driver is not the policyholder)

Date & Time: 24/01/18  
1654

25/01/2018  
Reporting Centre Personnel's Signature  
Name:

NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24/01/18@0945, Self was filtering out from Bukit Merah view onto Jalan Bukit Merah. Found SMRT bus was stopping inside yellow box and blocking my right of way. I drove forward an inch to filter out further however the bus started to move off and swerve to his left and causes scratches to my car right bumper causing damages. The bus driver did not stop the vehicle as he did not realise the damage caused by him and continue to move to the next bus stop outside Kim Tian. Confronted the driver and photos were taken and also exchange particulars.

of the bus

Driver acknowledge and admitted his mistake for damaging my car.

## DECLARATION

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

Policyholder's Signature  
Date & Time: 24/01/18  
1700



Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 24/01/18  
1700

25/01/2018  
Reporting Centre Personnel's Signature  
Name: Reddi Arora  
NRIC/FIN No.:



## Claim Handling

Accident MT/0979497

Policy No.	5094062802	Vehicle No.	SGT4635D	GST Registration No.	
Policyholder Name	MOMOTAN88			Policyholder NRIC	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	
Contact No.(Mobile)	98551347	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFE	<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	No

➤ **Accident Details**

Report Date	25/01/2018 16:20	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Major
Date of Accident	24/01/2018	Time of Accident hh:mm	09:45	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JALAN BUKIT MERAH(BUKIT MERAH VIEW JUNCTION)				

➤ **Benefits**

➤ **Excess**

Own damage Excess	2,000.00	Additional Excess	0.00	Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

➤ **GST Registered Information**

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

➤ **Policyholder Mailing Address**

Address 1	BLK 129 #1B-2B	Address 2	BUKIT MERAH VIEW	Address 3	
Address 4	SINGAPORE 150128	Address Type	Singapore address	Post Code	
Unit No.	1B-2B	Related Policy Number	5094062802		

➤ **OI Driver Info**

Driver Name	TAN ZHI HONG, KELVIN	Driver Type	Main Driver	Driver DOB	
Unnamed driver Name		Driver NRIC	S8831220A	Driving Experience	
Register Date of Driver License	18/05/2009	Driver Age	29	Contact No.(Home)	
Contact No.(Mobile)	98551347	Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.		Driver Vehicle No.	SGT4635D	Driver Insurer Company	
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No				

Declaration

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

Claim 001

New

Claim Type *	OD-MX	Insured Name	MOMOTAN88	Insured NRIC	
Contact No.(Mobile)	98551347	Contact No.(Home)		Contact No.(Office)	
Email Address	YARRASUL@GMAIL.COM	OI Vehicle Number	SGT4635D	TP Vehicle Number	
Claim Description	SGT4635D / SMB1453E ON 24 Jan 2018				
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	
Date Registered	25/01/2018 16:23	Claim Close Date		Date Received	
Report Taken By	ROSLI WAHAB				

☐ Print AK letter

Save Submit

## Attachment

Accident No.	MT/0979497	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	25/01/2018 16:26
Path *		Category *	Confidential Urgency
		Browse... Clear	Please Select

1999

Attachment List

Video List

Display in New Window

### Scan and uploading

86004

ACCIDENT STATEMENT

ACCIDENT DATE: 24 / 01 / 2018 (DD/MM/YYYY), TIME: 09 : 45 (HH:MM)

LOCATION: JALAN BUKIT MERAM (HINDI BUKIT MERAM VIEW JUNCTION)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SGT 4635D  
b) INSURANCE COMPANY: INCOME  
c) POLICY NUMBER: 5094062802  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: TOYOTA WISH  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE  
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: TAN ZHI HONG / KELVIN (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S8831220A CONTACT: 98551347  
c) ADDRESS: 128 BUKIT MERAM VIEW #18-28 S150128

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: \_\_\_\_\_ (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 27 / 02 / 1988 (DD/MM/YYYY)

\* e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 18/05/09

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES/NO)

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

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMB 1453E MODEL: SMRT BUS  
b) DRIVER'S NAME: YEON KIEN SENG (23439)  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

email: tanzhihongkelvin@gmail.com

fax: \_\_\_\_\_

video \_\_\_\_\_



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8831220A



Name

TAN ZHI HONG, KELVIN

陈 志 鸿

Race

CHINESE

Date of birth

27-08-1988

Country/Place of birth

SINGAPORE

Sex

M



S8C1181



NRIC No. S8831220A



Date of issue

30-08-2017

Address

APT BLK 128 BUKIT MERAH VIEW  
#1B-28  
SINGAPORE 150128

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence No.

S8831220A

TAN ZHI HONG, KELVIN

Birth Date: 27 Aug 1988

Issue Date: 09 Oct 2017



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

EFFECTIVE DATE

Class 3: Motor cars with unladen weight  $\leq 3000\text{kg}$  with  $\leq 7$  passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq 2500\text{kg}$  18 May 2009

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: S094062802

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SGT4635D  
Chassis Number : ZNE100359070
  2. Name of Policyholder : MOMOTAN88
  3. Effective Date of Insurance : 07 Sep 2017
  4. Expiry Date of Insurance : 06 Sep 2018
  5. Persons or Classes of Persons entitled to drive it
    - (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 it
    - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.
- This Policy does not cover**
- (a) Use for racing, pace-making, reliability trial or speed-testing.
  - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
  - (c) Use for any purpose in connection with the Motor Trade.
- # 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\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TAN ZHI HONG, KELVIN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: RICARDO CARS PTE LTD
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 : PARKWAY INSURANCE AGENCY PTE. LTD. (00000573087)  
Date of Issue : 07 Sep 2017 13:08 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive