

NATIONAL Assessment Centre Services

(wef 1 Jan 05) MNA18012543-01

Date In: 25/1/18 - 16:04	Job description	Date & Time Completed	Done by
Ref No: NA/TM21F001369/24	SAS e-filing		
Veh No: Sku34337	E-mail (within 8hrs, AIC 2hrs)		
D.O.A : 13/12/17 - 06:00	i-Motor Claim Form		
OD / TP / 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: 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% P: 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

NA1800581	Invoice Preparation Checklist	Am't (\$) In Bill	Am't (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
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		
QC Checked by (Engr-In-Charge):	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 / Tpl 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 \$0		
	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	25/01/2018 16:04
Date Of Accident	13/12/2017 06:00
Exact Location Of Accident	JUNC SERANGOON CENTRAL & UPPER SERANGOON RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV3433T
Insured/Policyholder	
Name Of Registered Owner	ASCOTT CAR RENTAL PTE LTD
Co Reg No	201431143G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81333106
Alternative Phone No	OFFICE-81333106

Vehicle Particulars

Manufacturer	SUZUKI
Model	SWIFT 1.3 AT
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	

Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	17-MI001390-R00
Cover Note Number	

Driver

Name of Driver	TAUFIK BIN AMINALLAH
NRIC No	S8517200Z
Date Of Birth	30/05/1985
Occupation	OUTDOOR
Date Of Driving Pass	27/11/2014
Driving Experience	3 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	+65-96888551
Fax Number	
Contact Number	OFFICE-96888551
EMail Address	NOEMAIL

Address	BLK 445A FERNVALE ROAD #21-405
Postcode	791445
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	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?	
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?	YES
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - G/20180125/2087.

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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	
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.



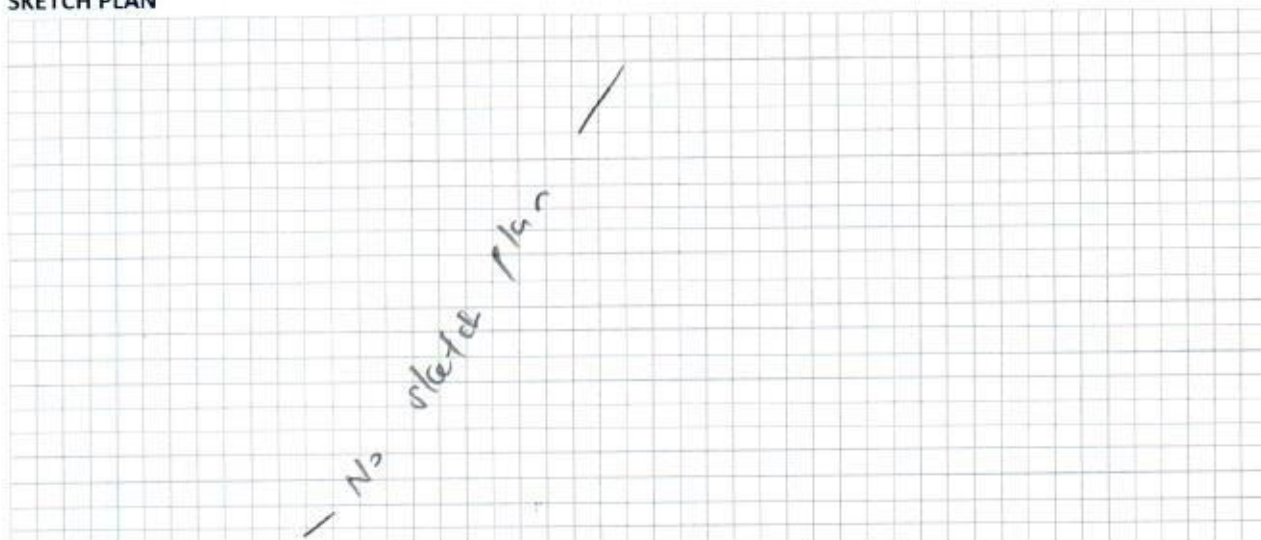
Policyholder's Signature
Date & Time:

on behalf of
of driver

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

Refer to police report - 4/20180125/2087.

DECLARATION

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

Policyholder's Signature
Date & Time:



On behalf
of driver

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

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



ASCOTT

CAR RENTAL PRIVATE LIMITED

169 KAKI BUKIT AVE 1 SHUN LI INDUSTRIAL PARK #01-00 SINGAPORE 416019

ROC: 201431143G

RENTAL AGREEMENT

OFFICE : 8145 0011 / 8145 0022 / 8145 0033

RECOVERY NO: 8145 0011

EMAIL :

INVOICE :

DATE :

Company Name

Company Address

Hirer's Name TAUFIK BIN AMINALLAH

Hirer's Address BLK 445A FERNVALE ROAD #21-405 5791445

NRIC/Passport No. S8517200Z

Driving License No. S8517200Z

Local Contact 96888551

Country Of Issue SIN
Issue By TP

DOB : 30-May-85

Left Side



Back



Right Side



Front



Top



VEHICLE DETAILS

Model SWIFT
Licence Plate SKV3433T
Colour ORANGE

* Rates do not include Petrol.

Taken

E	1/8	1/4	3/8	1/2	5/8	3/4	7/8	F
---	-----	-----	-----	-----	-----	-----	-----	---

Return

E	1/8	1/4	3/8	1/2	5/8	3/4	7/8	F
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* Every 1/8 of petrol used is chargeable @ \$20 nett.

Remarks : D = Dent S = Scratches C = Chips R = Rust M = Missing

RENTAL DETAILS

Start Date 11-Dec-17 Start Time 4PM
Return Date 13-Dec-17 Return Time 4PM

SALES INVOICE

	RATES	QTY	TOTAL
Rental Amount	100	1	\$100.00
Additional Driver			
Malaysia Usage *Destination : ()			
Rental of GPS			
Rental of P-Plate			
Total Cost Of Rental			\$100.00
Remarks:			
Hirer's Signature			



**SINGAPORE
POLICE FORCE**



G/20180125/2087

1 of 2

POLICE REPORT (NP299)

Report No. G/20180125/2087



Police Station Of Origin
Eunos NPP
629 Bedok Reservoir Road #01-1620
SINGAPORE 470629
Tel No: 1800-4439999

Date/Time Report Made 25/01/2018 14:47		Vide Report No.		Station Diary No. 30	
Name Of Informant CHIA JING CHUAN		Address 27 ANCHORVALE CRESCENT #01-36 SINGAPORE 544657			
ID Type / ID No. NRIC NO / S8943996E		Contact No. Home/Office Mobile 81333106			
Nationality SINGAPORE CITIZEN		Email Address			
Occupation Other administrative clerks (eg public relations clerk)		Sex Female	Age 28	Date of Birth 04/12/1989	Race Chinese
Institution/School Name		Language			
Date/Time Of Incident 13/12/2017 16:00		Location Of Incident 169 KAKI BUKIT AVENUE 1 #01-00 SHUN LI INDUSTRIAL PARK SINGAPORE 416019			

Brief details.

I am working in Ascott Car Rental Pte Ltd.

On the 13/12/2017 at about 1600 hrs, my colleague tried to contact a Taufik Bin Aminallah, who had previously rented a orange color Suzuki Swift (SKV3433T) from my company from the 8/12/2017 at 1600 hrs to 13/12/2017 at 1600 hrs, however, he was uncontactable. On the 15/12/2017, my colleague

Signature Of Officer Recording The Report:  G / Sgt 2 ONG YU XIANG	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 25/01/2018 14:47
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / ASP CHUA KWEE HAO, GARRET Contact No.: 62447200	Classification Of Case:

Authentication Stamp





**SINGAPORE
POLICE FORCE**



G/20180125/2087

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20180125/2087

received a call from Traffic Police who informed that the said vehicle was involved in an accident on the 13/12/2017 and is currently in the Traffic Police compound. On the 25/01/2018 at about 1400 hrs, my colleague went to Traffic Police compound to collect the vehicle. I wish to state that Taufik rented the said vehicle from 8/12/2017 to 11/12/2017 for SGD\$200/- and he called extend the rental on the 11/12/2017, to 13/12/2017 for SGD\$100/-. He has already made the first payment but has not made the second payment. I also wish to state that there was a written agreement between Taufik and my company and the agreement states that he is liable for the damage cost for the vehicle.

I am lodging this report for my company to take civil actions.

Signature Of Officer Recording The Report: 
G / Sgt 2 ONG YU XIANG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
G / Bedok Police Divisional Investigation Branch /
ASP CHUA KWEE HAO, GARRET
Contact No.: 62447200

Signature Of Informant:



Date/Time:
25/01/2018 14:47

Classification Of Case:

Authentication Stamp



SINGAPORE
POLICE FORCE



SIGNATURE

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA18012543 Vehicle Registration No: SLV 3433 T
Name (as shown in NRIC) : Tundile Bin Aminallah NRIC/FIN/Passport No : S85172002
(*Vehicle Driver / ~~Vehicle Owner~~)(*) Please delete as appropriate
Address : Blk 445A Fernvale Rd #21-405 Singapore (79144)
Contact (Tel) : _____ Mobile No. : 96888551
Email Address : _____
Date of Accident : 13/12/17 Time of Accident : 06:00
Place of Accident : Junc Serangoon Central & upper Serangoon Rd
Insurance Company: TMI

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Add in police report - G/20180125/2087.

Policyholder / Driver's Signature
Date:


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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8943996E



Name
CHIA JING CHUAN
(XIE JINGCHUAN)
謝 靖 釗

Race
CHINESE

Date of birth
04-12-1989

Sex
F

Country of birth
SINGAPORE



3646673



NRIC No. S8943996E



Date of issue
08-12-2004

27 ANCHORVALE CRESCENT #01-36
SINGAPORE 544657
NRIC No: S8943996E

Date: 11/08/2017

REPUBLIC OF SINGAPORE DRIVING LICENCE

TAUFIK BIN AMINALLAH

30 May 1985

27 Sep 2012

002109682A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8517200Z

TAUFIK BIN AMINALLAH

توفيق بن امينالله

Race
MALAY

Date of birth
30-05-1985

Country/Place of birth
SINGAPORE

Sex
M

S8517200Z

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	Effective Date
Class 2B	Motorcycles < 200 CC	01 Oct 2003
Class 3	Motor cars < 3000 kg with < 7 passengers, exclusive of the driver; and motor tractors/vehicles < 2500 kg	27 Nov 2014

S/No. 9000214604

Licence No. S8517200Z

NP 428A

5467608

NPIC No. S8517200Z

Date of issue
16-10-2015

Address
APT BLK 445A FERNVALE ROAD
#21-405
SINGAPORE 791445

Tokio Marine Insurance Singapore Ltd.

(Company Reg No: 192300014M) (GST Reg No: M2-0000023-4)
20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046
T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmls@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP
FORM MZ406

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)

Policy No.: 17-MI001390-R00 (Private Motor Car)

- | | | |
|--|---------------------------|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SKV3433T | Chassis No.: JSAEZC11S00550556 |
| 2. Name of Policyholder | ASCOTT CAR RENTAL PTE LTD | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 10/11/2017 | |
| 4. Date of Expiry of Insurance | 06/09/2018 | |

5. **Persons or Class of Persons entitled to drive***
Any person who is driving on the Policyholder's order or with their permission.
The hirer.
Any other person who is driving on the hirer's order or with his/ their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. **Limitations as to use***

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.
Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- 3) Use for the carriage of passengers for hire or reward by any person whom the vehicle is hired.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 2397DDA

Insurance Plan:	Comprehensive Approved Workshop Plan	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Own Damage Claims	SGD 1,500
	Excess-Third Party (Sect II)	SGD 1,500
	Windscreen Excess	SGD 100
Financial Interest:	HERITAGE AUTO ENTERPRISE PTE LTD	