

# NATIONAL Assessment Centre Services

(Int'l & Local)

NAI8014436

Date: 29/01/2018 19:25  
Ref No: NBA/21P1800172/Y  
Veh No: SKZ 9336E  
D.O.A: 29/01/2018 10:55

OD (TP) / Reporting Only

TP Insurer:

Job description	Date & Time Completed	Done by
SAS e-illing		
E-mail (within 2hrs, A/C 2hrs)		
I-Motor Claim Form		
I-Motor W/O (within 2hrs, TP 1hr)		
I-Photo Uploaded		
Assessment/Survey Report		
Ass'l Report by Fax/Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW: (

Tel:

Fax:

TP Particulars: Yeh No: SH 74262

INC ( ) / Non-INC ( )

Owner / Drivers: (

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:

UNB Boline: 5788/0006

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:

Action:

NAI800660

Customer's Requirements:

Driver/Owner:

Police No:

Damaged Portion:

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

Ull (6) 3 Comments:

Ull:

Ull 2/2:

Invoice Preparation Checklist:

	Amount	Unit
1) AR: Accident Reporting (\$30):		
2) DA: Damage Assessment (\$100):	INC (\$50)	
3) TP: Towing Fee	\$40/\$45	
4) FT: Follow-Through Survey	\$130	
5) PT: Follow-Through Survey (Resurvey)	\$10	
For claimant approval INC Only (w/ F10 Jan 2010)		
6) TR: Re-inspection	\$15	
7) NI: (w/ DA + SMRT Survey)	\$160	
8) NTUC Additional Services		
Q11:		
*NI: Courtesy Car / Tpl Allowance	\$5	
*NI: Repair Coordination	\$10	
*NI: Post Repair Inspection	\$15	
*NI: DV / Collect Unsurv Coordination	\$5	
TP (NI) + TP (NI+INC) against INC	\$10	
9) NI: Idm Mobile	\$10	

Invoice dated:

Not Charged

Not Charged

Ull (6) 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	29/01/2018 19:25
Date Of Accident	29/01/2018 10:55
Exact Location Of Accident	CHULIA STREET
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ9336E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN SHIH ERN, JESSICA
NRIC No	S8100584B
Email Address	JESSYGER@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90111339
Alternative Phone No	OTHERS-90111339

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	POLO-1.2 TSI (A)
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD17V11023/VPC/R00
Cover Note Number	

### Driver

Name of Driver	TAN SHIH ERN, JESSICA
NRIC No	S8100584B
Date Of Birth	04/01/1981
Occupation	INDOOR
Date Of Driving Pass	07/08/2013
Driving Experience	4 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90111339
Fax Number	
Contact Number	OTHERS-90111339
Email Address	JESSYGER@GMAIL.COM



Address	BLK 301C PUNGGOL CENTRAL #14-754
Postcode	823301
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	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)

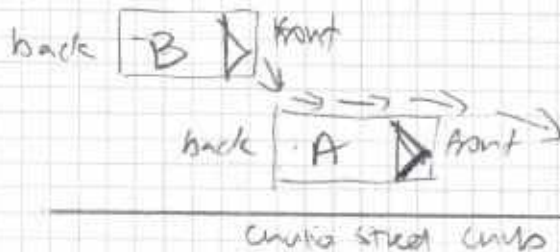
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH7428L
Vehicle Make/Model/Colour	HYUNDAI I40
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	NEO OW ENG
NRIC/Passport Number	S1845001A
Contact Number	97838801
Address:	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

# SKETCH PLAN

CHULIA STREET



A) SKZ 9336 E  
B) SH 7428 L

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Chulia Street on the extreme right lane. A Comfortdelgro taxi came very near to the left side of the car from the behind and bang into it, causing damage to the left side of the car. The taxi ~~was~~ couldn't stop in time and hence collided into the left side of the car.

## DECLARATION

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

Policyholder's Signature  
Date & Time: 29/1/18  
4.25pm

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 29/1/18  
4.25pm

Reporting Centre Personnel's Signature  
Name: Rosdi Khatib  
NRIC/FIN No.: 29/01/2018

# ACCIDENT STATEMENT

ACCIDENT DATE: 29/01/2018 (DD/MM/YYYY), TIME: 10:55 (HH:MM)

LOCATION: Chulia Street

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SK2 9336 E  
 b) INSURANCE COMPANY: Liberty Insurance  
 c) POLICY NUMBER: SD1TV11023 / VPC / R00  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: VOLKSWAGEN POLO, 901.2 TS1A / T6 (1302 SR LED)  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: \_\_\_\_\_  
 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 Shih Ern, Jessica (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S8100584B CONTACT: 9011339  
 c) ADDRESS: BK 301C Punggol Central #14-754  
S823301

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

No of passenger  
(including driver)  
(1)

## DRIVER

- a) NAME: Tan Shih Ern, Jessica (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S8100584B CONTACT: 9011339  
 c) ADDRESS: BK 301C Punggol Central #14-754  
S823301

\* d) DATE OF BIRTH: 04/01/1981 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 07/08/2013

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

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: Hyunam 240

## 8. THIRD PARTY VEHICLE

No of passenger  
(including driver)  
(2)

- a) VEHICLE NUMBER: SH 7428 L MODEL: comfo4 delqro taxi  
 b) DRIVER'S NAME: Neo Ow Eng  
 c) NRIC/FIN/PASSPORT: S1845001A CONTACT: 97838801

## 9. THIRD PARTY VEHICLE

No of passenger  
(including driver)  
( )

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

Email: jessyger@gmail.com

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

VIDEO



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8100584B**



Name

**TAN SHIH ERN, JESSICA**



陈诗恩

Race

**CHINESE**

Date of birth

**04-01-1981**

Sex

**F**

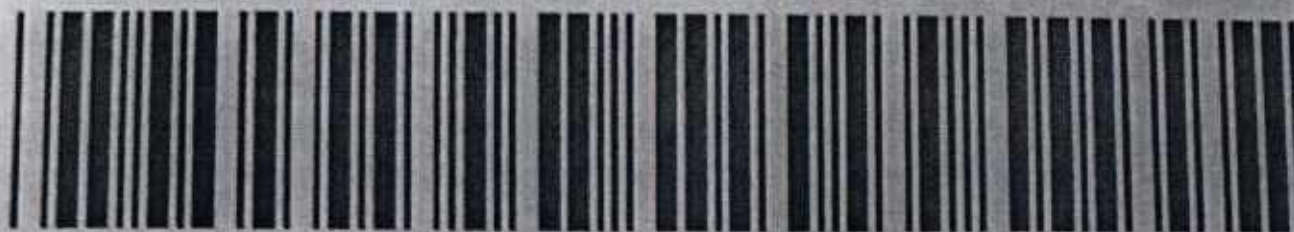
Country of birth

**SINGAPORE**





4 6 9 2 3 6 3



NRIC No. **S8100584B**



Date of issue

**11-03-2011**

Address

**APT BLK 301C PUNGGOL CENTRAL  
#14-754  
SINGAPORE 823301**

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait photo of a woman.

License Number: **S6100504B**

**YAN SHIH ERN, JESSICA**

Birth Date: **04 Jan 1981**  
Valid From: **07 Aug 2013**

Barcode with number **S6100504B**.

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

	EFFECTIVE DATE
<b>Class 3A</b> Motor cars without clutch pedals (Auto) $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals $\leq$ 2500kg	<b>07 Aug 2013</b>

NP 428A

Barcode with text: Licence No: **S6100504B**



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)

<b>Name of Policyholder:</b>		<b>Certificate No.:</b>
TAN SHIH ERN, JESSICA		SD17V11023/ VPC / R00
<b>Date of Issue:</b>	<b>Effective Date of Commencement:</b>	<b>Date of Expiry:</b>
22 Sep 2017	09 Sep 2017 00:00	08 Sep 2018 23:59
<b>Registration No.:</b>	<b>Chassis No.:</b>	<b>Type of Certificate:</b>
SKZ9336E	WWZZZ6RZGU028464	MX1

**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.

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.

**Limitations as to use:**

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

**The Policy does not cover:**

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials or speed-testing.
- C) Use for the carriage of goods (other than samples) in connection with any trade or business.
- D) Use for any purpose in connection with the Motor Trade.

\*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).



For and on behalf of  
**LIBERTY INSURANCE PTE LTD**  
Approved Insurers

**For Information Only:**

Coverage(s):	Comprehensive, Unlimited Windscreen
Sum Insured:	MARKET VALUE AT THE TIME OF LOSS
Excess:	Section I - Named Drivers: S\$1500, Section I - Unnamed Drivers: S\$2000, Additional Excess for Young, Elderly & Inexperienced Drivers: S\$3000, Windscreen Excess: S\$100
Name of Finance Company:	MAYBANK
Name of Producer:	SD CONTEGO SERVICES (A1429-2)