

NATIONAL Assessment Centre Services

Date In	13/02/2018 15:46	Job description	Date & Time Completed	Done by
Ref No	NA/INC18002930/4	SAS e-filing		
Veh No	SJL8916Z	E-mail (within 8hrs. A/C 2hrs)		
DOA	12/02/2018 17:45	i-Motor Claim Form	MT/0982321	14/2/18 09:55
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: SLG2585L	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

NA1801092	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 (\$50)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) RT: 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:-		
	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		
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	13/02/2018 15:46
Date Of Accident	12/02/2018 17:45
Exact Location Of Accident	AMBER RD ROUND ABOUT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL8916Z
Insured/Policyholder	
Name Of Registered Owner	TANG SZE CHIU
NRIC No	S1205095Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97593285
Alternative Phone No	OTHERS-97593285

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6 AUTO
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5040768791-08
Cover Note Number	

Driver

Name of Driver	TANG SZE CHIU
NRIC No	S1205095Z
Date Of Birth	09/09/1956
Occupation	OUTDOOR
Date Of Driving Pass	14/12/1977
Driving Experience	40 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97593285
Fax Number	
Contact Number	OTHERS-97593285
Email Address	NOEMAIL

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

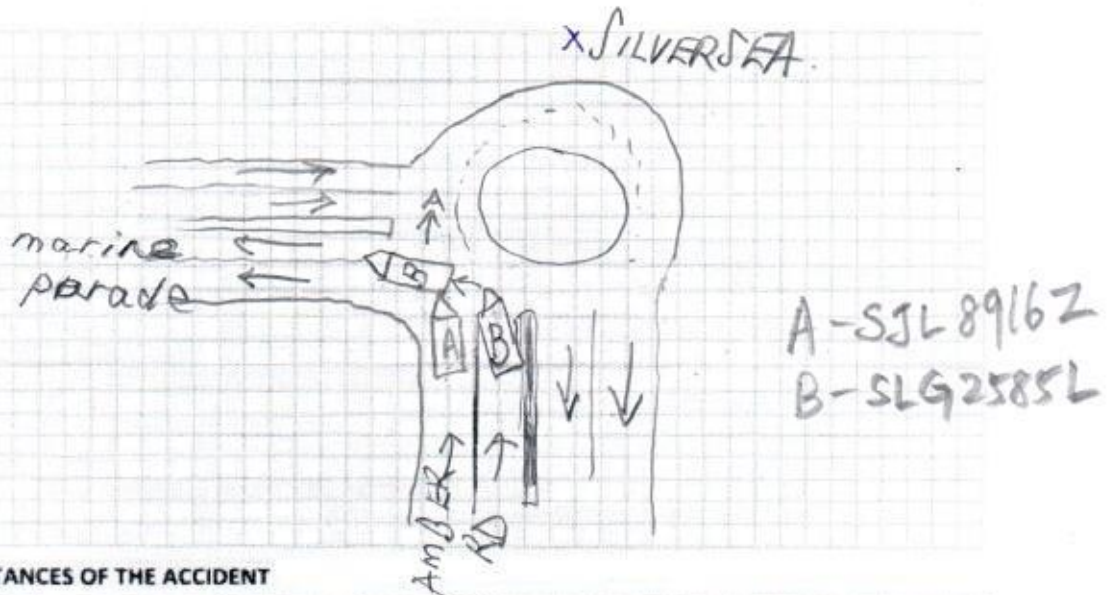
Policyholder's Signature
Date & Time:

13/02/18

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

At about 1745 pm on 12/02/18
 my Veh A is driving from Amber Rd to Silversea.
 I on my right signal and look at right
 side and no veh. So I move on.
 Suddenly Veh B from my right side come
 out. Then I hit Veh B left side.

DECLARATION

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

Policyholder's Signature

Date & Time:

13/02/18

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

13/2/2018

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5095Z
Vehicle Details	
Vehicle No.:	SJL8916Z
Vehicle to be Exported:	Yes
Intended De-registration Date:	14 Feb 2018
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	3ZZ4811324
Chassis No.:	MR053ZEE106123529
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$16,084.00
Original Registration Date:	16 Dec 2008
First Registration Date:	16 Dec 2008
Transfer Count:	0
Actual ARF Paid:	\$16,084.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Dec 2018

PARF Rebate Amount: \$8,042.00

Intended COE Rebate Details

COE Expiry Date: 15 Dec 2018

COE Category: E - Open Category

COE Period(Years): 10

QP Paid: \$7,589.00

COE Rebate Amount: \$634.00

Total Rebate Amount: \$8,676.00

The information contained herein is correct as at 13 Feb 2018

OK

SINGAPORE ACCIDENT STATEMENT

ACCIDENT STATEMENT

Date Of Accident * 12-02-18 Time 17:55 Hrs
 Exact Location Of Accident * AMBER Rd Round About

DETAILS OF OWN VEHICLE (VEHICLE A)

Vehicle Registration Number * JKL 8916 Z
 Insured / Policyholder

Name of Registered Owner * TANG JZE CHIU
 NRIC/FIN/Passport Number * J-1205095-Z

Vehicle Particulars
 Manufacturer * TOYOTA ALTIS
 Model * ALTIS

Exact Purpose for which vehicle was being used at time of accident
 * Private use ☒ Commercial use ☐ Hire & reward ☐
 Others ☐ - please specify

Are you claiming under your own insurance policy for repair to your vehicle?
 * Yes ☐ No ☒ Others

If No, please state action to be taken
 * Third Party Claim ☐ Reporting Only ☒

Vehicle Category
 * Private ☒ Commercial ☐ Motorcycle ☐

INSURANCE INFORMATION

Name of Insurance Company * NTC

Type of Coverage * Comprehensive

Fleet Policy Yes ☐ No ☐

Policy Number * 504076879108

Cover Note Number

DRIVER

Name of Driver * TANG JZE CHIU

NRIC/FIN/Passport Number * J-1205095-Z

Date of Birth * 09-09-1956

Occupation * Retiree

Date of Driving Pass * 14-12-1977

Gender * Male ☒ Female ☐

Mobile Number * 97593285

Address * B1K-112 #09-141

Bedok North Rd (460112)

Email Address

Was driver an employee of the Insured's Company?

* Yes ☐ No ☒

If no, Relationship of the Driver with the Insured

* OWNER

SAS 1

Email: zero-gravity@sihnet.com.sg

Vehicle Registration Number of Driver's Own Vehicle (if applicable)
Insurance Company of Driver's Own Vehicle (if applicable)

General Information of the Accident

Type of Accident * Collision front to side
Weather Conditions * Clear ☒ Raining ☐ Others
Road Surface * Dry ☒ Wet ☐ Others

Other Information

Was any body injured in the Accident? Yes ☐ No ☒
Was any other material or property damaged? Yes ☐ No ☒

Details of Injured Persons

Name *
Address
Approximate Age *
Injuries Sustained
If vehicle Occupants, state in which vehicle?
Were seat belts worn? * Yes ☐ No ☐
Was injured conveyed to hospital by ambulance? * Yes ☐ No ☐

Details of Police Action

Was the Accident reported to the Police? * Yes ☐ No ☐
If Yes, please state which Police Station
Was notice of intended Prosecution given? * Yes ☐ No ☐
If Yes, against whom?

DETAILS OF OTHER VEHICLE(S) / PROPERTIES (VEHICLE B)

Vehicle Registration Number * JCG 2585 L
Vehicle Make / Model / Colour MAZDA - 3
Detail Of Properties
Name of Driver * CHEO JNEE LEONG GERALD
NRIC/Passport Number J781194014
Contact Number * 97488164
Email Address
Address 21K18 BEDOK SOUTH RD #14-49
Insurance Company Name (96048)
Nature of Damage

Details Of Witness

Name
Phone Number
Email Address

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1205095Z



Name
TANG SIZE CHIU
鄧仕釗
Race
CHINESE
Date of Birth
09-09-1956
Sex
M
Country of Birth
SINGAPORE

S1205095Z

REPUBLIC OF SINGAPORE DRIVING LICENCE

000933024E



000933024E

09 Sep 1956
20 Oct 2003

0347562



NRIC No. S1205095Z



Blood Group
O+

Date of issue
15-05-1992


APT BLK 112 BEDOK NORTH ROAD #09-341
SINGAPORE 460112
NRIC No. S1205095Z
Date: 16/12/1997
No: 5829464

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE
14 Dec 1977

Licence No: S1205095Z



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: 5040768791-08

Cover : drive CLASSIC

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : SJL8916Z |
| Chassis Number | : MR053ZEE106123529 |
| 2. Name of Policyholder | : TANG SZE CHIU |
| 3. Effective Date of Insurance | : 16 Dec 2017 |
| 4. Expiry Date of Insurance | : 15 Dec 2018 |
| 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/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# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial 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 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\$600
EXCESS (SECTION 2)	: N/A
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	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TANG SZE CHIU
NAMED DRIVER (1)	: TANG KAI CHONG
NAMED DRIVER (2)	: TANG KAI HAN
HIRE PURCHASE COMPANY	: DBS BANK 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 : BEDOK BRANCH (00000600138)
Date of Issue : 06 Dec 2017 11:20 hrs
Reprint : 06 Dec 2017 11:21 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Hello, NAC_PAYA_UBI_800501

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

Policy Query

Policy No.

Date of Accident

12/02/2018 17:45

Vehicle No.(For Motor)

SJL8916Z

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5040768791-08	TANG SZE CHIU	S1205095Z	GPC	drivo CLASSIC	SJL8916Z	SJL8916Z	16/12/2017	15/12/2018

▼ Policy Information

Policy No.	5040768791-08	Policyholder Name	TANG SZE CHIU	Policyholder NRIC	S1205095Z
Address	BLK 112 #09-341 BEDOK NORTH ROAD SINGAPORE 460112				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	06/12/2017	Effective Date	16/12/2017 00:00	Expiry Date	15/12/2018 23:59
Third Party Excess	0.0	Own damage Excess	600.0	Windscreen Excess	100.0
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600.0	Outside Singapore TP Excess	0.0		
Agent	BEDOK BRANCH	Agent Tel.	NIL	GST Flag	Y
Co-Insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 112 #09-341	Address 2	BEDOK NORTH ROAD	Address 3	SINGAPORE 460112
Address 4		Address Type	Singapore address	Post Code	460112
Unit No.		Related Policy Number	5040768791-08		

► Insured Object: SJL8916Z

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

Accident MT/0982321

Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	TANG SZE CHIU	Insured NRIC	S12
Contact No.(Mobile)	97593285	Contact No.(Home)	62463393	Contact No.(Office)	
Email Address		Q1 Vehicle Number	SJL8916Z	TP Vehicle Number	SLG
Claim Description	SJL8916Z / SLG2585L ON 12 Feb 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Rec
Date Registered	14/02/2018 09:57	Claim Close Date		Date Received	14/0
Report Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

Attachment

2/14/2018

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

Accident No.

MT/0982321

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

14/02/2018 09:55

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 ▼
Clear	Please Select ▼	NO ▼	Normal ▼

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descrip
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Feb 2018 09:57	NRIC/ Driving License	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Feb 2018 09:56	SAS	Normal	SAS 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Feb 2018 09:56	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Feb 2018 09:56	Photos	Normal	Photos 20:
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Feb 2018 09:55	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Feb 2018 09:55	Photos	Normal	Photos 20:

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Display in New Window

Scan and uploading