

NATIONAL Assessment Centre Services

24 MAY 80 28064

|                           |  |                       |                  |
|---------------------------|--|-----------------------|------------------|
| Date In: 27/02/2018 16:44 | Job description                        | Date & Time Completed | Done by          |
| Ref No: X/BA/INC/003776/Y | SAS calling                            |                       |                  |
| Veh No: FU 8826A          | E-mail (with & without)                |                       |                  |
| D.O.A: 28/02/2018 16:30   | 1-Motor Claim Form                     | MT/0983934            | 27/02/2018 17:07 |
| OD: TP/ Reporting Only    | 1-Motor W/O (with & without)           |                       |                  |
|                           | 1-Photo Uploaded                       |                       |                  |
| TP Insured:               | Assessment/Survey Report               |                       |                  |
|                           | Ass'l Report by Pax/Hand to Owner/VW&P |                       |                  |

Preferred Wksp / INC Assign Wksp / OW: ( ) Tel: ( ) Fax: ( )

TP Policyholder: ( ) Yell No: SCJ 8388R INC ( ) / Non-INC ( )

Owner / Driver: ( ) Tel: ( )

Policy No: ( ) Period: ( ) Cover Type: ( )

Confirmed by: ( ) Date: ( ) Time: ( )

Insured/Driver Liability: ( ) % (Note: BSL 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 | Customers 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: ( )

| Item No. | Item Description                                     | Done by |
|----------|--|---------|
| 1)       | Apply for Transport Allowance ( ) / Courtesy Car ( ) |         |
| 2)       | QC Check / Post Repair Inspection ( )                |         |
| 3)       | Upload Repair Photo (Repair Cost > \$3000) ( )       |         |

[illegible]

| NA/801310            |  | INVOICE PRODUCTIONS/CHUCK WIS                 |            | INVOICE |  |
|----------------------|--|---|------------|---------|--|
| Unit/Inch/Bar/Equine |  | 1) AR: Accident Reporting (\$30)              |            |         |  |
| Driver/Owner:        |  | 2) DA: Damage Assessment (\$100)              | INC (\$10) |         |  |
| Contact No:          |  | 3) TP: Towing Fee                             | \$40 (\$4) |         |  |
| Damaged Portion:     |  | 4) FT: Follow-Through Survey                  | \$110      |         |  |
|                      |  | 5) FT: Follow-Through Survey (Re-survey)      | \$10       |         |  |
|                      |  | Excluded against INC Only (w/eff 10 Jan 2000) |            |         |  |
|                      |  | 6) TR: Re-lamination                          | \$11       |         |  |
|                      |  | 7) NI: NI/DA + SMAT Survey                    | \$180      |         |  |
|                      |  | 8) NTUC Additional Survey                     |            |         |  |
|                      |  | 9) NI: NI/DA + SMAT Survey                    | \$11       |         |  |
|                      |  | 10) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 11) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 12) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 13) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 14) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 15) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 16) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 17) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 18) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 19) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 20) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 21) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 22) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 23) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 24) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 25) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 26) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 27) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 28) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 29) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 30) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 31) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 32) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 33) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 34) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 35) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 36) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 37) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 38) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 39) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 40) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 41) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 42) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 43) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 44) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 45) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 46) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 47) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 48) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 49) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 50) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 51) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 52) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 53) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 54) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 55) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 56) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 57) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 58) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 59) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 60) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 61) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 62) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 63) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 64) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 65) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 66) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 67) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 68) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 69) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 70) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 71) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 72) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 73) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  | 74) NI: NI/DA + SMAT Survey                   | \$11       |         |  |
|                      |  | 75) NI: NI/DA + SMAT Survey                   | \$10       |         |  |
|                      |  |   |            |         |  |



## 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             | 27/02/2018 16:44                        |
| Date Of Accident           | 25/02/2018 16:30                        |
| Exact Location Of Accident | ALONG NEIL ROAD TOWARDS CANTONMENT ROAD |
| Country/State of Loss      | SINGAPORE                               |

### DETAILS OF OWN VEHICLE

|                             |                      |
|-----------------------------|----------------------|
| Vehicle Registration Number | FU8826A              |
| <b>Insured/Policyholder</b> |                      |
| Name Of Registered Owner    | HO WENG KONG         |
| NRIC No                     | S0139153D            |
| Email Address               | NOEMAIL              |
| Mobile Phone No             | (LOCAL) +65-98470208 |
| Alternative Phone No        | OTHERS-98470208      |

### Vehicle Particulars

|  |                        |
|--|------------------------|
| Manufacturer   | HONDA                  |
| Model  | PHANTOM 200M-197CC (M) |
| Exact Purpose for which vehicle was being used at time of accident           | GOING HOME             |
| 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   | MOTORCYCLE             |

### Insurance Company

|                           |  |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage          | THIRD PARTY                            |
| Fleet Policy              | NO                                     |
| Policy Number             | 5065307141-03                          |
| Cover Note Number         |  |

### Driver

|                      |                       |
|----------------------|-----------------------|
| Name of Driver       | HO WENG KONG          |
| NRIC No              | S0139153D             |
| Date Of Birth        | 28/07/1953            |
| Occupation           | INDOOR                |
| Date Of Driving Pass | 10/08/1976            |
| Driving Experience   | 41 YEARS AND 6 MONTHS |
| Gender               | MALE                  |
| Mobile Number        | (LOCAL) +65-98470208  |
| Fax Number           |                       |
| Contact Number       | OTHERS-98470208       |
| Email Address        | NOEMAIL               |

|   |   |
|---|---|
| Address   | BLK 85 TELOK BLANGAH HEIGHTS<br>#23-383 |
| Postcode  | 100085                                  |
| 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?   | YES |
| Was any injured conveyed to hospital by ambulance?  | YES |
| 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 |   |
| Police Station Name                       | TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY                   |
| Police Station Address                    | ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE |
| Police Station Contact                    | TEL NO: 65470000 - FAX NO:                                    |
| Was notice of intended Prosecution given? | NO  |
| If Yes, against whom?                     |   |

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180226/2030(TYPE OF COLLISION IS HEAD TO SIDE)

#### 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 | SCJ8388R      |
| Vehicle Make/Model/Colour   | MERCEDES BENZ |
| Details Of Properties       |               |
| Vehicle Category            | PRIVATE CAR   |
| Name of Driver              | MRS TEO       |
| NRIC/Passport Number        |               |
| Contact Number              | 91912077      |
| Address                     |               |
| Postcode                    |               |
| Insurance Company Name      |               |
| Nature Of Damage            |               |

No. Of Passenger (Including Driver)

1

**DETAILS OF INJURED PERSON 1**

|   |               |
|---|---------------|
| Name  | HO WENG KONG  |
| Approximate Age                                     |               |
| Injuries Sustain                                    | SLIGHT INJURY |
| Injured person in which vehicle?                    | FU8826A       |
| Were seat belts worn?                               |               |
| Was this injured conveyed to hospital by ambulance? | YES           |
| Address   |               |
| Postcode  |               |



## 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: 27/02/2018

Driver's Signature

(If driver is not the policyholder)

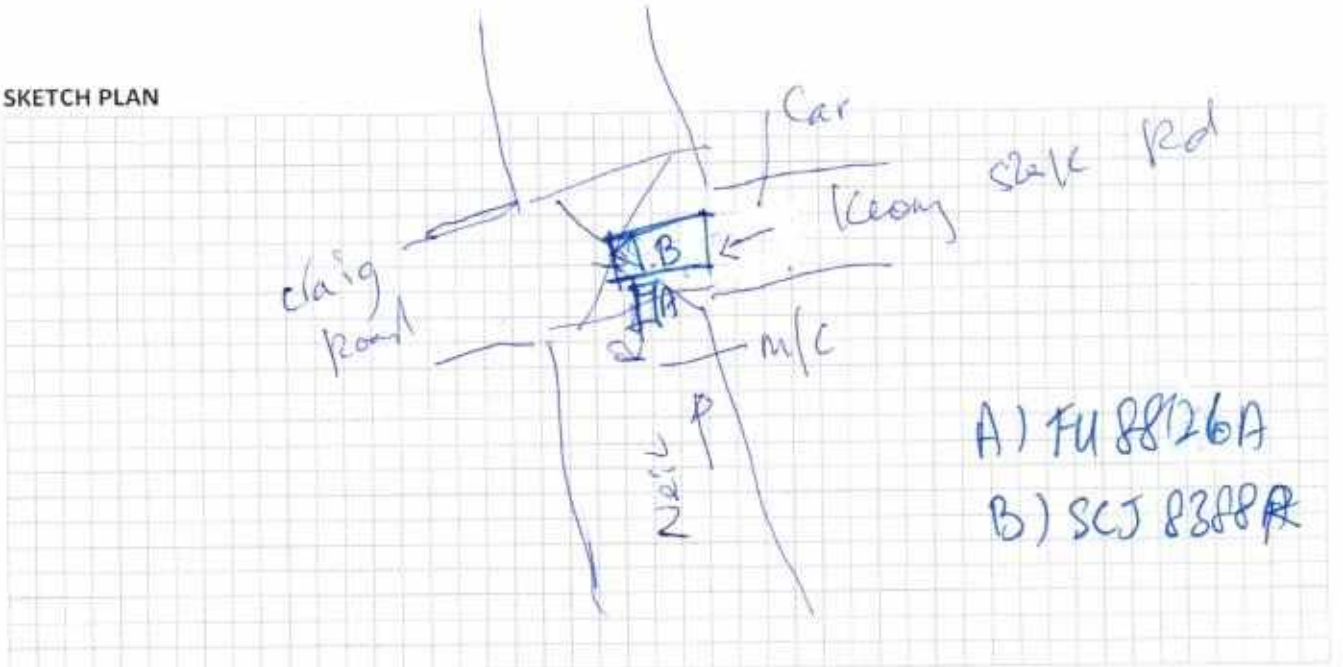
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS Refer to Police Report  
 27/02/2018

### DECLARATION

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

Policyholder's Signature  
 Date & Time:  
 27/02/2018

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

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





# SINGAPORE POLICE FORCE



T/20180226/2030

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20180226/2030

**REPORT OF A TRAFFIC ACCIDENT**

|  |            |                              |  |                    |                            |
|--|------------|------------------------------|--|--------------------|----------------------------|
| Date/Time Report Made:<br>26/02/2018 11:03 |            | Vide Report No.:             |  | Station Diary No.: |                            |
| <b>Informant's Particulars</b>             |            |                              |  |                    |                            |
| Name of Informant:<br>HO WENG KONG         |            |                              | Address:<br>APT BLK 85 TELOK BLANGAH HEIGHTS #23-383 HDB<br>TELOK BLANGAH SINGAPORE 100085 |                    |                            |
| ID Type / ID No.:<br>NRIC NO / S0139153D   |            |                              | Contact No.:<br>Home/Office: Mobile: 98470208  |                    |                            |
| Nationality:<br>SINGAPORE CITIZEN          |            |                              | Email:   |                    |                            |
| Sex:<br>Male                               | Age:<br>64 | Date of Birth:<br>28/07/1953 | Type of Informant:<br>Rider  |                    |                            |
| Race:<br>Chinese                           |            |                              | Language:<br>English   |                    | Institution / School Name: |
| Occupation:<br>OFFICE JOB                  |            |                              | Driving Licence Information:<br>Class: 2B,2A,2,3 Date of Expiry:                           |                    |                            |

|  |                              |                                    |   |   |
|--|------------------------------|------------------------------------|---|---|
| <b>General Information of the Accident</b>                               |                              |                                    |   |   |
| Type of Accident:  | Injury<br>Attended by Police | Drink<br>Drive:<br>No              | Date/Time of<br>Accident:<br>25/02/2018 16:30 | Type of Location:<br>X-Junction         |
| Location:<br><br>NEIL ROAD<br><br>ALONG NEIL ROAD TOWARDS THE CANTONMENT |                              |                                    |   |   |
| Weather:<br>Clear  |                              | Road Surface:<br>Dry               |   | Road Speed Limit:                       |
| Traffic Flow:<br>One Way   |                              | Traffic Control:<br>Not Controlled |   | Traffic Volume:<br>Light                |
| Type of Collision:<br>Between Moving Vehicles - Head To Side             |                              |                                    |   | Anyone conveyed by<br>ambulance:<br>Yes |

| Details of Vehicle Involved |            |                  |                |       |           |                 |
|-----------------------------|------------|------------------|----------------|-------|-----------|-----------------|
| Vehicle No.                 | Type       | Make             | Model          | Color | Condition | No of Passenger |
| FU8826A                     | Motorcycle | HONDA            | PHANTOM2<br>00 | Black |           | 0               |
| SCJ8388R                    |            | MERCEDES<br>BENZ | S320 L         | White |           | 0               |

| Details of Vehicle Insurance |   |               |            |             |
|------------------------------|---|---------------|------------|-------------|
| Vehicle No.                  | Insurance Company                             | Insurance No  | Effective  | Expiry Date |
| FU8826A                      | NTUC Income Insurance Co-Operative<br>Limited | 5065307141-03 | 14/05/2017 | 13/05/2018  |



**SINGAPORE  
POLICE FORCE**



T/20180226/2030

2 of 3

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20180226/2030

**CONTINUATION OF REPORT**

**Brief Details.**

ON THE ABOVE MENTIONED DATE TIME AND LOCATION,  
I WAS TRAVELLING ALONG NIEL ROAD TOWARDS CANTONMENT, WHEN I WAS NEARING THE  
CROSS JUNCTION. TRAFFIC NOT CONTROLLED BY TRAFFIC LIGHT. A CAR OF (SCJ8388R)  
SHOW UP INTO THE YELLOW BOX AND BY THE TIME I CAN'T BRAKE IN TIME AND CRASHED  
INTO THE LEFT SIDE NEAR THE WHEEL AREA. WE EXCHANGE PARTICULAR, AND I WAS  
CONVEYED BY AMBULANCE.  
NAME: MRS TEO  
CONTACT NUMBER: 97912077





**SINGAPORE  
POLICE FORCE**



T/20180226/2030

3 of 3

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20180226/2030

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:  
TP /  
MUHAMMAD HAZIQ BIN SAIFUDDIN

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
26/02/2018 11:03

Officer In Charge Of Case:  
TP / GIT /  
SI TAN LEE HWANG DAWN  
Contact No.: 65476215

Classification Of Case:

Authentication Stamp  
NP168

SINGAPORE  
POLICE FORCE

Signature:

## Claim Handling

Accident MT/0983934

|                     |   |                     |   |                      |    |
|---------------------|---|---------------------|---|----------------------|----|
| Policy No.          | 5065307141-03   | Vehicle No.         | FU8826A   | GST Registration No. |    |
| Policyholder Name   | HO WENG KONG  |                     |   | Policyholder NRIC    |    |
| Product Code        | MOTORCYCLE INSURANCE  | Cover Type          | Third Party   | Loading              |    |
| Contact No.(Mobile) | 98470208  | Contact No.(Office) |   | Contact No.(Home)    |    |
| Email Address       |   | Special Remark      |   | eCode                |    |
| KFR                 | <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(%)  | 20  | Private Hire         | No |

**Accident Details**

|                   |   |                               |       |                     |                   |
|-------------------|---|-------------------------------|-------|---------------------|-------------------|
| Report Date       | 27/02/2018 17:05                        | Accident Report Within 24 hrs | Yes   | Accident Type       | Collision - Major |
| Date of Accident  | 25/02/2018                              | Time of Accident hh:mm        | 18:30 | Country of Accident | Singapore         |
| Reporting Centre  |   | Orange Force                  |       | ICM No.             |                   |
| Accident Location | ALONG NEIL ROAD TOWARDS CANTONMENT ROAD |                               |       |                     |                   |

**Benefits**

**Excess**

|                       |      |                             |  |                   |  |
|-----------------------|------|-----------------------------|--|-------------------|--|
| Own Damage Excess     | 0.00 | Additional Excess           |  | Windscreen Excess |  |
| Unnamed Driver Excess |      | Outside Singapore OD Excess |  |                   |  |
| Third Party Excess    | 0.00 | 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 85 #23-383 | Address 2             | TELOK BLANGAH HEIGHTS | Address 3 |  |
| Address 4 |                | Address Type          | Singapore address     | Post Code |  |
| Unit No.  |                | Related Policy Number | 5065307141-03         |           |  |

**OI Driver Info**

|   |   |                     |                       |                        |  |
|---|---|---------------------|-----------------------|------------------------|--|
| Driver Name                             | HO WENG KONG  | Driver Type         | Main Driver           |                        |  |
| Unnamed driver Name                     |   | Driver NRIC         | 501391530             | Driver DOB             |  |
| Register Date of Driver License         | 10/08/1976  | Driver Age          | 64                    | Driving Experience     |  |
| Contact No.(Mobile)                     |   | Contact No.(Office) |                       | Contact No.(Home)      |  |
| Address 1                               | BLK 85 #23-383  | Address 2           | TELOK BLANGAH HEIGHTS | Address 3              |  |
| Address 4                               |   | Address Type        | Singapore address     | Post Code              |  |
| Unit No.                                |   |                     |                       |                        |  |
| Does he own a Singapore Registered car? | <input checked="" type="radio"/> Yes <input type="radio"/> No | Driver Vehicle No.  | FU8826A               | Driver Insurer Company |  |

**Declaration**

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

Modification History

Claim 001

New

|                                |                                   |                         |                                  |                     |                            |
|--------------------------------|-----------------------------------|-------------------------|----------------------------------|---------------------|----------------------------|
| Claim Type *                   | OD-MX                             | Insured Name            | HO WENG KONG                     | Insured NRIC        |                            |
| Contact No.(Mobile)            | 96053171                          | Contact No.(Home)       | 62700541                         | Contact No.(Office) |                            |
| Email Address                  |                                   | Of Vehicle Number       | FU8826A                          | TP Vehicle Number   |                            |
| Claim Description              | FU8826A / SCJ8388R ON 25 Feb 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          |                            |
| Date Registered                | 27/02/2018 17:07                  | Claim Close Date        |                                  | Date Received       |                            |
| Report Taken By                | ROSLI WAHAB                       |                         |                                  |                     |                            |

☒ Print AK letter

Save Submit

## Attachment

|                    |   |             |                  |
|--------------------|---|-------------|------------------|
| Accident No.       | MT/0983934  | Claim No.   | 001              |
| Last Doc. Received | <input checked="" type="radio"/> Yes <input type="radio"/> No | Upload Date | 27/02/2018 17:09 |

Path \* Category \* Confidential Urgency

Please Select Normal

|  |                                      |               |                                  |        |
|--|--------------------------------------|---------------|----------------------------------|--------|
| <input type="button" value="Browse..."/> | <input type="button" value="Clear"/> | Please Select | <input type="text" value="N/A"/> | Normal |
| <input type="button" value="Browse..."/> | <input type="button" value="Clear"/> | Please Select | <input type="text" value="N/A"/> | Normal |
| <input type="button" value="Browse..."/> | <input type="button" value="Clear"/> | Please Select | <input type="text" value="N/A"/> | Normal |
| <input type="button" value="Browse..."/> | <input type="button" value="Clear"/> | Please Select | <input type="text" value="N/A"/> | Normal |
| <input type="button" value="Browse..."/> | <input type="button" value="Clear"/> | Please Select | <input type="text" value="N/A"/> | Normal |

## Attachment List

| Attachment | Uploaded By/Date   | Category              | Urgency | De            |
|------------|--|-----------------------|---------|---------------|
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:09 | SAS                   | Normal  | SAS           |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:09 | NRIC/ Driving License | Normal  | NRIC/ Driving |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:09 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:08 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:08 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:08 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:08 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:08 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:08 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:07 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:07 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:07 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:07 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:07 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:07 | Photos                | Normal  | Photo         |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 27 Feb 2018 17:07 | Photos                | Normal  | Photo         |

## Video List

| Uploaded By/Date | Folder Date | File Name  | Source  |
|------------------|-------------|--|---|
|                  |             | <input type="button" value="Display in New Window"/> | <input type="button" value="Scan and uploading"/> |



# ACCIDENT STATEMENT

ACCIDENT DATE: 25/02/2018 (DD/MM/YYYY), TIME: 16:30 (HH:MM)

LOCATION: Along NKK Road towards The (Anthem?)

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FU 886A  
 b) INSURANCE COMPANY: NTUC  
 c) POLICY NUMBER: 5065307141-03  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: HONDA PTARMAN 200  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: GOING BACK HOME  
 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: HO WANG KONG (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S0189153D CONTACT: 98470208  
 c) ADDRESS: \_\_\_\_\_

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

# No of passengers  
(Including driver)  
(1)

- DRIVER  
 d) NAME: IS ABOWA (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 28/07/1953 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR) 10/08/1976

f) DATE OF DRIVING PASS: \_\_\_\_\_

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: TRAFFIC POLICE

## 8. THIRD PARTY VEHICLE

# No of passenger  
(Including driver)  
(1)

- a) VEHICLE NUMBER: SGT 8388R MODEL: MAZDA 5320  
 b) DRIVER'S NAME: MR TAO  
 c) NRIC/FIN/PASSPORT: F20019647 CONTACT: 97912077

## 9. THIRD PARTY VEHICLE

# No of passenger  
(Including driver)  
( )

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

email =

fax =

VIDEO

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0139153D



Name  
**HO WENG KONG**  
**何榮光**  
Race  
**CHINESE**  
Date of Birth  
**28-07-1953** Sex  
**M**  
Country of Birth  
**SINGAPORE**




REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number **S0139153D**

Name  
**HO WENG KONG**

Birth Date **28 Jul 1953**  
Issue Date **06 Sep 2003**




0853670




NRIC No: **S0139153D**

Blood Group: **B+** Date of Issue: **27-03-1993**


APT BLK 85 TELOK BLANGAH HEIGHTS #23-383  
SINGAPORE 100085  
NRIC No: **S0139153D** Date: **22-12-2001** No: **1018130**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

| CLASS    | VEHICLE CLASS  | VALID FROM  |
|----------|--|-------------|
| Class 2B | Motorcycles not exceeding 200 cc   | 10 Aug 1976 |
| Class 2A | Motorcycles between 201 cc and 400 cc  | 10 Aug 1976 |
| Class 2  | Motorcycles exceeding 400 cc   | 10 Aug 1976 |
| Class 3  | Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms | 13 Oct 1971 |

NP 428A

License No: **S0139153D**



eBaoTech

General Claim

Hello, NAC\_BUKIT\_MERAH\_800676

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## 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 checked="" type="radio"/> | 5065307141-03 | HO WENG KONG      | S0139193D         | GMC     | Third Party | FU8826A     | FU8826A        | 14/05/2017    | 13/05/2018  |