

NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

Date In: 20/03/18	Job description	Date & Time Completed	Done by
Ref No: NA/INC18005171/13	SAS e-filing		
Veh No: SLQ8579M	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 19/03/18 1900	i-Motor Claim Form	MT/0986846	
OD: (TE) 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: SLA6850B	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

NA1801731	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) 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		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 1:	6) TR: Re-inspection \$75		
Cat. 2 / 3:	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	9) N12: Idac Mobile		
	Fee Charged		
	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	20/03/2018 14:10
Date Of Accident	19/03/2018 19:00
Exact Location Of Accident	NJC HEIGHT CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ8579M
Insured/Policyholder	
Name Of Registered Owner	APEX LEASING PTE LTD
Co Reg No	201616961Z
Email Address	LILY@APEXTRADING.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-64633655

Vehicle Particulars

Manufacturer	HONDA
Model	GRACE HYBRID
Exact Purpose for which vehicle was being used at time of accident	UBER
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5082827526-01
Cover Note Number	

Driver

Name of Driver	THAM CHONG PENG
NRIC No	S7107966Z
Date Of Birth	07/03/1971
Occupation	OUTDOOR
Date Of Driving Pass	20/10/2000
Driving Experience	17 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97753369
Fax Number	
Contact Number	
Email Address	JAMESWATANA68@GMAIL.COM

Address	BLK 104 RIVERVALE WALK #08-138
Postcode	540104
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	COLLISION - HEAD TO REAR
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?	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)	4
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 3	NAME: : UNKNOWN GENDER: : FEMALE

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

MY VEH WAS STATIONARY WAITING FOR THE FRT VEH TO MAKE A LEFT TURN. SUDDENLY VEH(B) BEARING REG NO SLA6850B REVERSED HIS VEH, I HORN AT HIM TO WARN HIM BUT HE KEEP ON REVERSING AND HIT ONTO MY FRT PORTION OF MY VEH.

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	SLA6850B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YONG YUEN HWA

NRIC/Passport Number	S7244332B
Contact Number	97388134
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.

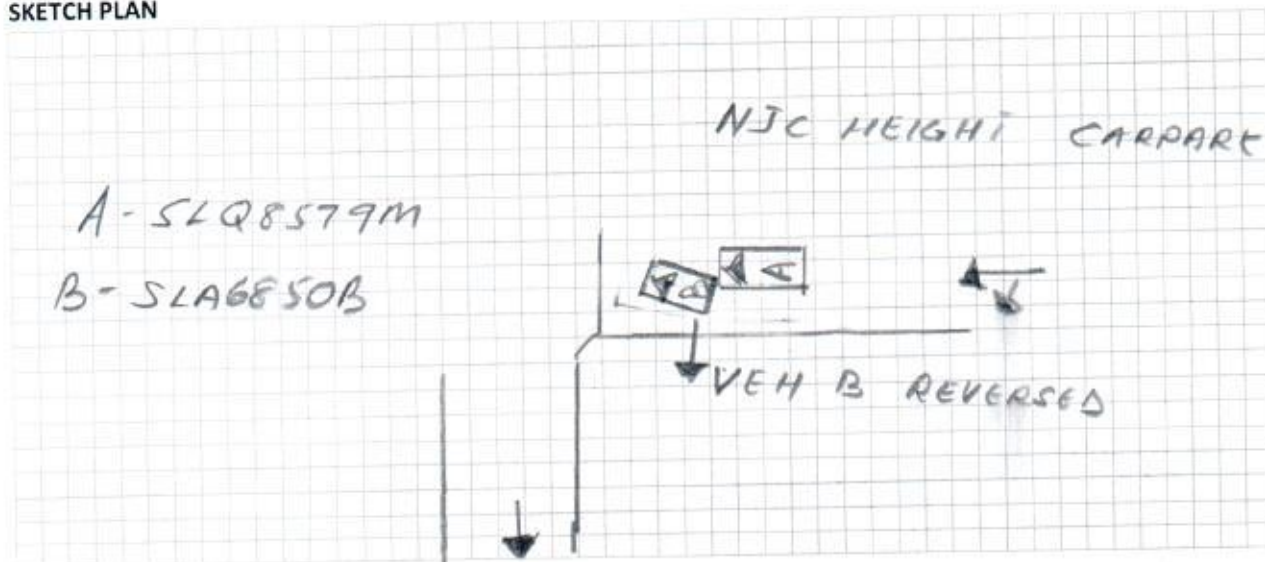


Policyholder's Signature
Date & Time:

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

P/s refer to the statement.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S7107966Z**

Name: **THAM CHONG PENG**

Birth Date: **07 Mar 1971**

Issue Date: **06 Nov 2008**

001672116B




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7107966Z**

Name: **THAM CHONG PENG**

譚 忠 平

Race: **CHINESE**

Date of birth: **07-03-1971** Sex: **M**

Country of birth: **SINGAPORE**





LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE: **20 Oct 2000**

Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg

NP 428A

Licence No: **S7107966Z**



4310244

NRIC No. **S7107966Z**

Date of issue: **03-11-2008**

Address: **APT BLK 104 RIVERVALE WALK
#08-138
SINGAPORE 540104**




Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.

Date of Accident

19/03/2018 19:00

Vehicle No.(For Motor)

SLQ8579M

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5082827526-01	APEX LEASING PTE LTD	201616961Z	GFT	drive CLASSIC	SLQ8579M	SLQ8579M	04/08/2017	

▼ Policy Information

Policy No.	5082827526-01	Policyholder Name	APEX LEASING PTE LTD	Policyholder NRIC	201616961Z
Address	61 UBI AVENUE 2 #02-20 AUTOMOBILE MEGAMART SINGAPORE 408898				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	02/08/2017	Effective Date	04/08/2017 00:00	Expiry Date	03/08/2018 23:59
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00		
Agent	KCB AGENCY	Agent Tel.	63913813	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	61 UBI AVENUE 2	Address 2	#02-20 AUTOMOBILE MEGAMAR	Address 3	SINGAPORE 408898
Address 4		Address Type	Singapore address	Post Code	408898
Unit No.	02-20	Related Policy Number	5093501453		

► Insured Object: SLQ8579M

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	29/12/2017 00:00	Basic Information Endorsement	000001286722030	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover 1 additional vehicle as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SJJ6728Z 27-12-2017 \$848.87 In view of this amendment, an additional premium of \$848.87 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.
2	30/12/2017 00:00	Basic Information Endorsement	000001286722372	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover 1 additional vehicle as follows: CHASSIS NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. ZYX102044723 29-12-2017 \$923.72 In view of this amendment, an additional premium of \$923.72 (inclusive of GST) is payable under your policy. Please ignore this

Text size + -

0% 25% 50% 75% 100%

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	SLQ8579M		
Vehicle Type:	Z10 - Private Hire (Chauffeur) Motor Car	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	HONDA	Vehicle Model:	GRACE HYBRID 1.5DX AUTO
Chassis No.:	GM41109867	Engine No.:	LEB5259890
Motor No.:	H12611744	Trailer Chassis No.:	-
Propellant:	Petrol-Electric	Passenger Capacity:	4
Engine Capacity:	1496 cc	Power Rating:	22.0 kW
Maximum Power Output: 101.0 kW (135 bhp)			
Unladen Weight:	1170 kg	Maximum Laden Weight:	1445 kg
Primary Colour:	White	Secondary Colour:	-
First Registration Date:	25 Jul 2017	Original Registration Date:	25 Jul 2017
Manufacturing Year:	2017	Open Market Value:	\$21,780.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$2,500.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$20,000.00 (100%), next \$1,780.00 (140%)
Actual ARF Paid:	\$5,000.00		

Owner Particulars

Owner Name: APEX LEASING PTE LTD

Owner ID Type: Company

Owner ID: 201616961Z

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 61

Registered Street Name: UBI AVENUE 2

Registered Unit No.: # 02 - 20

Registered Building Name: AUTOMOBILE MEGAMART

Registered Postal Code: 408898

COE No. / Expiry Date: 2017080107000447Z / 24 Jul 2027

COE Bid Category: E - Open - all except motorcycle

QP Paid: \$49,899.00

Transaction Details

Business Transaction Ref. No.: 20170725102107979570

Business Transaction Date: 25 Jul 2017

Business Transaction Time: 10:21:07

Message

Claim Handling

Accident MT/0986846

Policy No.	5082827526-01	Vehicle No.	SLQ8579M	GST Registration No.	
Policyholder Name	APEX LEASING PTE LTD	Cover Type	drive CLASSIC	Policyholder NRIC	201616961Z
Product Code	FLEET INSURANCE	Contact No.(Office)	64633655	Loading	0
Contact No.(Mobile)	0	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	Yes

Accident Details

Report Date

20/03/2018 15:04

Accident Report Within 24 hrs

Yes

Accident Type

Others

Date of Accident

19/03/2018

Time of Accident hh:mm

19:00

Country of Accident

Singapore

Reporting Centre

Orange Force

ICM No.

Accident Location

NJC HEIGHT CARPARK

Benefits

Excess

Own damage Excess

2,000.00

Additional Excess

0.00

Windscreen Excess

1

Unnamed Driver Excess

Outside Singapore OD Excess

2,000.00

Third Party Excess

1,500.00

Outside Singapore TP Excess

1,500.00

GST Registered Information

GST Registered

No

GST Registration Date

GST Registration No.

GST Status Verified

Yes

Modification History

Policyholder Mailing Address

Address 1

61 UBI AVENUE 2

Address 2

#02-20 AUTOMOBILE MEGAMAR

Address 3

SINGAPORE 408898

Address 4

Address Type

Singapore address

Post Code

408898

Unit No.

02-20

Related Policy Number

5093501453

OI Driver Info

Driver Name

Unnamed Driver

Driver Type

Unnamed Driver

Driver NRIC

57107966Z

Driver DOB

07/03/1971

Unnamed driver Name

THAM CHONG PENG

Driver Age

47

Driving Experience

17

Register Date of Driver License

20/10/2000

Contact No.(Mobile)

97753369

Contact No.(Office)

0

Contact No.(Home)

0

Address 1

BLK 104

Address 2

RIVERVALE WALK

Address 3

SINGAPORE 540104

Address 4

Address Type

Singapore address

Post Code

540104

Unit No.

#08-138

Does he own a Singapore Registered car?

☐ Yes ☒ No

Driver Vehicle No.

Driver Insurer Company

Declaration

Breathalyser or Blood Test Reading?

0 mg

Any injury?

☐ Yes ☒ No

Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	APEX LEASING PTE LTD	Insured NRIC	201616961Z
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	+
Email Address		OI Vehicle Number	SLQ8579M	TP Vehicle Number	SLA6850B
Claim Description	SLQ8579M / SLA6850B ON 19 Mar 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	20/03/2018 00:00
Date Registered	20/03/2018 15:11	Claim Close Date		Total Loss but Repaired	
Report Taken By	ROSILINDA	Workshop Repairer			

☒ Print AK letter

Save

Submit

Attachment

Accident No.	MT/0986846	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	20/03/2018 00:00

Path *

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Category *	Confidential	Urgency *	Descr
Clear Please Select	NO	Normal	
Clear Please Select	NO	Normal	
Clear Please Select	NO	Normal	

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	

Sen

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 20 Mar 2018 15:11	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-3-20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 20 Mar 2018 15:11	SAS	Normal	SAS 2018-3-20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 20 Mar 2018 15:11	Photos	Normal	Photos 2018-3-20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 20 Mar 2018 15:11	Photos	Normal	Photos 2018-3-20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 20 Mar 2018 15:10	Photos	Normal	Photos 2018-3-20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 20 Mar 2018 15:10	Photos	Normal	Photos 2018-3-20
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 20 Mar 2018 15:10	Photos	Normal	Photos 2018-3-20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 20 Mar 2018 15:10	Photos	Normal	Photos 2018-3-20

Video List

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