

NATIONAL Assessment Centre Services (001 720 000) **NA448640754**

Date In: **26/03/2018 15:43** Job description: **SAS e-illing** Date & Time Completed: **26/03/2018 16:15** Done by: **16/15**

Ref No: **NA448640754** E-mail (within 3hrs, NO 2hrs)

Veh No: **SGV 4005B** f-Motor Claim Form **M710987686**

P.O.A: **24/03/2018 17:20** f-Motor VVO (within 3hrs, NO 2hrs)

OD / TP: Reporting Only i-Photo Uploaded

TP Insureh: Assessment/Survey Report

Ass't Report by Fax/Hand to Owner/VWsp

Preferred Wksp / INC Assign Wksp / OWI ( ) Tell ( ) Fax ( )

TP Particulars: Yeh No: **EY 1292B** INC ( ) / Non-INC ( )

Owner / Drivers ( ) Tell ( )

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

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

Insured/Driver Liability: ( ) % (Note: BSL Status (WO): N: 0-20% P: 21-79% P: 30-100%)

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: ( ) Apply for Transition Allowance ( ) / Courtesy Car ( )

( ) QC Check / Post Repair Inspection ( )

( ) Upload Resurvey Photo (Repair Cost > \$3000) ( )

Injury: ( )

On-site Actions: ( )

**NA4801916**

Invoice Preparation Checklist:

Item	Amount	Notes
1) AR: Accident Reporting (\$300)		
2) DA: Damage Assessment (\$100)		INC (\$40)
3) TP: Towing Fee	\$40/\$12	
4) FT: Follow-Through Survey	\$100	
5) FT: Follow-Through Survey (Resurvey)	\$10	
Perkinsplus against INC Only (over 10 Jan 2018)		
6) TR: Re-inspection	\$10	
7) NI: Inc DA + SMART Survey	\$100	
8) NTUC Additional Services		
Other:		
NI: Courtesy Car / Tpl Allowance	\$5	
NI: Repairs Coordination	\$10	
NI: Post Repair Inspection	\$10	
NI: DY / Collision Under Coordination	\$5	
TP (NI): TP (Non-INC) against INC	\$10	
NI: Tolls / Tolls	\$0	

Checked by (Under-In-Charge):

Invoice dated: **27/3** File Charged: **27/3**



## 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	26/03/2018 15:43
Date Of Accident	24/03/2018 17:20
Exact Location Of Accident	AYE TOWARDS CHANGI
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGV4205B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SMOOTH DR
Co Reg No	53322030X
Email Address	TANCKI@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-98244086
Alternative Phone No	OFFICE-98244086

### Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5076230651-02
Cover Note Number	

### Driver

Name of Driver	TAN CHEE KIONG
NRIC No	S1479413A
Date Of Birth	21/08/1961
Occupation	INDOOR
Date Of Driving Pass	29/07/1993
Driving Experience	24 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98244086
Fax Number	
Contact Number	OTHERS-98244086
Email Address	TANCKI@SINGNET.COM.SG

Address	BLK 681A JURONG WEST CENTRAL 1 #14-96
Postcode	641681
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 DUKE ROAD , POSTCODE: 268914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4629999 - FAX NO: 64628933
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	EY1292B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DONOVAN TAN JUN KAI
NRIC/Passport Number	S9012193F
Contact Number	97368494
Address	
Postcode	

Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGF9417H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	LOKMAN BIN ABDUL LAZI
NRIC/Passport Number	S8238119H
Contact Number	90061912
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 26/3/18  
11:30 AM

Driver's Signature

(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

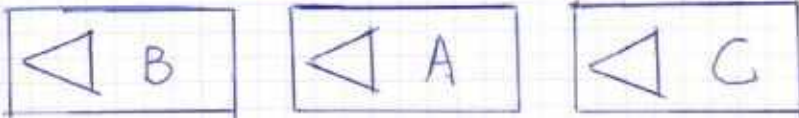
26/03/2018

Resli Khatib



SKETCH PLAN

AYE

Lane ① 

Lane ②

Lane ③

Vehicle A = SGV 4205B

Vehicle B SGF 9417H


Vehicle C EY 1292B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24/3/18, 5.20pm, I was driving on the 1<sup>st</sup> lane of AYE toward Changi direction. The vehicle SGF 9417H which in front of me applied brake to stop, I also applied brake to stop, however, the car at my back EY 1292B unable to stop on time and hit my vehicle SGV 4205B from the back, my vehicle was therefore pushed forward and hit the back of the front vehicle SGF 9417H. This resulted my rear vehicle seriously damage and minor damage on the front.

DECLARATION

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



Policyholder's Signature  
Date & Time: 26/3/18  
11:30 AM

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

  
26/03/2018

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

## NOTICE OF REPORTING

This is to confirm that Tan Chee Kiong, NRIC: S1479413A, Tel: 98244086 has reported to the Police a non-injury traffic accident which occurred AYE towards Changi on the 1<sup>st</sup> lane on 24/03/2018 about 05:20 pm involving the following vehicle:

Vehicle A (Complainant) – SGV4205B (Middle)

Driver – Tan Chee Kiong

S1479413A

B/618 Jurong West Central 1 #14-96

Ctt: 98244086

Vehicle B (Car) – SGF9417H (Infront)

Driver – Lokman Bin Abdul Lazi

S8238119H

Ctt: 90061912

Vehicle C (Car) – EY1292B (Behind)

Driver – Donovan Tan Jun Kai

S9012193F

Ctt: 97368494

- i) No government property damaged.
- ii) No ambulance or police attended.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt (2) T150529 Heede

Date: 25/03/18

Time: 04.23 pm

SD: 20

Police Post/Unit: Bukit Timah Neighbourhood Police Centre

Original - to be issued to informant  
Duplicate - to be submitted to Traffic Police

## Claim Handling

Accident MT/0987686

Policy No.	5076230651-02	Vehicle No.	SGV42058	GST Registration No.	
Policyholder Name	SMOOTH DR			Policyholder NRIC	
Product Code	PRIVATE CAR INSURANCE	Cover Type	Drive CLASSIC	Loading	
Contact No.(Mobile)	98244086	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	TCA	<input type="radio"/> No <input checked="" type="radio"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	Yes

**Accident Details**

Report Date	26/03/2018 16:05	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	24/03/2018	Time of Accident hh:mm	17:20	Country of Accident	Singapore
Reporting Centre		Orange Force		JCM No.	
Accident Location	AYE TOWARDS CHANGI				

**Benefits**

**Excess**

Own Damage Excess	2,000.00	Additional Excess	0.00	Windscreen Excess	
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	No
Modification History			

**Policyholder Mailing Address**

Address 1	BLK 681A #14-96	Address 2	JURONG WEST CENTRAL 1	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	14-96	Related Policy Number	5076230651-02		

**OI Driver Info**

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TAN CHEE KIONG	Driver NRIC	S1479413A	Driver DOB	
Register Date of Driver License	29/07/1993	Driver Age	56	Driving Experience	
Contact No.(Mobile)	98244086	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 681A #14-96	Address 2	JURONG WEST CENTRAL 1	Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.	14-96				
Does he own a Singapore Registered car?	Yes <input checked="" type="radio"/> No <input type="radio"/>	Driver vehicle No.	SGV42058	Driver Insurer Company	

**Declaration**

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

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	SMOOTH DR	Insured NRIC	
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	
Email Address		OT Vehicle Number	SGV42058	TP Vehicle Number	
Claim Description	SGV42058 / FY1252B ON 24 Mar 2018				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	
Date Registered	26/03/2018 16:15	Claim Close Date		Total Loss but Repaired	
Report Taken By	RDSLI WAHAB	Workshop Repairer			
<input type="checkbox"/> Print AK letter					

Save Submit

## Attachment

or:

Accident No.	MT/0987686	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	26/03/2018 16:16
Path *		Category *	Confidential <input type="radio"/> Urgency <input type="radio"/>
		Browse... Clear	Please Select <input type="radio"/> Normal <input type="radio"/>



<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	Normal
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<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	Normal

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	De
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Mar 2018 16:16	SAS	Normal	SAS
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Mar 2018 16:14	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Mar 2018 16:13	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Mar 2018 16:13	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Mar 2018 16:13	Photos	Normal	Photo
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Mar 2018 16:11	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"/>

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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7. By the judgement 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 26 03 18  
Date Of Accident / Time 24 05 18 1720 PM  
Exact Location Of Accident AYE TOWARDS CHANGI  
Country/State of Loss

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SGV 4205B  
Insured/Policyholder  
Name Of Registered Owner / COMPANY SMOOTH DR  
NRIC No / CO-REG NO.  
Email Address TANCKI @SINGNET.COM-SG  
Mobile Phone No 98244086  
Alternative Phone No  
Vehicle Particulars  
Manufacturer TOYOTA  
Model AXIO  
Exact Purpose for which vehicle was being used WORK (PTE HIRE)  
at time of accident  
Are you claiming under your own insurance policy NO  
for repair to your vehicle?  
If No, Please state action to be taken CLAIM THIRD PARTY  
Vehicle Category PTE HIRE  
Insurance Company NTUC  
Name of Insurance Company  
Type Of Coverage COMPREHENSIVE  
Fleet Policy  
Policy Number 5076730651-02  
Cover Note Number  
Driver  
Name of Driver TAN CHEE LIONG  
NRIC No S1479413A  
Date Of Birth 2108/61  
Occupation  
Date Of Driving Pass 2907/1993  
Driving Experience  
Gender  
Mobile Number 98244086  
Fax Number  
Contact Number  
Email Address

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S1479413A**

Name: **TAN CHEE KIONG**

Birth Date: **21 Aug 1961**

Issue Date: **08 Jan 2004**

001010295F




REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S1479413A**



Name

**TAN CHEE KIONG**

陳治權

Race

**CHINESE**

Date of birth

**21-08-1961**

Sex

**M**

Country of birth

**SINGAPORE**



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

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

PASS DATE: **29 Jul 1992**

79R 425

License No: **S1479413A**


4100905

NRIC No. **S1479413A**



Date of issue

**04-10-2007**

Address

**APT BLK 661A JURONG WEST CENTRAL 1  
#14-06  
SINGAPORE 641661**



## 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:** 5076230651-02

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SGV42058**  
Chassis Number : **NZE1416034180**
2. Name of Policyholder : **SMOOTH DR**
3. Effective Date of Insurance : **02 Jan 2018**
4. Expiry Date of Insurance : **01 Jan 2019**
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 or Hirer's business.

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
  - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
  - (c) 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\$2,000
EXCESS (SECTION 2)	: S\$1,500
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	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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 : INCOME-CUSTOMER DEPT (00000600002)  
Date of Issue : 02 Jan 2018 16:25 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive