

NATIONAL Assessment Centre Services. (Unit 1 Jan 2008)

Date In: 27/3/2018 13:09	Job description	Date & Time Completed	Done by
Ref No: NA/EQI18005657/K4	SAS e-filing		
Veh No: SLP7250Y	E-mail (withins 3hrs, AIC 3hrs)		
D.O.A: 26/03/2018 16:40	I-Motor Claim Form		
OD / TP / Reporting Only	I-Motor W/O (withins 3hrs, TP 3hrs)		
	I-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax/ Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW: (Tel:	Fax:
TP Particulars: Veli No: SLB718K	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 repeller.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks:	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
	* GIA Report Avn4 change Act - > upload yet

Human's Particulars	Invoice Preparation Checklist	Amount	Added
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$190)	INC (\$30)	
Damaged Portion:	3) TP: Towing Fee	\$40/\$43	
	4) FT: Follow-Through Survey	\$120	
	5) FT: Follow-Through Survey (Resurvey)	\$30	
	6) TR: Re-inspection	\$75	
	7) NT: DA + SMRT Survey	\$160	
	8) NTUC Additional Services:		
	9) NT: Idms Mobile		
C. Checked by (Engr-In-Charge):	* NT: Courtesy Car / Tpl Allowance	\$5	
	* NT: Repairs Coordination	\$10	
	* NT: Post Repair Inspection	\$25	
	* NT: DY / Collect Unosss Coordination	\$5	
	TP (NT): TP (Kun INC) against INC	\$20	
	Free Charged		
	Not 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 27/03/2018 13:09
 Date Of Accident 26/03/2018 16:40
 Exact Location Of Accident PUNGGOL RD TWDS PUNGGOL FIELD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLP7250Y
Insured/Policyholder
 Name Of Registered Owner ROSET LIMOUSINE SERVICES PTE LTD
 Co Reg No -
 Email Address NOEMAIL
 Mobile Phone No (LOCAL) +65-81883121
 Alternative Phone No OFFICE-81883121

Vehicle Particulars

Manufacturer HONDA
 Model -
 Exact Purpose for which vehicle was being used at time of accident WORK
 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 HIRE

Insurance Company

Name of Insurance Company EQ INSURANCE COMPANY LTD
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number DMCFHQ17-000185
 Cover Note Number

Driver

Name of Driver TAN KWANG LOON, BERNARD (CHEN GUANGLONG, BERNARD)
 NRIC No S7220884F
 Date Of Birth 17/06/1972
 Occupation OUTDOOR
 Date Of Driving Pass 04/07/1992
 Driving Experience 25 YEARS AND 8 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-81883121
 Fax Number
 Contact Number OTHERS-81883121
 Email Address NOEMAIL

Address	BLK 223C COMPASSVALE WALK #08-661
Postcode	543223
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?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REVERT
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB718K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAY YI YAN (ZHENG YIYAN)
NRIC/Passport Number	S9204820I
Contact Number	98456010
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

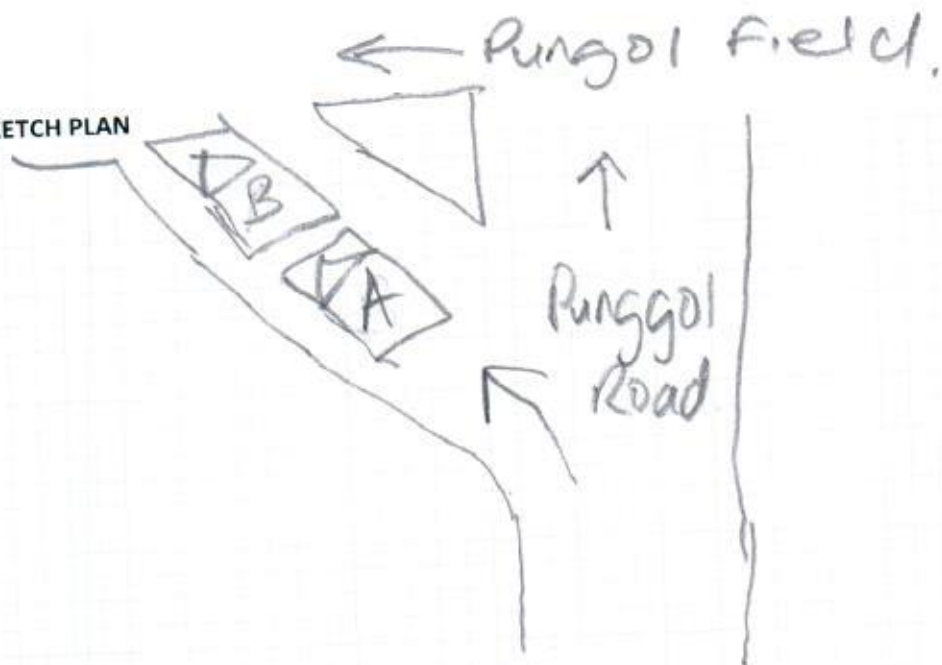


Driver's Signature
(If driver is not the policyholder)
Date & Time

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

27/3/2018

SKETCH PLAN



A - SLP7250Y
B - SLB718K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Veh A was driving along Punggol Road Altering to Punggol field. Vehicle B was in front of me at that time Veh B suddenly stop and I failed to stop and bang onto ~~the~~ the back of Veh B. as ~~at~~ the driver of Veh B. claims that a vehicle of the right side of the road, dash through her lane which caused Veh B to stop suddenly.

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.:

27/3/2018

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7220884F**



Name
TAN KWANG LOON, BERNARD
(CHEN GUANGLONG, BERNARD)
陈光龙

Race
CHINESE

Date of birth
17-06-1972

Country/Place of birth
SINGAPORE

Sex
M




REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number **S7220884F**

Name
TAN KWANG LOON, BERNARD
(CHEN GUANGLONG, BERNARD)

Birth Date **17 Jun 1972**

Issue Date **02 Jul 2003**



5180671



NRIC No. **S7220884F**



Date of issue
10-06-2013


Address
APT BLK 223C COMPASSVALE WALK
#08-661
SINGAPORE 543223

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

Class	Description	Valid Until
Class 2B	Motorcycles not exceeding 200 cc	12 Sep 1995
Class 2A	Motorcycles between 201 cc and 400 cc	17 Jun 1997
Class 3	Motor Cars and Motor Tractors the weight of which (including) does not exceed 2500 kilograms	04 Jul 1992

NP 428A

License No. **S7220884F**



EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg
reg no. 1978-00490-N

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**COMMERCIAL VEHICLE FLEET
Comprehensive****Certificate No.: DMCFHQ17-000185**

1. **Index Mark and Registration Number of Vehicles**
SLP7250Y

2. **Name of Policyholder**
ROSET LIMOUSINE SERVICES PTE. LTD.

3. **Effective Date of the Commencement of Insurance for the purpose of the Act**
01/11/2017

4. **Date of Expiry of Insurance**
31/10/2018

5. **Person or Classes of Persons entitled to drive***
Any person who is Authorised to drive on the Insured's order or with their 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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. **Limitations as to use***
LIMITATIONS AS TO USE

Use for social domestic and pleasure purposes and business purposes of any person whom the vehicle is hired

THE POLICY DOES NOT COVER

- (1) Use for racing pace-making reliability trial or speed-testing
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle

*Limitations rendered inoperative by Section 8 of the Motor vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I\WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or and Amendment, Act or Acts passed in substitution thereof.

Form: LCVH
Excess:
Section 1 SGD1,500.00
Outside Singapore SGD1,500.00
Section 2 SGD2,000.00
Outside Singapore SGD2,000.00
YEIDR (Section 2) SGD4,000.00

unwjt/HO/B000042/NEWSTATE STENHOUSE (



A Member of Citystate

Authorised Signatory
EQ Insurance Company Limited

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA118041271 Vehicle Registration No: SLP7250Y
Name(as shown in NRIC) : TAN KWANG LOON, BERNARD ^(*HEN HUANG LONG, BERNARD) NRIC/FIN/Passport No : S7220884F
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 223C COMPASSVALE WALK #08-661 Singapore(543923)
Contact (Tel) : — Mobile No. : 81883121
Email Address : NOEMAIL
Date of Accident : 26/3/2018 Time of Accident : 16:40
Place of Accident : PUNGGOL RD TWOS PUNGGOL FIELD
Insurance Company : EQ INSURANCE COMPANY LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend the Driver Vehicle number.

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: 4/4/2018