

NATION 11 Assessment Centre Services

Date In: 06/04/18	Job description	Date & Time Completed	Done by
Ref No: NA/04/18006390/13	SAS e-filing		
Veh No: SKX78575	E-mail (within 8hrs, Aft 2hrs)		
EQ A: 06/04/18 0705	i-Motor Claim Form		
OD: (1P) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (PRECISE)	Tel:	Fax:
TP Particulars:	Veh No: SHA6236Y	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

Claimant's Particulars :-	Invoice Preparation Checklist	Ant (\$) 1st Bill	Ant (\$) Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100), INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors' Comments :-	5) RT: Follow-Through Survey (Resurvey) \$30		
Cat. 1:	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 2/3:	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
	Invoice dated	Fee Charged	
	Invoice dated	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	06/04/2018 14:05
Date Of Accident	06/04/2018 07:05
Exact Location Of Accident	TRAFFIC JUNC ALONG KB RD 4 & BEDOK RESERVOIR RD.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX7857S
Insured/Policyholder	
Name Of Registered Owner	CHAN, YORK MENG
NRIC No	S7424330D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91577497
Alternative Phone No	OTHERS-91577497

Vehicle Particulars

Manufacturer	KIA
Model	FORTE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00438653
Cover Note Number	

Driver

Name of Driver	YAP BEE LENG
NRIC No	S1657314J
Date Of Birth	05/12/1964
Occupation	INDOOR
Date Of Driving Pass	03/06/2008
Driving Experience	9 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91152646
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 668 JALAN DAMAI #06-75
Postcode	410668
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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?	YES
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)	3
Passenger 1	NAME: : CHAN WAY YI GENDER: : FEMALE
Passenger 2	NAME: : CHAN JIA YI 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

PLS REFER TO THE ATTACHED STATEMENT.

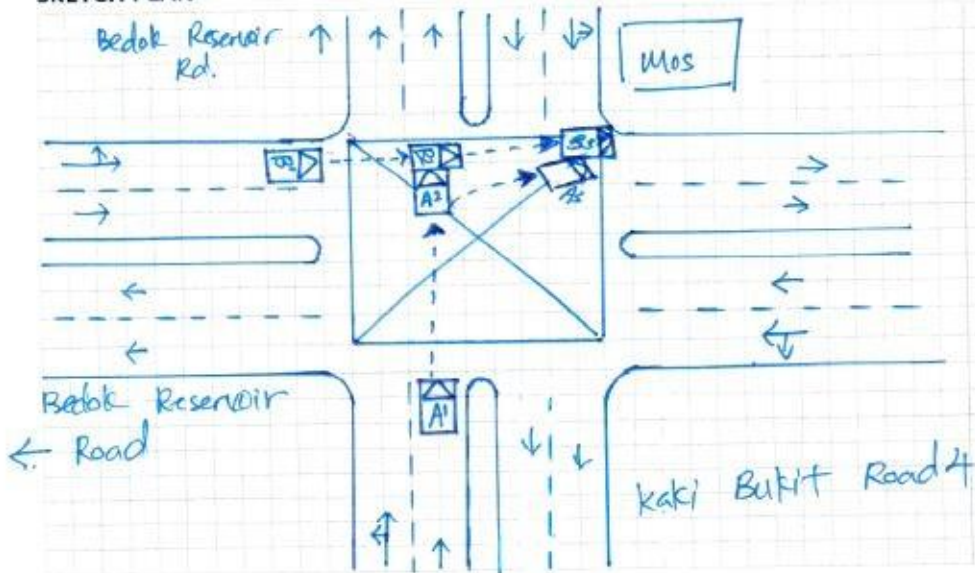
Attachment(s)

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	SHA6236Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	NEO GUAN BENG
NRIC/Passport Number	S7143433H
Contact Number	82680469
Address	
Postcode	

SKETCH PLAN



(A) SKX 7857S
(B) SHA 6236Y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On said date and time of the accident, I was driving my car (SKX 7857S) with my 2 childrens, stationary at the junction of Kaki Bukit Road 4 and Bedok Reservoir Road waiting for the green light turn into my favour. When the traffic light turn green in my favour i proceed to go straight and while crossing the traffic junction suddenly i felt an impact come from front and i realized that vehicle B (Taxi: SHA 6236Y) dashed out from left side traffic junction without stop even traffic light still on red in his side. Due to the impact my car being pulled to the right and stop. Hence, I hereby lodge this report to claim against Veh B (SHA 6236Y)'s Insurance for my accident damages & Injury claim for me & my 2 passengers

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:

06/04/18

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

VEHICLE NO : SKX 7857S

MAKE & MODEL : Kia. Forte K3.

Date of Accident	06 / 04 / 18		
Time of Accident	0705 AM / PM		
Location of Accident	Traffic Junction along KB Road & Beddo Reservoir Rd.		
Exact Purpose Usage	<input checked="" type="checkbox"/> Personal / <input type="checkbox"/> Private Hire (Uber / Grab) / <input type="checkbox"/> Commercial		
NAME OF OWNER :	Chen York Meng		
Contact No.	9157 7497		
Nric No	S7424330D		
Type Of Claim	<input checked="" type="checkbox"/> Third Party / <input type="checkbox"/> Own Damage / <input type="checkbox"/> Reporting only		
Insurance Co.	Direct Asia Insurance		
Type of Coverage	<input checked="" type="checkbox"/> Comprehensive / <input type="checkbox"/> Third Party / <input type="checkbox"/> Third Party Fire & Theft		
Policy No	MT/00438653		
NAME OF DRIVER :	As above / If No : Yap Bao Leng		
Nric No	S9657314J		Any Passenger: +2
Date Of Birth	05 / 12 / 1964		
Occupation	Outdoor / <input checked="" type="checkbox"/> Indoor House wife		
Date Of Driving Pass	03 / 06 / 2008		
Gender	Male / <input checked="" type="checkbox"/> Female		
Contact no	9115 2646	Office :	Home :
Address	Blk 668 Han Danwai #06-75 S (Hatched)		
Driver Have Any Own Vehicle	<input checked="" type="checkbox"/> NO / If Yes (Reg no) :		
Relationship	Employee / If No : Spouse		Chan Way yi
Weather Condition	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Raining / <input type="checkbox"/> Other :		Chan Jia yi
Road Surface	<input checked="" type="checkbox"/> Dry / <input type="checkbox"/> Wet / <input type="checkbox"/> Other :		
Any Injuries	NO / If Yes Who?		
Name			Contact :
Name			Contact :
Police Report	No / If Yes : Where?		
Vehicle B No :	SHA 62364		Any Passenger: +1
Name Of Driver	Neo Guan Beng (S7143433H)		
Contact No :	8268 0469		
Vehicle C No :			Any Passenger:
Vehicle D No :			Any Passenger:
Vehicle E No :			Any Passenger:
Vehicle F No :			Any Passenger:
Any Witness			
Witness Contact No			
Have you been approach by unknow person soliciting (s) / offering accident claims assistance?			
			YES / <input checked="" type="checkbox"/> NO
PARTICULAR WORKSHOP	PRECISE AUTO SERVICE		
Address	1 Kaki Bukit Ave 6 #02-34		
	Kaki Bukit @ Auto Bay		
	Singapore 417883		
Email : vttloom @ hotmail . com	Tel : 6745 7367		Fax : 6841 3390

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1657314J



Name

YAP BEE LENG

叶美玲

Race

CHINESE

Date of birth

05-12-1964

Sex

F

Country of birth

SINGAPORE

S1657314J

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S1657314J

Name

YAP BEE LENG

Birth Date: 05 Dec 1964

Issue Date: 03 Jun 2008



001609001J

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7424330D



Name

CHAN YORK MENG
(ZENG YUMIN)

曾消民

Race

CHINESE

Date of birth

26-07-1974

Sex

M

Country of birth

SINGAPORE

S7424330D



4197605

NRIC No. S1657314J



Date of issue

13-03-2008

Address

APT BLK 668 JALAN DAMAI
#06-75
SINGAPORE 410668

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

PASS DATE

03 Jun 2008

Class 3A Motor cars without clutch pedals (Auto) \leq 3000kg
with \leq 7 passengers, exclusive of the driver, and
other motor vehicles without clutch pedals \leq 2500kg



Licence No: S1657314J

NP 428A



4801788

NRIC No. S7424330D



Date of issue

15-10-2012

Address

APT BLK 668 JALAN DAMAI
#06-75
SINGAPORE 410668

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

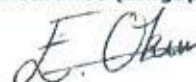
This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	: MT/00438653
Type of Coverage / Driver Plan	: Car Comprehensive (Value Plus Plan)
1) Vehicle Registration No.	: SKX7857S
Chassis No.	: KNAFZ411MF5532802
2) Name of Policy Holder	: CHAN, YORK MENG
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 29/12/2017 00:00
4) Date/Time of Expiry of Insurance	: 28/12/2018 23:59
5) Persons or Classes of Persons Entitled to Drive	
(a) The Insured	
(b) Any named person under the policy who is driving on the Insured's order or with his permission.	
(c) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Insured's order or with his permission	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
6) Limitations as to use*	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
Sum Insured	: Market Value
Own Damage Excess	: S\$ 600.00 (before any applicable GST)
Windscreen Excess	: S\$ 100.00 (before any applicable GST)
Choice of workshop	: My Workshop/ My Authorised Distributor Workshop
Finance company / Hire Purchase	:
Main driver	: CHAN, YORK MENG
Named driver	: None
Important Note: This policy does not cover drivers below the age of 30 and drivers who hold a valid driving licence of less than 2 years with the exception of the named drivers above.	

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 the Road Transport Act, 1987 (Malaysia).

Issued on: 11/12/2017

Direct Asia Insurance (Singapore) Pte. Ltd.



Edip Okur
Chief Underwriting Officer