

NATIONAL Assessment Centre Services. [wef 1 Jan 05] MNA118047336

Date In: 9/4/18 - 18:13	Job description	Date & Time Completed	Done by
Ref No: NA/LP18006551/24	SAS e-filing		
Veh No: 2P1530D	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 7/4/18 - 13:40	i-Motor Claim Form		
OD: TP 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: Vch No: PC5714K 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%. P: 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

NA1802168 Claimant's Particulars :- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge): Auditors' Comments :- Cat. 1: Cat. 2 / 3:	Invoice Preparation Checklist		Am't (\$) In Bill	Am't (\$) Add Bill
	1) AR : Accident Reporting (\$30);			
	2) DA : Damage Assessment (\$100); INC (\$80)			
	3) TF : Towing Fee \$40/\$45			
	4) FT : Follow-Through Survey \$120			
	5) FT : Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR : Re-inspection \$75			
	7) N1 : Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	QD*			
	*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	09/04/2018 18:13
Date Of Accident	07/04/2018 13:40
Exact Location Of Accident	ALONG TANJONG KATONG RD BEFORE BUS STOP-82099
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP1530D
Insured/Policyholder	
Name Of Registered Owner	SENG SIU LOONG (XIN XIAOLONG)
NRIC No	S7434538G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97555416
Alternative Phone No	OFFICE-97555416

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL 1.5X CVT
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD17V06746/VPC/R00
Cover Note Number	

Driver

Name of Driver	SENG SIU LOONG (XIN XIAOLONG)
NRIC No	S7434538G
Date Of Birth	11/10/1974
Occupation	INDOOR
Date Of Driving Pass	20/04/2005
Driving Experience	12 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97555416
Fax Number	
Contact Number	OFFICE-97555416
E-Mail Address	NOEMAIL

Address	BLK 984C BUANGKOK LINK #15-47
Postcode	533984
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 - 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	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

REFER TO POLICE REPORT - T/20180407/7006.

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	PC5714K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

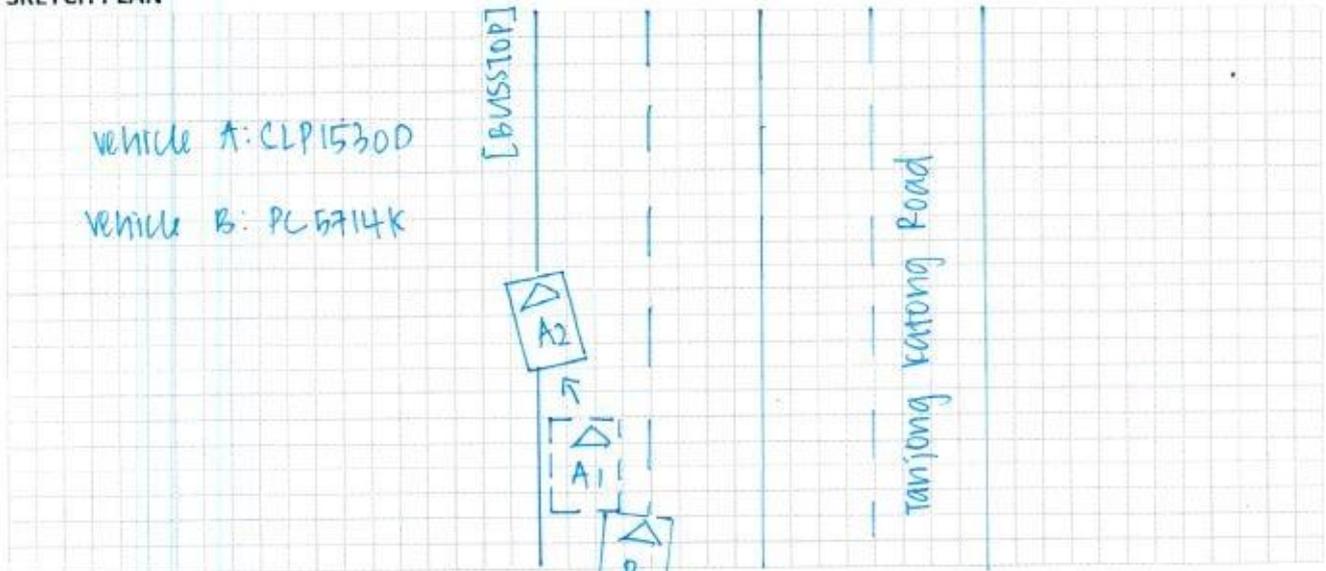
No. Of Passenger (Including Driver)

6

DETAILS OF INJURED PERSON 1

Name	SENG SIU LOONG (XIN XIAOLONG)
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLP1530D
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Refer to Police Report -

DECLARATION

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

Sirek
Policyholder's Signature
Date & Time:

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

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

ACCIDENT STATEMENT

ACCIDENT DATE: (07 / 04 / 2018) (DD/MM/YYYY), TIME: (13 : 40) (HH:MM)

LOCATION: Along Tanjong Katong Rd, before Busstop 82099

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLP 1530D
b) INSURANCE COMPANY: Liberty
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Honda Vezel
f) TYPE: (SEDAN / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Private
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: Seng Siu Loong (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S7434538G CONTACT: 97555416 / 84810669
c) ADDRESS: 984C Buangkok Link #15-47 S(533984)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

*d) DATE OF BIRTH: (11 / 10 / 1974) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 12 years

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: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: PC5714K MODEL: _____
b) DRIVER'S NAME: 1 male driver, 2 male passenger, 2 female
c) NRIC/FIN/PASSPORT: _____ CONTACT: passenger, 1 baby girl

9. THIRD PARTY VEHICLE

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

*No of passenger
(including driver)
(01)

*No of passenger
(including driver)
(06)

*No of passenger
(including driver)
()

Email = ecom autoworks@gmail.com

Fax = _____



**SINGAPORE
POLICE FORCE**



T/20180407/7006

1 of 3

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

Report No. T/20180407/7006

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/04/2018 15:46	Vide Report No.: G/20180406/0140	Station Diary No.:
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Informant's Particulars			
Name of Informant: SENG SIU LOONG		Address: APT BLK 984C BUANGKOK LINK #15-47 SINGAPORE 533984	
ID Type / ID No.: NRIC NO / S7434538G		Contact No.: Home/Office:	Mobile: 97555416
Nationality: SINGAPORE CITIZEN		Email: sengeric@gmail.com	
Sex: Male	Age: 43	Date of Birth: 11/10/1974	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: SELF- EMPLOYED		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/04/2018 13:40	Type of Location: Straight Road
Location: TANJONG KATONG ROAD ALONG TANJONG KATONG ROAD, BEFORE BUSSTOP 82099				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC5714K	Bus/Coach/Mi nibus				Seriously Damaged	6
SLP1530D	Car	HONDA	VEZEL		Seriously Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180407/7006

2 of 3

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

Report No. T/20180407/7006

CONTINUATION OF REPORT

Passenger			
Name	UNKNOWN	ID No.	UNKNOWN
Related Vehicle	PC5714K (Bus/Coach/Minibus)	Contact No.	00000000
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	07/04/2018	Date Discharge	07/04/2018
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	SENG SIU LOONG	ID No.	S7434538G
Related Vehicle	SLP1530D (Car)	Contact No.	97555416
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	07/04/2018	Date Discharge	07/04/2018
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

ON 07/04/2018 AT ABOUT 1340HR, I WAS STATIONARY ALONG TANJONG KATONG ROAD ON THE LEFT LANE, BEFORE THE BUS-STOP. I WAS STATIONARY FOR ABOUT 2 MINUTES WHEN VEHICLE NUMBER, PC5714K, SUDDENLY HIT ONTO MY VEHICLE'S REAR PORTION. THE GREAT IMPACT CAUSED MY VEHICLE TO SURGE LEFT AND MOUNTED ONTO THE KERB ON BOTH MY LEFT WHEELS.

THE PASSENGERS - 2 MALES, 2 FEMALES & A BABY, OF PC5714K WERE THEN CONVEYED TO THE HOSPITAL.



**SINGAPORE
POLICE FORCE**



T/20180407/7006

3 of 3

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

Report No. T/20180407/7006

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
NG CHWEE THENG
Contact No.: 65476397

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
07/04/2018 15:46

Classification Of Case:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7434538G



Name
**SENG SIU LOONG
(XIN XIAOLONG)**

Race
CHINESE
Date of birth **11-10-1974** Sex **M**
Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S7434538G**
Name
**SENG SIU LOONG
(XIN XIAOLONG)**
Birth Date: **11 Oct 1974**
Valid Until: **20 Apr 2005**



3634066



NRIC No. **S7434538G**

Date of issue
09-11-2004

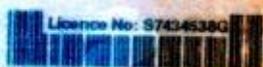
APT BLK 984C BUANGKOK LINK #15-47
SINGAPORE 633984

NRIC No: S7434538G Date: 28/09/2012 No: 7188583

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

Class 3 Motor cars \leq 3000 kg with \leq 7 passengers, exclusive of the driver, and motor tractors / vehicles \leq 2500 kg

PASS DATE
20 Apr 2005



NP 426A



libertyinsurance.com.sg



Certificate of Insurance

Under (Third-Party Risks And Compensation) Act (Chapter 189) Motor Vehicles (Third Party Risks And Compensation) Rules 1950 (Malaysia); Road Transport Act 1987 (Malaysia); Motor Vehicles (Third-Party Risks) Rules 1950 (Malaysia)

Name of Policyholder:

NG SIU LOONG (XIN XIAOLONG)

Certificate No.:

SD17V06746/ VPC / R00

Date of Issue:

30 May 2017

Effective Date of Commencement:

26 May 2017 14:27

Date of Expiry:

25 May 2018 23:59

Registration No.:

SLP1530D

Chassis No.:

RU11207862

Type of Certificate:

MX1

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 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials or speed-testing
- C) Use for the carriage of goods (other than samples) in connection with any trade or business
- D) Use for any purpose in connection with the Motor Trade.

*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.

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).

For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers

For Information Only:

Coverage(s):

Comprehensive, Unlimited Windscreen

Sum Insured:

MARKET VALUE AT THE TIME OF LOSS

Excess:

Section I - Named Drivers: S\$500, Section I - Unnamed Drivers: S\$1000, Additional Excess for Young, Elderly & Inexperienced Drivers: S\$3000, Windscreen Excess: S\$100

Name of Finance Company:

OVERSEA-CHINESE BANKING CORPORATION LTD

Name of Producer:

SMARTCARS BOUTIQUE PTE LTD (A1722)