

# NATIONAL Assessment Centre Services

Ver: 1.0a/05/05

Date In: 21/04/2018 15:15  
Ref No: NR/MSG 18007388/ky  
Veh No: FBL 56295  
D.O.A: 13/04/2018 16:00

Job description

Date & Time Completed

Done by

SAS e-filing

E-mail (within 8hrs, AIC 2hrs)

i-Motor Claim Form

i-Motor W/O (Within: OD 2hrs, TP 4hrs)

i-Photo Uploaded

Assessment/Survey Report

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

OD TP: Reporting Only

TP Insurer:

Tel:

Fax:

Preferred Wksp / INC Assign Wksp / QW: (

TP Particulars:

Veh No: SCE7575A

INC ( ) / Non-INC ( )

Tel:

Owner / Driver: (

Cover Type: (

Policy No: (

Period: (

Date:

Time:

Confirmed by: (

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)

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo [Repair Cost > \$3000] ( )

Injury:

Date/Time

Actions

Date & Time Completed

Done by

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Cal 1:

Cal 2/3:

## Invoice Preparation Checklist

	Am't (\$)	Am't (\$)
	1st Bill	Add Bill
1) AR: Accident Reporting (\$30);		
2) DA: Damage Assessment (\$100); INC (\$30)		
3) TF: Towing Fee	\$40/\$45	
4) FT: Follow-Through Survey	\$120	
5) i-T: Follow-Through Survey (Resurvey)	\$30	
For claiming against INC Only (wef 10 Jan 2005)		
6) TR: Re-inspection	\$75	
7) NI: Idac DA + SMRT Survey	\$160	
8) NTUC Additional Services:-		
OD*	\$5	
*N5: Courtesy Car / Tpt Allowance	\$10	
*N6: Repair Co-ordination	\$25	
*N7: Post Repair Inspection	\$5	
*N8: DV / Collect Excess Coordination	\$20	
TP (N11): TP (Non INC) against INC	\$30	
9) N12: Idac Mobile		
Invoice dated		
Invoice dated		

Fee Charged  
Fee Charged

NA1802542



## 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	21/04/2018 15:15
Date Of Accident	13/04/2018 16:00
Exact Location Of Accident	BLK 26 KELANTAN RD CARPARK (JALAN BERSEH )
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBL5629S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIM TECK HEE
NRIC No	S1245867C
Email Address	HEE.MSG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96840951
Alternative Phone No	OTHERS-96840951
<b>Vehicle Particulars</b>	
Manufacturer	SUZUKI
Model	UH200AL6 BURGMAN 200 ABS
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	REPORTING ONLY
Vehicle Category	MOTORCYCLE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/17-374168-CA
Cover Note Number	

### Driver

Name of Driver	LIM TECK HEE
NRIC No	S1245867C
Date Of Birth	09/11/1957
Occupation	OUTDOOR
Date Of Driving Pass	13/02/1985
Driving Experience	33 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96840951
Fax Number	
Contact Number	OTHERS-96840951
EMail Address	HEE.MSG@GMAIL.COM

Address	BLK 888 TAMPINES STREET 81 #09-1094
Postcode	520888
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	
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)	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?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SCE7575A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
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.:

21/4/2018

SKETCH PLAN



A - FBL5629S  
B - SCE757SA

along BLK26 KELANTAN ROAD  
CARPARK (JALAN BERSEH)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Motorcycle A was driving along BLK26 Kelantan Road Carpark (Jalan Berseh) while Motorcycle A turning Left slightly hit on Vehicle B Left side bumper portion.

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.:

21/4/2018



**MSIG**

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)  
4 Shenton Way, #21-01 SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6225 7402  
www.msig.com.sg

Your Ref : FBL5629S  
Our Ref : MSC/V/18-000559 (Please quote our reference when replying)

18 Apr 2018

**URGENT**

LIM TECK HEE  
BLK 888 TAMPINES ST 81  
#09-1094  
SINGAPORE 520888

Dear Sir/Madam

**Accident involving FBL5629S and SCE7575A along BLK 26 KELANTAN ROAD CARPARK (JALAN BERSEH)**  
**Policy No : MSD/VMS/17-374168**  
**Date of Accident : 13 Apr 2018**

We have received a property damage claim from BH Auto Services Pte Ltd acting on behalf of the owner of SCE7575A. However, we have yet to receive your report on the accident.

Under the Motor Claims Framework, motorists are required to report any traffic accident involving their insured vehicles to their insurers within 24 hours of the accident or by the next working day. Any non-reporting may affect the motorist's No Claim Discount and their rights to seek indemnity under their policy.

We urge you to make a report immediately at any of our authorized workshops or IDAC centres. The list is enclosed for your reference. Please bring your vehicle and the following documents with you:

1. Driving license
2. Identity card
3. Police report, if any

If you have already filed an accident report, please accept our thanks and ignore this reminder.

Thank you.

Yours sincerely

Fievel Foo Wenyao  
Executive  
Claims Services

Tel : 6643 1316  
Fax : +65 6225 7402  
Email : fievel\_foo@sg.msig-asia.com

A Member of MS & AD INSURANCE GROUP



Reported on 21/4/2018  
@ 1105AM

## ACCIDENT STATEMENT

ACCIDENT DATE: 13/4/2018 (DD/MM/YYYY), TIME: 16:00 (HH:MM)  
LOCATION: Blk 26 Kelantan Rd Campak (Jalan Bersih)

### 1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: FBL5629S  
b) INSURANCE COMPANY: \_\_\_\_\_  
c) POLICY NUMBER: \_\_\_\_\_  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: \_\_\_\_\_  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: \_\_\_\_\_  
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: \_\_\_\_\_ (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

a) NAME: \_\_\_\_\_ (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 96840951  
c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: (\_\_\_\_/\_\_\_\_/\_\_\_\_) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: \_\_\_\_\_

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) OWNER

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

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: SC67575A MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_

### 9. THIRD PARTY VEHICLE

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

email =


fax =

hee.msg@gmail.com

hee.msg@gmail.com



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1245867C




Name  
LIM TECK HEE

林德喜

Race  
CHINESE

Date of Birth 09-11-1957 Sex M

Country of Birth  
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



IDENTITY NUMBER S1245867C

Name  
LIM TECK HEE

Birth Date: 09 Nov 1957

Issue Date: 27 Dec 2016

002642067K

1650966



NRIC No S1245867C



Blood Group: O+ Date of issue: 03-02-1994

Address  
APT BLK 888 TAMPINES STREET 81  
#09-1094  
SINGAPORE 1852

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

EFFECTIVE DATE  
13 Feb 1985

Class 2B Motorcycles <= 200 cc

96840951

NP 428A

Licence No: S1245867C





**MSIG****CA 496300**

**MSIG Insurance (Singapore) Pte. Ltd.** (Co. Reg. No. 200412212G)  
 4 Shenton Way, # 21-01, SGX Centre2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 www.msig.com.sg

**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.

CERTIFICATE NO : **MSD/VMS/17-374168-CA A0074-001/10223**

SUM INSURED : **PMV**

EXCESS : **\$300(FIRE&THEFT) \$600(ENDT 2K)**

1. F- mark and Registration Number of Vehicle **FBL5629S**  
**SUZUKI** **200 c.c.**
2. Name of Policyholder **LIM TECK HEE**
3. Effective date of the Commencement of Insurance  
 for the purposes of the Act **1201AM 09/12/2017**
4. Date of Expiry of Insurance **08/12/2018**
5. Persons or Classes of Persons entitled to drive  
**a. The Policyholder.**

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 and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitation as to Use

**Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.**

7. The Policy does not cover

1. use for hire or reward.
2. Use for racing, pace-making, reliability trial or speed-testing.
3. Use for the carriage of goods (other than samples) in connection with any trade or business.
4. 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.

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).

Repl CN: 72046300

14/11/2017 (KP)

CA-CI-03 (05-13)

**COMMERCIAL AGENCY PTE. LTD.**

Underwriting Agent

For **MSIG Insurance (Singapore) Pte. Ltd.**