

NATIONAL Assessment Centre Services [wef 1 Jan 2005] **MMA 118056935**

Date In: 21/5/18 10:37	Job description	Date & Time Completed	Done by
Ref No: MA/INC18007952/64	SAS e-filing		
Veh No: SLC 3114 C	E-mail (within Shrs, AIC 2hrs)		
D.O.A: 30/4/18 19:00	i-Motor Claim Form	MT10992713-001	21/5/18 19:01
OD: TP: <u>Reporting Only</u>	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: (Tel:	Fax:
TP Particulars:	Veh No: SGL 2254 A	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:- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge): Auditors' Comments:- Cat 1: Cat 2/3:	MA1802749	Invoice Preparation Checklist	Amt (\$) 1st Bill 30.00	Amt (\$) 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 / Tpl Allowance \$5				
*N6: Repair Co-ordination \$10				
*N7: Post Repair Inspection \$25				
*N8: DV / Collect Excess Coordination \$5				
TE (N11): TP (Non INC) against INC \$20				
9) N12: Idac Mobile \$0				
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 02/05/2018 10:37
 Date Of Accident 30/04/2018 19:00
 Exact Location Of Accident AYE TWDS TUAS
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLC3114C
Insured/Policyholder
 Name Of Registered Owner ETHOS LIMOUSINE SERVICES
 Co Reg No 53350518J
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-98325234

Vehicle Particulars

Manufacturer TOYOTA
 Model VELLFIRE
 Exact Purpose for which vehicle was being used at time of accident COMMERCIAL
 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 NTUC INCOME INSURANCE CO-OPERATIVE LTD
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number 5097865627
 Cover Note Number -

Driver

Name of Driver CHOW KERR CHUEN(ZHOU KEQUAN)
 NRIC No S8511081J
 Date Of Birth 17/04/1985
 Occupation OUTDOOR
 Date Of Driving Pass 01/12/2003
 Driving Experience 14 YEARS AND 4 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-98325234
 Fax Number
 Contact Number
 EMail Address NOEMAIL

Address	35 BRIGHTON AVE
Postcode	559280
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?	
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)	6
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 3	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 4	NAME: : UNKNOWN GENDER: : MALE
Passenger 5	NAME: : UNKNOWN GENDER: : MALE

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

I WAS TRAVELLING ALONG AYE TWDS TUAS ON THE FIRST LANE, WHEN NOTICED FRONT VEH BRAKE, I MANAGE MY BRAKE. MOMENT LATER I FELT AN IMPACT FROM BEHIND. AFTER THE INCIDENT, I REALIZED VEH B (BEARING NO SGL2254A) FROM BEHIND COLLIDED ONTO MY VEH REAR PORTION. BELOW IS THE YOUTUBE LINK FOR MY REAR CAR CAMERA VIDEO FOOTAGE. <https://youtu.be/s5Q6A8iUp6w>

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGL2254A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN SENG CHUAH
NRIC/Passport Number	S1670314A
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:

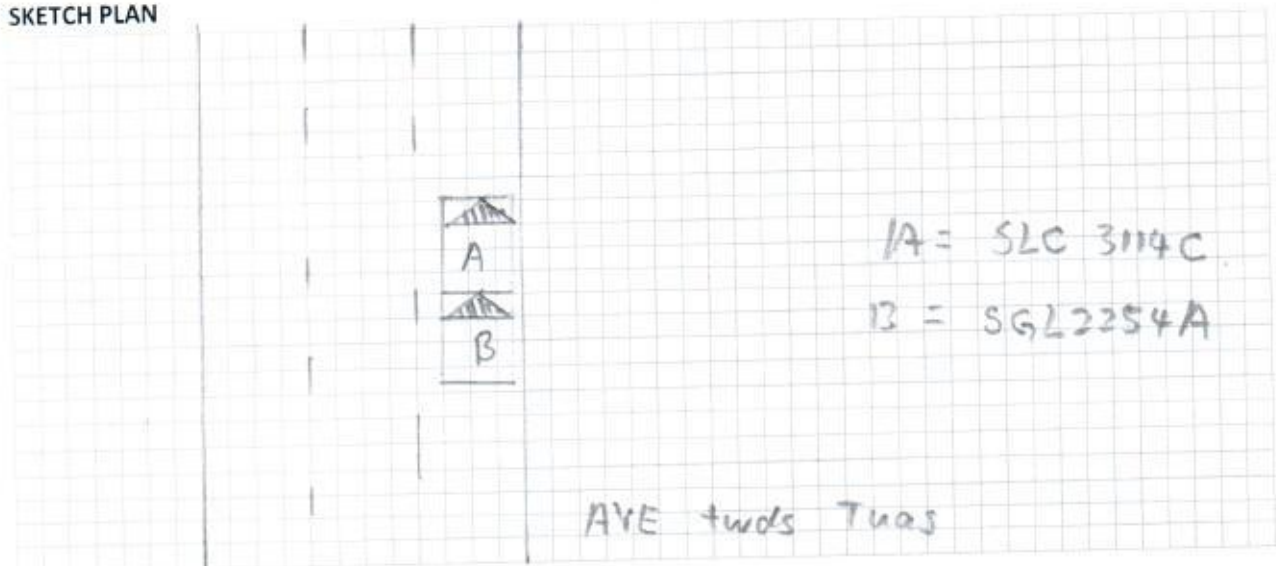
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.:

SKETCH PLAN



1A = SLC 3114C
1B = SGL2254A

AVE twds Tuar

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

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.:

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Business) of ETHOS LIMOUSINE SERVICES (53350518J)

Date: 11/11/2017

The Following Are The Brief Particulars of :

Name of Business	ETHOS LIMOUSINE SERVICES
Former Name(s) if any	
Date of Change of Name	
Registration No.	53350518J
Registration Date	17/11/2016
Commencement Date	12/11/2016
Status of Business	Live
Status Date	17/11/2016
Renewal Date	
Expiry Date	17/11/2019
Renewal via GIRO	NO
Constitution of Business	Sole-Proprietor
Principal Place of Business	35 BRIGHTON AVENUE SINGAPORE (559280)
Date of Change of Address	01/11/2017

Principal Activities

Activities (I)	PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERATOR AND TRISHAWS) (49219)
Description	
Activities (II)	
Description	

Particulars of Authorised Representative(s)

Name	ID	Nationality	Address	Address Source	Date of Appointment
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Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry
					Position

Authentication No. : L17056605B

INFORMATION RESOURCES

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Business Profile (Business) of ETHOS LIMOUSINE SERVICES (53350518J)

Date: 11/11/2017

Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position
CHOW KERR CHUEN	S8511081J	SINGAPORE CITIZEN	35 BRIGHTON AVENUE SINGAPORE (559280)	ACRA	28/10/2017 Owner

Withdrawn Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position	Date of Withdrawal
YEO GAN KHOON	S1732117Z	SINGAPORE CITIZEN	251 COMPASSVALE STREET #09-33 SINGAPORE (540251)	ACRA	12/11/2016 Owner	26/10/2017
YEO SHUN QIANG DOMINIC	S9209853B	SINGAPORE CITIZEN	801C KEAT HONG CLOSE #04-47 KEAT HONG CREST SINGAPORE (683801)	OSCARS	26/10/2017 Owner	09/11/2017

Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

Note :

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sg.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA171111145903

DATE : 11/11/2017

Authentication No. : L17056605B

INFORMATION RESOURCES

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Business Profile (Business) of ETHOS LIMOUSINE SERVICES (53350518J)

Date: 11/11/2017

This is computer generated. Hence no signature required.



Authentication No. : L17056605B

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8511081J**

Name: **CHOW KERR CHUEN (ZHOU KEQUAN)**

Birth Date: **17 Apr 1985**

Issue Date: **01 Dec 2003**

001030798A




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8511081J

Name: **CHOW KERR CHUEN (ZHOU KEQUAN)**

周科全

Race: **CHINESE**

Date of birth: **17-04-1985**

Sex: **M**

Country/Place of birth: **SINGAPORE**







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

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

Issue Date: **01 Dec 2003**

NP 428A

Licence No: **S8511081J**

5471595

S8511081J

NRIC No: **S8511081J**

Date of issue: **20-05-2015**

Address: **35 BRIGHTON AVENUE SINGAPORE 559280**




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Hello, NAC_PAYA_UBI_800601

[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.

Date of Accident

Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5097865627	ETHOS LIMOUSINE SERVICES	53350518J	GPC	drive CLASSIC	SLC3114C	SLC3114C	05/02/2018	04/02/2019

Claim Handling

Accident MT/0992713

Policy No.	5097865627	Vehicle No.	SLC3114C	GST Registration No.	
Policyholder Name	ETHOS LIMOUSINE SERVICES	Cover Type	drive CLASSIC	Policyholder NRIC	533505183
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	98325234	Special Remark		Contact No.(Home)	
Email Address		TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	Yes
Accident Details					
Report Date	02/05/2018 18:56	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	30/04/2018	Time of Accident hh:mm	19:00	Country of Accident	Singapore
Reporting Centre		Orange Force		TCM No.	
Accident Location	AYE TWDS TUAS				
Benefits					
Excess					
Own damage Excess	2,000.00	Additional Excess	0.00	Windscreen Excess	100.00
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	35 BRIGHTON AVENUE	Address 2	SINGAPORE 559280	Address 3	
Address 4		Address Type	Singapore address	Post Code	559280
Unit No.		Related Policy Number	5097865627		
OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	17/04/1985
Unnamed driver Name	CHOW KERR CHUEN(ZHOU KEQ	Driver NRIC	585110813	Driving Experience	14
Register Date of Driver License	01/12/2003	Driver Age	33	Contact No.(Home)	
Contact No.(Mobile)	98325234	Contact No.(Office)		Address 3	
Address 1	35 # BRIGHTON AVENUE	Address 2	SINGAPORE 559280	Post Code	559280
Address 4		Address Type	Singapore address		
Unit No.				Driver Insurer Company	
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input type="radio"/>	Driver Vehicle No.			
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input type="radio"/> No		

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	ETHOS LIMOUSINE SERVICES	Insured NRIC	533505183
Contact No.(Mobile)	NIL	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SLC3114C	TP Vehicle Number	SGL2254A
Claim Description	SLC3114C / SGL2254A ON 30 Apr 2018			Name of Preferred Workshop	0
Preferred Workshop Contact No.	0	Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	02/05/2018 00:00
Date Registered	02/05/2018 19:00	Claim Close Date			
Report Taken By	LIEW SHAN HUI				
<input type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.	MT/0992713	Claim No.	001
Last Doc. Received	<input type="radio"/> Yes <input type="radio"/> No	Upload Date	02/05/2018 19:01
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen		

Choose File No file chosen
 Choose File No file chosen
 Choose File No file chosen
 Message Read

Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal

Sen

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:01	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:01	SAS	Normal	SAS 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:01	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:01	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:01	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:01	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:01	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:01	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:00	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:00	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:00	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:00	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:00	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:00	Photos	Normal	Photos 2018-5-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 May 2018 19:00	Photos	Normal	Photos 2018-5-2

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Scan and uploading