

NATIONAL Assessment Centre Services

Date In 15/05/18	Job description	Date & Time Completed	Done by
Ref No NA/CTJ18008792/13	SAS e-filing		
Veh No G48932T	E-mail (within 8hrs, APC 2hrs)		
D.O.A G48932T	i-Motor Claim Form		
OD (P) 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: (AUTOWERKE AUTOMOTIVE)	Fax: ()
TP Particulars:	Veh No: G48113U 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

NA1803054	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF : Towing Fee \$40/\$45		
Damaged Portion:	4) FT : Follow-Through Survey \$120		
	5) RT : 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 -		
	ON:		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
Auditors' Comments :-	*N8: DV / Collect Excess Coordination \$5		
Cat 1:	TP (N11) : TP (Non INC) against INC \$20		
Cat 2 / 3:	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	15/05/2018 10:57
Date Of Accident	14/05/2018 10:15
Exact Location Of Accident	ALONG BKE TWDS PIE 1KM AFTER ECO BRIDGE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY8932T
Insured/Policyholder	
Name Of Registered Owner	M/S TIONG HUAT CONTRACTS PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98272443

Vehicle Particulars

Manufacturer	NISSAN
Model	-
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN3066121700
Cover Note Number	

Driver

Name of Driver	ISLAM NAZRUL
Passport No/FIN	F7556103L
Date Of Birth	08/05/1966
Occupation	OUTDOOR
Date Of Driving Pass	22/07/2017
Driving Experience	0 YEAR AND 9 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98272443
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 2 CANBERRA DRIVE #10-01 EIGHT COURTYARDS
Postcode	768138
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	KV7489B (COMMERCIAL VEHICLE)
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)	2
Passenger 1	NAME: : ISLAM SANTO GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI N.P.C
Police Station Address	ROAD: 20 CLEMENTI AVE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180514/2088

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	GU3113U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	HOSSEN NAZMUL
NRIC/Passport Number	G6820115U
Contact Number	90777217

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GZ1200M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

TAY QI HUA

NRIC/Passport Number

S9322819G

Contact Number

91727501

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

KV7489B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

OOI BOON PIN

NRIC/Passport Number

G7870581M

Contact Number

81276576

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 Authorized 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 reudiate 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:

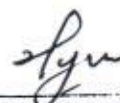
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the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

 15/05/18

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

SKETCH PLAN

		Vehicle:	
		A: GVR932T	
		B: GUR3113M	
		C: GFZ1200M	
		D: KVF489B	

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ECO-LINK Bridge

as per police report.

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.:

15/05/18



SINGAPORE POLICE FORCE



T/20180514/2088

1 of 4

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No. T/20180514/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/05/2018 14:01		Vide Report No.: F/20180514/0095		Station Diary No.: 115	
Informant's Particulars					
Name of Informant: ISLAM NAZRUL			Address: APT BLK 2 CANBERRA DRIVE #10-01 EIGHT COURTYARDS SINGAPORE 768138		
ID Type / ID No.: NRIC NO / F7556103L			Contact No.: Home/Office:		Mobile: 98272443
Nationality: BANGLADESHI			Email:		
Sex: Male	Age: 52	Date of Birth: 08/05/1966	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: Site Manager			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/05/2018 10:15	Type of Location: Straight Road
Location: Along Road 1 BUKIT TIMAH EXPRESSWAY				
Along BKE towards PIE 1KM after Eco Bridge				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
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
GU3113U	Lorry				Slightly Damaged	0
GY8932T	Lorry				Slightly Damaged	0
GZ1200M	Lorry				Slightly Damaged	0
KV7489B	Van				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20180514/2088

2 of 4

Police Station Of Origin:
Clementi N.P.C.
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No. T/20180514/2088

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	HOSSEN NAZMUL	ID No.	G6820115U
Related Vehicle	GU3113U (Lorry)	Contact No.	90777217
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	ISLAM NAZRUL	ID No.	F7556103L
Related Vehicle	GY8932T (Lorry)	Contact No.	98272443
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TAY QI HUA	ID No.	S9322819G
Related Vehicle	GZ1200M (Lorry)	Contact No.	91727501
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL



**SINGAPORE
POLICE FORCE**



T/20180514/2088

3 of 4

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No. T/20180514/2088

CONTINUATION OF REPORT

Driver			
Name	OOI BOON PIN	ID No.	G7870581M
Related Vehicle	KV7489B (Van)	Contact No.	81276576
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 14/05/2018 at about 1015hrs, I was driving my lorry bearing the registration plate number GY8932T at the 2nd lane of BKE. At the point of time it was drizzling and the road is wet. The traffic volume was heavy.

It was a slow moving traffic and I noticed that the vehicle in front of me stopped thus I slow down. At this point of time, I felt an impact coming from the rear and my vehicle inched forward and resulted that my vehicle collided into the rear of GZ1200M.

I alighted my vehicle and discovered that I am involved in a chain collision. I am the 2nd vehicle and there are three other vehicle involved. The following are the vehicle involved:

1st vehicle: GZ1200M

2nd vehicle: GY8932T

3rd vehicle: GU3113U

4th vehicle: KV7489B (Malaysian vehicle)

This is the first time such incident happened. I had exchanged particulars with the other drivers. Traffic Police and ambulance came and some of the passenger were conveyed by Ambulance. I do not have a in-car camera installed in my vehicle. There is scratches and dent at the front and rear of my vehicle. Both my front and rear headlight crack.

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No. T/20180514/2088

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

D /

Sgt 2 NG JIA HAO

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI THABAGESH JEYATHESH

Contact No.: 65476232

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

14/05/2018 14:01

Classification Of Case:



SN 37

SIGNATURE



VEHICLE NO:		MAKE & MODEL:	
DATE OF ACCIDENT	14 / 05 / 18		
TIME OF ACCIDENT	10.15	(AM / PM)	
LOCATION OF ACCIDENT	After Eco Bridge		
Exact Purpose use during accident			
NAME OF OWNER	Tiong Huat Contract Pte Ltd		
PLP NO			
KIC			
CLAIM TYPE	OD / <u>THIRD PARTY</u> / Reporting Only		
PRIVATE HIRE	YES / NO ?		
SURANCE CO.	China Taiping		
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft		
POLICY NO.	DMCVSN306621700		
NAME OF DRIVER	As above / If No: Islam Nazrul		
KIC	Any passengers: <u>01</u> Male		
DATE OF BIRTH	ISLAM SANTO		
OCCUPATION	Outdoor / Indoor		
DATE OF DRIVING PASS	22 / 07 / 2017		
ENDER	Male / Female		
NTAC NO.	48272443 Office: Home:		
DRESS			
DRIVER HAVE ANY OWN Vehicle	NO / If yes : Reg No:		
RELATIONSHIP	<u>Employee</u> / If No:		
WEATHER CONDITION	<u>Clear</u> / Raining / Other :		
ROAD SURFACE	<u>Dry</u> / Wet / Other :		
ANY INJURIES	No / If yes : Who?		
NTAC NO.			
POLICE REPORT	No / If yes : Where?		
VEHICLE B NO.	G43113U, Hossen Nazmul		Any Passenger :
VEHICLE C NO.	G21200M, Tay Qi Hua		Any Passenger :
VEHICLE D NO.	KV7489B, Ooi Boon Pin		Any Passenger :
VEHICLE E NO.			Any Passenger :
VEHICLE F NO.			Any Passenger :
WITNESS			
WITNESS CONTACT NO.			
Have you been approach by unknown person soliciting (s) /	YES / NO		
Requesting accident claims assistance?			
Particular WORKSHOP	Autowerke Automotive P/L		
NO	8 KAKI BUKIT AVE 4 #05-01/02 PREMIER BUILDING SINGAPORE 41		
CONTACT PERSON	Annabelle Lim #112 6485		
NO	6282 4290		
EMAIL :	Enquiry @ autowerke . com . sg		

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **F7556103L**
Name: **ISLAM NAZRUL**

Birth Date: **08 May 1966**
Issue Date: **22 Jul 2017**
Valid Till: **21/07/2022**

 002706271A



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

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	22 Jul 2017

NP 428A

Licence No: F7556103L





S PASS

Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer

TIONG HUAT CONTRACTS PTE. LTD.

Sector: **CONSTRUCTION**

Name

ISLAM NAZRUL

Occupation

SITE MANAGER



S Pass No.

0 6044078-

Date of Application

05-09-2016

Date of Issue

26-10-2016

Date of Expiry

26-10-2018



L7334412

VISIT PASS

Immigration Regulations

Name

ISLAM NAZRUL



Date of Birth

08-05-1966

Sex

M

Nationality

BANGLADESHI

FIN

F7556103L

Date of Issue

26-10-2016

Date of Expiry

26-10-2018

MULTIPLE JOURNEY VISA ISSUED

**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**



CERTIFICATE OF INSURANCE

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

CERTIFICATE No.

DMCVSN3966121700

Engine No : QD32210974
Chassis No: JH1SF472320854657

1. Index Mark and Registration
Number of Vehicle

GY8932T

2. Name of Policy Holder

M/S TIONG HUAT CONTRACTS PTE LTD

3. Effective date of the Commencement of Insurance for
the purposes of the Regulations, Ordinance or Enactment

15 SEPTEMBER 2017

4. Date of Expiry of Insurance

14 SEPTEMBER 2018

5. Persons or Classes of Persons entitled to drive *

ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'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 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.

6. Limitations as to use: *

- (1) USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
- (2) USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE
POLICYHOLDER'S BUSINESS.
- (3) USE FOR SOCIAL, DOMESTIC OR PLEASURE PURPOSES.

THE POLICY DOES NOT COVER:

- (1) USE FOR HIRE OR REWARD OR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED TESTING.
- (2) USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

HIRE PURCHASE CO. : THINK ONE CREDIT PTE LTD AS HP OWNER

* 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). Please see reverse
For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:



Authorised Officer

Authorised Signatory