

NATIONAL Assessment Centre Services

[wel 1 Jan'03] MNA118 066950

Date In: 23/5/18 - 10:42	Job description	Date & Time Completed	Done by
Ref No: NA/MSA/18009357/24	SAS e-filing		
Veh No: SJ18057	E-mail (within 3hrs, AIC 2hrs)		
D.O.A : 22/5/18 - 13:15	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:		Veh No: 6BE77046		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 :

[illegible]

NA1803241		Invoice Preparation Checklist		Am't (\$) 1st Bill	Am't (\$) 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) 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:-			
QC Checked by (Engr-In-Charge):		Q1:			
		* N5: Courtesy Car / Tpt Allowance \$5			
		* N6: Repair Co-ordination \$10			
		* N7: Post Repair Inspection \$25			
		* N8: DV / Collect Excess Coordination \$5			
Auditors' Comments :-		TP (N11) : TP (N11) INC against INC \$20			
Dat. 1:		9) N12: Idac Mobile 30			
Dat. 2 / 3:		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	23/05/2018 10:42
Date Of Accident	22/05/2018 13:15
Exact Location Of Accident	JUNC SIMEI RD TWDS SOMAPAH RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ1805T
Insured/Policyholder	
Name Of Registered Owner	LEE RONG YAO, BRYAN
NRIC No	S8335233G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91476419
Alternative Phone No	OFFICE-91476419

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	29043433
Cover Note Number	

Driver

Name of Driver	LEE RONG YAO, BRYAN
NRIC No	S8335233G
Date Of Birth	11/11/1983
Occupation	INDOOR
Date Of Driving Pass	17/06/2003
Driving Experience	14 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91476419
Fax Number	
Contact Number	OFFICE-91476419
EMail Address	NOEMAIL

Address	21 SOMMERVILLE ROAD #04-01
Postcode	358246
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 - 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	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)	2
Passenger 1	NAME: : KYM TAN XIAO PING GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 50 SERANGOON AVE 2 #01-02 , POSTCODE: 556129 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4880999 - FAX NO: 64883561
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180522/2110. THE DRIVER CALLED UP TO MSIG AS THE VEHICLE WAS NOT PRESENT , THE VEHICLE CURRENTLY WITH POLICE COMPOUND. THE DRIVER SPOKE TO OFFICAL NAMELY MR. ASHIK FROM MSIG HAS AGREED THAT DAMAGED PHOTOS CAN BE THROUGH EMAIL. CONTACT NUMBER: 6594 2548.

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	GBE7704G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	RAMALINGAM VENGADESAN
NRIC/Passport Number	G2147342T
Contact Number	

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)
Passenger 1

2

NAME: :

GENDER: :

DETAILS OF INJURED PERSON 1

Name
Approximate Age
Injuries Sustain
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

LEE RONG YAO, BRYAN

ARM

SLJ1805T

YES

YES

Address
Postcode

DETAILS OF INJURED PERSON 2

Name
Approximate Age
Injuries Sustain
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

KYM TAN XIAO PING

NECK

SLJ1805T

YES

YES

Address
Postcode

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:

23/5/2018

Driver's Signature

(If driver is not the policyholder)

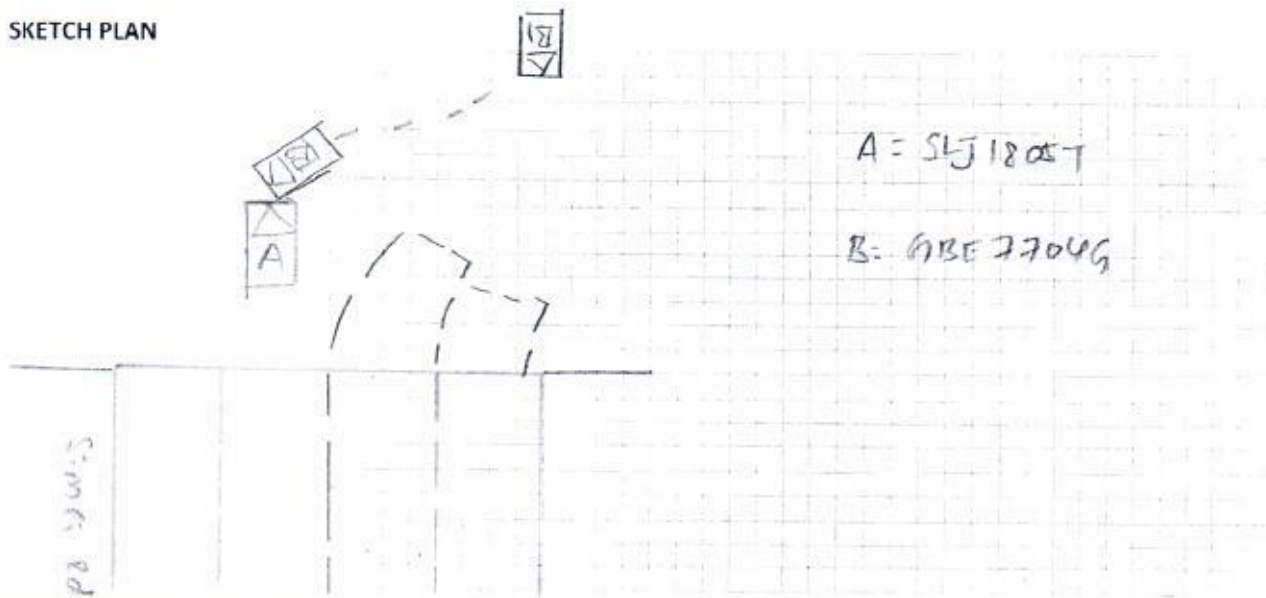
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 1/20180522/2110.

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.:



SINGAPORE POLICE FORCE



T/20180522/2110

1 of 3

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

Report No. T/20180522/2110

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/05/2018 17:09	Vide Report No.:	Station Diary No.: 45
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Informant's Particulars			
Name of Informant: LEE RONG-YAO, BRYAN		Address: 21 SOMMERVILLE ROAD #04-01 SINGAPORE 358246	
ID Type / ID No.: NRIC NO / S8335233G		Contact No.: Home/Office: Mobile: 91476419	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 34	Date of Birth: 11/11/1983	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Human Resource		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 22/05/2018 13:15	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 SIMEI ROAD SOMAPAH ROAD At the traffic junction				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head On			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLJ1805T	Car					1

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



**SINGAPORE
POLICE FORCE**



T/20180522/2110

Police Station Of Origin:

2 of 3

Serangoon N.P.C

Report No. T/20180522/2110

50 Serangoon Avenue 2 #01-02 SINGAPORE

556129

Tel No: 1800-4880999

CONTINUATION OF REPORT

Driver			
Name	LEE RONG-YAO, BRYAN	ID No.	S8335233G
Related Vehicle	NIL	Contact No.	91476419
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

Brief Details.

On 22.05.2018 at around 1315hrs, I was driving my vehicle with my colleague along Simei road towards Somapah road. The traffic up ahead was green as such I continue driving. All of a sudden, there was a lorry which was intending to turn right hit onto my vehicles front bumper. I was in shocked and immediately called for police. Shortly after, ambulance arrived and was conveyed to Changi General Hospital. I did not manage to take down the vehicle's plate number but I have an installed camera in my car. However, I did manage to take photo of the lorry's driver Ramalingam Vengadesan G2147342T.



**SINGAPORE
POLICE FORCE**



T/20180522/2110

3 of 3

Report No. T/20180522/2110

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

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:

F /

Sgt 2 MUHAMMAD ASYRAF BIN ARIS

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

22/05/2018 17:09

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt ONG YONG HOCK

Contact No.: 65476436

Classification Of Case:

SN 154

Authentication Stamp

NP168



Signature:

Singapore Police Force

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number **S8335233G**
 Name
LEE RONG-YAO, BRYAN
 Birth Date **11 Nov 1983**
 Issue Date **17 Jun 2003**

1000582828K

REPUBLIC OF SINGAPORE

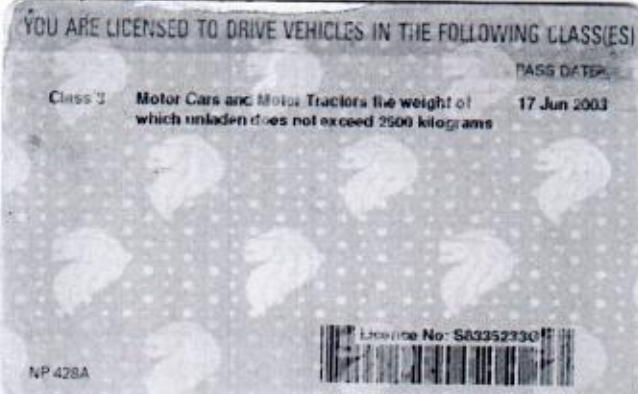

 IDENTITY CARD NO. **S8335233G**


Name
LEE RONG-YAO, BRYAN
 李 榮 耀
 Race
CHINESE
 Date of birth
11-11-1983 Sex
M
 Country/Place of birth
SINGAPORE

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

Class **1** Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms
 PASS DATE
17 Jun 2003

NP 428A



5378505



 NRIC No. **S8335233G**

Date of issue
23-10-2014
21 SOMMERVILLE ROAD #04-01
SINGAPORE 358246
 NRIC No: **S8335233G** Date: **21/05/2016**

LKK Paya Ubi

From: Muhd Ashik B Madi <ashik_madi@sg.msig-asia.com>
Sent: Wednesday, 23 May 2018 10:38 AM
To: rspu@lkkauto.com
Subject: Policy details for SLJ1805T

Dear Jackson,

As spoken, our insured's policy details as follows:

Name: Lee Rong Yao, Bryan
Policy: 29043433
Period: 30.11.17 to 29.11.18
Cover: Comprehensive

Thank you.

Ashik Madi
Executive, Claims Services (Motor)
D: +65 6594 2548 | F: +65 6225 7402 | ashik_madi@sg.msig-asia.com



MSIG



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Team of the Year
2016**

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