

NATIONAL Assessment Centre Services

[wef 1 Jan'05] MNA 118067070

Date In: 23/5/18-13:51	Job description	Date & Time Completed	Done by
Ref No: NA/INC18009376/24	SAS e-filing		
Veh No: JFW900K	E-mail (within 5hrs, AIC 2hrs)		
D.O.A: 23/5/18-10:40	i-Motor Claim Form	M10995593-001	23/5/18 14:42
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: JFW7881K	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: 67886616)	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

NA1803248	Invoice Preparation Checklist	Am't (\$) Int 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		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)		
Ref 1:	6) TR: Re-inspection \$75		
Ref 2 / 3:	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*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 (N-in 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	23/05/2018 13:51
Date Of Accident	23/05/2018 10:40
Exact Location Of Accident	JUNC TAGORE INDUSTRIAL AVE & TAGORE LN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFW900K
Insured/Policyholder	
Name Of Registered Owner	LOW YEOW BOON (LIU YAOWEN)
NRIC No	S7517386E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86865995
Alternative Phone No	OFFICE-86865995

Vehicle Particulars

Manufacturer	BMW
Model	320I AT ABS D/AB 2WD 2DR GAS/D SR
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5091938194
Cover Note Number	

Driver

Name of Driver	LOW YEOW BOON (LIU YAOWEN)
NRIC No	S7517386E
Date Of Birth	10/06/1975
Occupation	INDOOR
Date Of Driving Pass	21/09/2015
Driving Experience	2 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86865995
Fax Number	
Contact Number	OFFICE-86865995
Email Address	NOEMAIL

Address	BLK 185B RIVERVALE CRESCENT #07-111
Postcode	542185
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?	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)	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

ON STATED DATE AND TIME, WHILE I APPROACHING JUNC TAGORE INDUSTRIAL AVE, I STOPPED MY VEHICLE THE STOPPING LINE ALONG TAGORE INDUSTRIAL AVE. VEHICLE B WAS TRAVELLING STRAIGHT ALONG TAGORE LANE. SO I PROCEED TO MAKE A RIGHT TURN TWDS TAGORE LANE. SUDDENLY VEHICLE B MIGHT BE WANTED ILLEGAL U-TURN OR MAKE A RIGHT TURN TWDS TAGORE INDUSTRIAL AVE WHICH HE HAS ALREADY OVERSHOT THE JUNCTION TAGORE INDUSTRIAL AVE AND HE HIT ONTO MY VEHICLE FRONT RIGHT PORTION.

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	SFW7881K
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.:

A hand-drawn sketch map on grid paper showing a road layout. A vertical road runs through the center. To the left of this road, there are three horizontal road segments. The bottom-most segment is labeled 'Tagore Ln' written vertically. To the right of the vertical road, there are two horizontal road segments. The top-most segment is labeled 'Tagore Industrial Ave'. At the intersection of the vertical road and the top horizontal road, there are two small square markers. The top marker contains the letter 'A' and the bottom marker contains the letter 'B'. To the right of the map, there are two labels: 'A: JFW 900K' and 'B: JFW 7881K'.

Refer to statement.

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.: _____

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7517386E



Name
LOW YEOW BOON
(LIU YAOWEN)
刘耀文

Race
CHINESE

Date of Birth
10-06-1975

Sex
M

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7517386E

Name
LOW YEOW BOON
LIU YAOWEN

Birth Date: 10 Jun 1975
Issue Date: 21 Sep 2015




002475369K

SG 50

2929462




APRIC No: S7517386E

Blood Group: A+ Date of issue: 16-12-1996

APT BLK 185B RIVERVALE CRESCENT #07-111
SINGAPORE 542185
NRIC No: S7517386E Date: 10/09/2017 No: 7264545

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

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg

EFFECTIVE DATE

NP 428A



eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="23/05/2018 10:40"/>						
Vehicle No. (For Motor)	<input type="text" value="SFW900K"/>								
<input type="button" value="Search"/>									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5091938194	LOW YEOH BOON (LIU YAOWEN)	S7517386E	GPC	drivo CLASSIC	SFW900K	SFW900K	13/06/2017	24/09/2018
<input type="button" value="Continue"/>									

Policy Information

Policy No.	5091938194	Policyholder Name	LOW YEOW BOON (LIU YAOWEN)	Policyholder NRIC	S7517386E
Address	BLK 185B #07-111 RIVERVALE CRESCENT SINGAPORE 542185				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	16/06/2017	Effective Date	13/06/2017 00:00	Expiry Date	24/09/2018 23:59
Excess Type		All Claim Excess			
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0	Young/Inexperience Driver Excess	
Agent	LQ INSURANCE AGENCY PTE LT	Agent Tel.	63340783	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	BLK 185B #07-111	Address 2	RIVERVALE CRESCENT	Address 3	SINGAPORE 542185
Address 4		Address Type	Singapore address	Post Code	542185
Unit No.	07-111	Related Policy Number	5091938194		

Insured Object: SFW900K

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	13/06/2017 00:00	Basic Information Endorsement	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that from 13 Jun 2017, the following amendment(s) is/are made to this policy: PREMIUM: S\$1,374.85 (inclusive of GST) In view of this amendment, a refund of \$137.50 (inclusive of GST) will be adjusted against the outstanding premium. Hence, the balance premium of \$1374.85 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash, credit card or NETS.</p>
2	05/03/2018 00:00	POI Extension/Shorten	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that the Period of Insurance of this policy is amended as follows: PERIOD OF INSURANCE: 13 Jun 2017 TO 24 Sep 2018 In view of this amendment, an additional premium of \$430.92 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since</p>

Claim Handling

Exit

Accident MT/0995593

Policy No.	S091938194	Vehicle No.	SPW900K	GST Registration No.	
Policyholder Name	LOW YEW BOON (LIU YAO WEN)	Cover Type	drive CLASSIC	Policyholder NRIC	S7517386E
Product Code	PRIVATE CAR INSURANCE	Contact No. (Office)	0	Leading	0
Contact No. (Mobile)	85855995	Special Remark		Contact No. (Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	<input type="text"/>
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No	Private Hire	No		

Accident Details

Report Date	23/05/2018 14:41	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Cross Junction
Date of Accident	23/05/2018	Time of Accident hh:mm	10:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNC TAGORE INDUSTRIAL AVE & TAGORE LN				

Benefits

Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	800.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 185B #07-111	Address 2	RIVERVALE CRESCENT	Address 3	SINGAPORE 542185
Address 4		Address Type	Singapore address	Post Code	542185
Unit No.	07-111	Related Policy Number	S091938194		

OT Driver Info

Driver Name	LOW YEW BOON (LIU YAO WEN)	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S7517386E	Driver DOB	10/06/1975
Register Date of Driver License	21/09/2015	Driver Age	42	Driving Experience	2
Contact No. (Mobile)	85855995	Contact No. (Office)	0	Contact No. (Home)	0
Address 1	BLK 185B	Address 2	RIVERVALE CRESCENT	Address 3	SINGAPORE 542185
Address 4		Address Type	Singapore address	Post Code	542185
Unit No.	07-111				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
-------------------------------------	------	-------------	---

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	LOW YEW BOON (LIU YAO WEN)	Insured NRIC	S7517386E
Contact No. (Mobile)		Contact No. (Home)	NIL	Contact No. (Office)	
Email Address		OT Vehicle Number	SPW900K	TP Vehicle Number	SPW7881K
Claim Description	SPW900K / SPW7881K ON 23 May 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	23/05/2018 14:42	Claim Close Date		Date Received	23/05/2018 00:00
Report Taken By	Jackson				

☒ Print AK letter

Save Submit
















Attachment

Accident No.	MT/0995593	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	23/05/2018 14:44

Path *

Browse...	Clear	Category *	Confidential	Urgency *	Description *
<input type="text"/>	<input type="button" value="Clear"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Clear"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Clear"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Clear"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Clear"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Clear"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Attachment List

Attachment	uploaded By/Date	Category	Urgency	Description	Mag Sent? Action (CO)
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:44	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:44	SAS	Normal	SAS 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 May 2018 14:43	Photos	Normal	Photos 2018-5-23	Edit
Video List					
Uploaded By/Date	Folder Date	File Name	Source	Action	
		Display in New Window	Scan and uploading		