

NATIONAL Assessment Centre Services (NACS) (011 111000)

Date In: 28/05/2018 15:09

Ref No: NA/MSG18009653/K4

Veh No: S2970CD

D.O.A: 03/05/2018 06:05

OD / TP / Reporting Only

TP Insured:

Job description	Date & Time Completed	Done by
SAS e-illing		
E-mail (vehicle status, AIC status)		
E-mailer Claim Form		
E-mailer NYO (vehicle status, AIC status)		
Photo Uploaded		
Assessment/Survey Report		
Assessment Report by Fax/Hand to Owner/VWHP		

Preferred Wksp / INC Assign Wksp / OWI

TP Participant	Yell No: UNKNOWN	INC () / Non-INC ()
Owner / Drivers ()		
Policy No ()	Period ()	Cover Type ()
Confirmed by ()	Date	Time
Insured/Driver Liability ()	% (Note: BSL Status (WO): Nil 0.20%; P: 21.79%; P: 80.100%)	
Year of Registration ()	Warranty: YES () / NO ()	
Excess ()	Loading: \$1,000 () / \$2,000 ()	

General Remarks	
() Work-In Customer: Customer's information strictly Confidential & strictly NO refer of repeller.	
() Total Loss Case: To e-mail Insurer URGENTLY.	
Driver-In () / Towed-In ()	Invoice: YES () / NO ()
Towing Co ()	

Remarks	
1) Apply for Transition Allowance () / Courtesy Car ()	
2) QC Check / Post Repair Inspection ()	
3) Upload Recovery Photo (Repair Cost > \$3000) ()	

Injury:

Date/Time	Action

NA1803382

Signature/Box/Initials	Invoice Production Checklist
Driver/Owner	1) AR Incident Reporting (330)
Police No:	2) DA/Damage Assessment (330) INC (W)
Approved Portion: None	3) TP/Towing Fee (120)
	4) PT Follow Through Survey (120)
	5) PT Follow Through Survey (Recovery) (120)
	6) TR Assessment (120)
	7) NTUC Additional Survey (120)
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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	28/05/2018 15:09
Date Of Accident	03/05/2018 06:05
Exact Location Of Accident	PUNGGOL E AFT TRAFFICLIGHTOF PUNGGOLFELD EXITKPE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	S2970CD
Insured/Policyholder	
Name Of Registered Owner	EMBASSY OF THE REPUBLIC OF INDONESIA
Co Reg No	-
Email Address	PROCUREMENT@INDONESIANEMBASSY.SG
Mobile Phone No	(LOCAL) +65-88081784
Alternative Phone No	OFFICE-88081784

Vehicle Particulars

Manufacturer	TOYOTA
Model	-
Exact Purpose for which vehicle was being used at time of accident	WORK
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 CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 27797952 MCY
Cover Note Number	

Driver

Name of Driver	MUHAMMAD IAN NORMAN BIN JASMAN
NRIC No	S7833155J
Date Of Birth	30/10/1978
Occupation	OUTDOOR
Date Of Driving Pass	10/06/2016
Driving Experience	1 YEAR AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88081784
Fax Number	
Contact Number	OTHERS-88081784
Email Address	PROCUREMENT@INDONESIANEMBASSY.SG

Address	BLK 623A PUNGGOL CENTRAL
	#03-352
Postcode	821623
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	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?	YES
If Yes, Please state which Police Station	
Police Station Name	PUNGGOL N.P.C
Police Station Address	ROAD: 21A TEBING LANE , POSTCODE: 828837 , 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/20180518/2037

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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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.

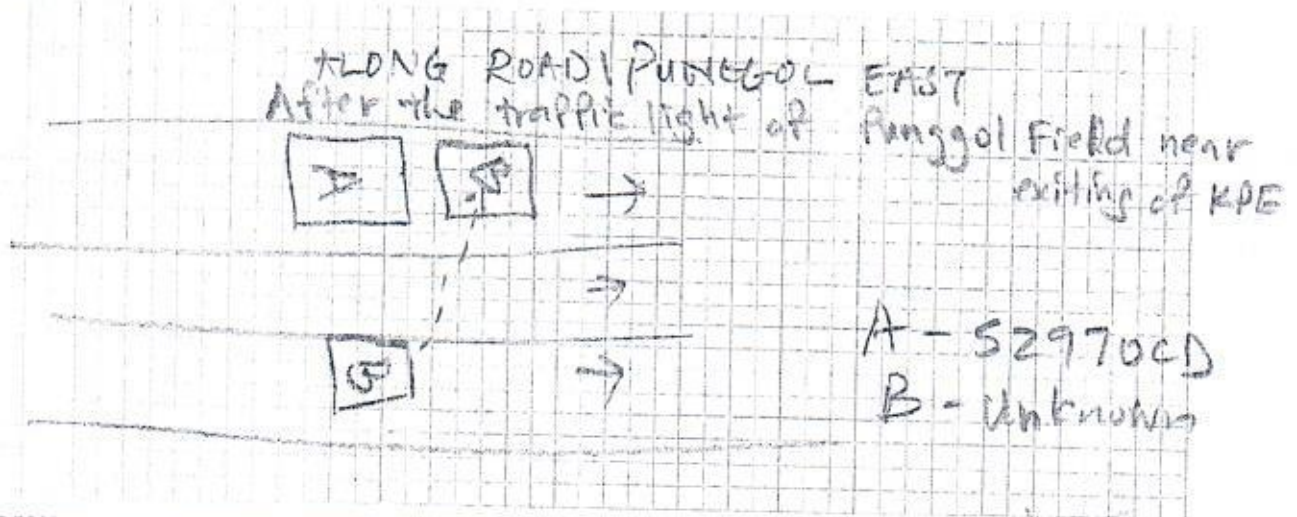


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls Refer to the Police Report
1/20180518/2037

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

Li
Driver's Signature
(If driver is not the policyholder)
Date & Time:

28/5/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180518/2037

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

1 of 3

Report No. T/20180518/2037

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/05/2018 11:24	Vide Report No.:	Station Diary No.: 11
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Informant's Particulars

Name of Informant: MUHAMMAD IAN NORMAN BIN JASMAN	Address: APT BLK 623A PUNGGOL CENTRAL #03-352 SINGAPORE 821623
ID Type / ID No.: NRIC NO / S7833155J	Contact No.: Home/Office: Mobile: 88081784
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male Age: 39 Date of Birth: 30/10/1978	Type of Informant: Driver
Race: Javanese	Language: Institution / School Name:
Occupation: EMBASSY DRIVER	Driving Licence Information: Class: 2B,2A,3A Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/05/2018 06:05	Type of Location:
Location: Along Road 1 PUNGGOL EAST				
After the traffic light of Punggol Field near exiting of KPE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
S2970CD	Car				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20180518/2037

2 of 3

Report No. T/20180518/2037

Police Station Of Origin:

Punggol N.P.C

21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

CONTINUATION OF REPORT

Brief Details.

On the 03/05/2018 at around 0605hrs, I was travelling along Punggol East with my vehicle (S2970CD (Alphalt, Toyota black in color car.), after the cross junction of Punggol East and Punggol Field. I was travelling at lane 3 with a total of 3 lanes. Before entering towards KPE, a lorry (White In color driven by an Indian, Cannot remember the plate number) from lane 1 suddenly cut into my lane and make a sudden brake. I then made a brake but hit onto back of his lorry. I then stopped my vehicle and exit from my vehicle. When I exit from my vehicle, he then left the scene immediately without leaving his particulars behind.

I wish to state that this is the first time such thing happens. I have no in-car camera in my vehicle. I make this report later as I was scared and my boss ask me to make a report on the 18/05/2018. No one was injured at that point of time.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999



T/20180518/2037

3 of 3

Report No. T/20180518/2037

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 55474885 stating the report number as reference.

Signature Of Officer Recording The Report:
F /
Sgt 2 GOH JUN JIE

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt ESTHER CHONG
Contact No: 65476368

SN 085

Signature Of Informant:

Date/Time:
18/05/2018 11:24

Classification Of Case:

Authentication Stamp
NP168

Singapore

Police Force

* Reported on 28/5/2018
@ 1330 hrs

ACCIDENT STATEMENT

ACCIDENT DATE: (03/5/2018) (DD/MM/YYYY), TIME: (06:05) (HH:MM) ^{AM}

LOCATION: Punggol East After the traffic light of
Punggol field near exit of
KPE

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: S2970CD
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: 88081784
c) ADDRESS: _____

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

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: _____

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

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: Unknown MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE


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

Email = procurement@indonesianembassy.sg

Fax = procurement@indonesianembassy.sg

Waiting for Company Chop?
& Certificate
(MSIG)

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7833155J



Name
MUHAMMAD IAN NORMAN BIN JASMAN
محمد ايان نورمن بن جاسمان

Race
JAVANESE

Date of birth
30-10-1978

Sex
M

Country of birth
SINGAPORE

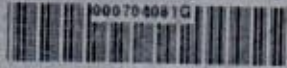
REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S7833155J**

Name
MUHAMMAD IAN NORMAN BIN JASMAN

Birth Date **30 Oct 1978**

Issue Date **31 Jul 2003**



1000704081G

4337717



NRIC No: **S7833155J**



Date of issue
15-01-2009

APT BLK 623A PUNGGOL CENTRAL #03-362
SINGAPORE 621623

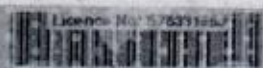
NRIC No: **S7833155J** Date: **31/06/2010**

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

CLASS	VEHICLE TYPE	VALID DATE
Class 2D	Motorcycles <= 200 CC	15 Jul 1999
Class 2A	Motorcycles between 201 CC and 400 CC	23 Oct 2001
Class 3A	Motor Cars without clutch pedals <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles without clutch pedals <= 2500 kg	30 Jun 2006

S7833155J

S / No. 9000047667



7P 128A

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 RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.4
Company Ownership

MOTORMAX PLUS-COMMERCIAL
Comprehensive

Certificate No. A 27797352 MCY

Excess : SGD1,000
Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle
S2970CD

2. Name of Policyholder
Embassy of the Republic of Indonesia

3. Effective Date of the Commencement of Insurance for the purposes of the Act
28/11/2017

4. Date of Expiry of Insurance
27/11/2018

5. Persons or Classes of Persons entitled to drive*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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*

Use only for social domestic and pleasure purposes and for the Policyholder's business.
The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or 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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.
Approved Insurers


for Chief Executive Officer