NATIONAL Assessment Centre Services

	Job description	Date & Time Completed	Done by
Date In: 30/05/2018 14:46	(NA) M1441807005		
Ref No: NBB/NIC/18009807/Y			
Veh No: SJG 5732 H	SAS e-filing		
DOA: 24/05/2018 07:50	E-mail		
OD / TP	I-Motor Claim Form	M10995831-002	31/05/2018 10:59
	I-Motor W/O		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax/ Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW ( ) Tel: Fax:)

TP Particulars: Veh No: SKZ 9445 Z INC ( ) / Non-INC ( )

Owner / Driver: (Tel:)

Policy No: ( ) Period: ( ) Cover Type: ( )

Confirmed by: (Date: Time:)

Insured/Driver Liability: (%) (Note: BL Stent (WO): NI 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 | Customers information strictly Confidential & Strictly NO sale of repairer.

( ) Total Loss Case | to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) | Invoice: YES ( ) / NO ( ) | Towing Co: ( )

Remarks | 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 | Action

NA1803474

Invoice Preparation Checklist

1) AR: Accident Reporting ($30)

2) DA: Damage Assessment ($100) INC

3) TP: Towing Fee

4) FT: Follow-Through Survey

5) FT: Follow-Through Survey (Resurvey)

For Individual Insurer NO Only

6) TR: Ad-Hoc

7) NI: Ad DA + SMRT Survey

8) NTUC Additional Surveys

OD

NI: Courtesy Car / Tpt Allowance

NI: Repair Coordination

NI: Post Repair Inspection

NI: OY / Collect Excess Coordination

NI: TP (Non INC) claims INC

NI: Hotel Mobile

Invoice Issued / Net Charges

Particulars

Driver/Owner:

Contact No:

Damaged Portion:

Checked by (Engr-In-Charge):

Wksp Comments

MNA418070059 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 30/05/2018 14:46
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 31/05/2018 10:54

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 witholding 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	30/05/2018 14:46
Date Of Accident	24/05/2018 07:50
Exact Location Of Accident	ALONG PIE TOWARDS CHANGI AIRPORT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJG5732H
Insured/Policyholder	
Name Of Registered Owner	JDG UBER
Co Reg No	53332141K
Email Address	FIEVELFOREVER@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81333752
Alternative Phone No	OFFICE-81333752
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER
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	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	5098145124
Cover Note Number	
Driver	
Name of Driver	GOH WEI LONG JACKSON(WU WEILONG JACKSON)
NRIC No	S8425836I
Date Of Birth	31/08/1984
Occupation	INDOOR
Date Of Driving Pass	23/11/2005
Driving Experience	12 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81333752
Fax Number	
Contact Number	OTHERS-81333752
EMail Address	FIEVELFOREVER@GMAIL.COM

Address	BLK 660C JURONG WEST STREET 64 #02-366
Postcode	643660
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	WET

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?	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: : NADIA GENDER: : FEMALE

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

PLEASE REFER TO SKETCH PLAN

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 Witness 1

Name	NADIA
Phone Number	81618316
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKZ9445Z
Vehicle Make/Model/Colour	HYUNDAI ELANTRA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PHANG SHIOW WEN JOSEPH
NRIC/Passport Number	S6833735F
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 2

Passenger 1 NAME: :

GENDER: :

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.

JDG UBER (Co. Reg. No. 53337141K)

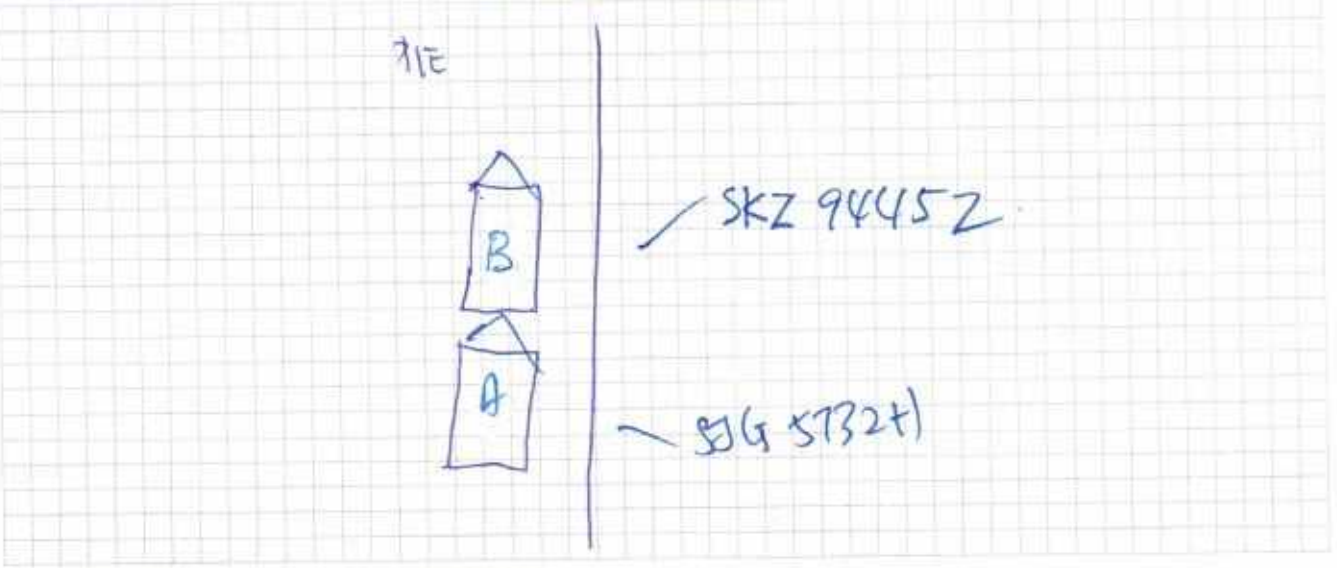
Policyholder's Signature
Date & Time:

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

30/05/2018

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

SKETCH PLAN Drove PIE towards changi airport



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

clear skies.
brakes applied but gentle knock on car in front.
Passenger as witness in car. Passenger came out to see the cars as well.
Passenger details. Nadia. S9132044D. 81618316.

DECLARATION

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

JDC JUBEE Co. Reg. No: 53332141K

Policyholder's Signature
Date & Time:

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

31/05/2018

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

Claim Handling

· Exit

Accident MT/0995831

Policy No.	5098145124	Vehicle No.	SJG5732H	GST Registration No.	
Policyholder Name	JOG UBER			Policyholder NRIC	S3332141K
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	● No ○ Yes	TCA	● No ○ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	Not available

Accident Details

Report Date	25/05/2018 10:05	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	24/05/2018	Time of Accident hh:mm	08:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG PIE TWDS CHANGI BEFORE BKE				

Benefits

Excess

Own damage Excess	2,000.00	Additional Excess	0	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	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 660C #02-366	Address 2	JURONG WEST STREET 64	Address 3	SINGAPORE 643660
Address 4		Address Type	Singapore address	Post Code	643660
Unit No.	02-366	Related Policy Number	5098145124		

OI Driver Info

Driver Name		Driver Type			
Unnamed driver Name		Driver NRIC		Driver DOB	
Register Date of Driver License		Driver Age		Driving Experience	
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	○ Yes ● No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002 | New

Claim Type *	OD-MX	Insured Name	JOG UBER	Insured NRIC	S3332141K
Contact No.(Mobile)	92280189	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SJG5732H	TP Vehicle Number	SKZ9445Z
Claim Description	SJG5732H / SKZ9445Z ON 24 May 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	31/05/2018 10:59	Claim Close Date		Date Received	31/05/2018 00:00
Report Taken By	ROSLI WAHAB				

✓ Print AK letter

Save | Submit

Attachment

Accident No.	MT/0995831	Claim No.	002
Last Doc. Received	● Yes ○ No	Upload Date	31/05/2018 10:59

Path *		Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Read

Send Message | Upload

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description	Msg Sent? (CO)	Action
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 31 May 2018 10:59	Photos		Normal	Photos 2018-5-31		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 31 May 2018 10:59	Photos		Normal	Photos 2018-5-31		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 31 May 2018 10:59	Photos		Normal	Photos 2018-5-31		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 31 May 2018 10:59	Photos		Normal	Photos 2018-5-31		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B	Photos		Normal	Photos 2018-5-31		Edit

	UKIT MERAH)) on 31 May 2018 10:59				
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	Photos	Normal	Photos 2018-5-31	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	Photos	Normal	Photos 2018-5-31	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	Photos	Normal	Photos 2018-5-31	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	Photos	Normal	Photos 2018-5-31	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	Photos	Normal	Photos 2018-5-31	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	Photos	Normal	Photos 2018-5-31	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	Photos	Normal	Photos 2018-5-31	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	SAS	Normal	SAS 2018-5-31	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 31 May 2018 10:59	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-31	Edit

Video List

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 24/05/2018 (DD/MM/YYYY), TIME: 07:51 (HH:MM)

LOCATION: BLK Towards changi Airport

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: SJG 5732H
   b) INSURANCE COMPANY: NTUC
   c) POLICY NUMBER:
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
   e) MAKE & MODEL: MITSUBISHI LANCER
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: RYDE
   i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (~~YES~~ / NO)
   IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

(2) NUMBER OF PASSANGER INCLUDING DRIVER

2. INSURED / POLICY HOLDER
   A) NAME: JDG UBER
   b) NRIC/FIN/PASSPORT: (MALE / FEMALE) CONTACT: 81333752
   c) ADDRESS: BLK 660C JURONG WEST ST. 64 #02-366 (S) 643660

* CONTINUE TO **3.d** IF DRIVER ALSO POLICY HOLDER

3. DRIVER
   a) NAME: GOH WEI LONG JACKSON (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S9425536J CONTACT: 81333752
   c) ADDRESS: BLK 660C JURONG WEST ST 64 #02-366 (S) 643660
   *d) DATE OF BIRTH: (31/05/1984) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS :: 28/11/2005
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) NO RAIN, ROAD WET
   b) ROAD SURFACE: (DRY / WET / OTHERS)
6. WAS ANYBODY INJURED (YES / NO)
7. a) REPORTED TO POLICE (YES / NO)
   IF YES, PLEASE STATE WHICH POLICE STATION:

(2) NUMBER OF PASSANGER INCLUDING DRIVER

8. THIRD PARTY VEHICLE
   a) VEHICLE NUMBER: SKZ 9445 Z MODEL: ELANTRA
   b) DRIVER'S NAME: PHANG SHIOW WEN JOSEPH
   c) NRIC/FIN/PASSPORT: S6833735F CONTACT:

(2) NUMBER OF PASSANGER INCLUDING DRIVER

9. THIRD PARTY VEHICLE
   d) VEHICLE NUMBER: MODEL:
   e) DRIVER'S NAME:
   f) NRIC/FIN/PASSPORT: CONTACT:

1) EMAIL : fievelforever@gmail.com

2) VIDEO :

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8425836I

Name
GOH WEI LONG JACKSON
(WU WEILONG JACKSON)
吴 韦 龙
Race
CHINESE
Date of birth
31-08-1984
Sex
M
Country/Place of birth
SINGAPORE

5594151

NRIC No. S8425836I

Date of issue
29-04-2016
Address
APT BLK 660C JURONG WEST STREET 64
#02-366
SINGAPORE 643660

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8425836I
GOH WEI LONG JACKSON
(WU WEILONG JACKSON)
Birth Date 31 Aug 1984
Issue Date 28 Nov 2005

001384005A

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

		PASS DATE
Class 3	Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	25 Nov 2005

Licence No: S8425836I

NP 128A

eBaoTech GeneralClaim

Hello, NAC_BUKIT_MERAH_800676

Change Language | Change Password | Log Out

My Desktop

Notice of Loss

Policy Query

Policy No.

Vehicle No.(For Motor) SJG5732H

Date of Accident 24/05/2018 14:45

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5098145124	JDG UBER	53332141K	GPC	drivo CLASSIC	SJG5732H	SJG5732H	13/02/2018	12/02/2019

Continue