

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: 00/06/18	Job description	Date & Time Completed	Done by
Ref No: NA/INC18009985/13	SAS e-filing		
Veh No: XB9969B	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 25/04/18 0850	i-Motor Claim Form	MT/0996958-001	
OD TP: <u>Reporting Only</u>	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: FBB1808M	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

NA/803443	Invoice Preparation Checklist	Ant (\$) 1st Bill	Ant (\$) 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		
	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:-		
	OD*		
	*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 (Non INC) against INC \$20		
Cat 1:	9) N12: Idac Mobile 30		
Cat 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	02/06/2018 10:36
Date Of Accident	25/04/2018 08:50
Exact Location Of Accident	PUNGGOL WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XB9969B
Insured/Policyholder	
Name Of Registered Owner	ONG PANG PUN
NRIC No	S1428637C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90013311
Alternative Phone No	OTHERS-90013311

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5071850671-02
Cover Note Number	

Driver

Name of Driver	ONG PANG PUN
NRIC No	S1428637C
Date Of Birth	06/09/1960
Occupation	OUTDOOR
Date Of Driving Pass	30/09/1993
Driving Experience	24 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90013311
Fax Number	
Contact Number	OTHERS-90013311
Email Address	NOEMAIL

Address	BLK 522C TAMPINES CENTRAL 7 #13-33
Postcode	523522
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 - 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	TAMPINES N.P.C
Police Station Address	ROAD: TAMPINES N.P.C , POSTCODE: 529682 , 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/20180602/2019

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	FBB1828M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	FAZRIE
NRIC/Passport Number	
Contact Number	92472313
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)


SKETCH PLAN

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1. Please report **correctly** the details of the accident to speed up the claims process.
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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.

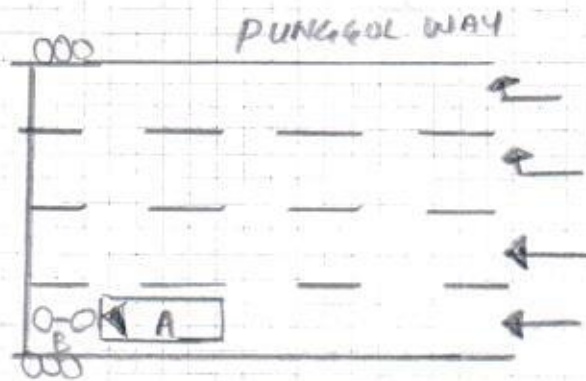

Policyholder's Signature
Date & Time: 2/6/18

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

 02/06/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

A - XB 9969B
B - FBB 1828M



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the police report: T/20180602/2019

DECLARATION

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

Policyholder's Signature
Date & Time:

2/6/18

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

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

02/06/18



SINGAPORE POLICE FORCE



T/20180602/2019

1 of 3

Report No. T/20180602/2019

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/06/2018 09:21	Vide Report No.:	Station Diary No.: 27
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Informant's Particulars

Name of Informant: ONG PANG PUN			Address: APT BLK 522C TAMPINES CENTRAL 7 #13-33 SINGAPORE 523522		
ID Type / ID No.: NRIC NO / S1428637C			Contact No.: Home/Office: Mobile: 90013311		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 57	Date of Birth: 06/09/1960	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Lorry driver			Driving Licence Information: Class: 3,4,5 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 25/04/2018 08:50	Type of Location: Straight Road
Location: Along Road 1 PUNGGOL WAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
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
FBB1828M	Motorcycle				Slightly Damaged	0
XB9969B	Lorry	MITSUBISHI	FUSO FV51SJD2D EA	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20180602/2019

2 of 3

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20180602/2019

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
XB9969B	NTUC Income Insurance Co-Operative Limited	5071850671-02	23/06/2017	22/06/2018

Brief Details.

On the 25/04/2018 at about 0850hrs, I was driving along Punggol Way in my vehicle bearing the plate number XB9969B. I was driving at the most left lane at that point of time.

Subsequently there was a traffic light that turned red and as such I stopped my vehicle. I did not saw any motorcycles in front of me at that point of time.

When the traffic light turned green, as I was moving slowly and picking up speed, I realised that I had collided with the rear of one motorcycle bearing the plate number FBB1828M. The rider then fell down from the Collision. Both vehicles had sustained some damages from the collision. No one was injured at that point of time. I wished to state that my lorry does not have any in-car camera.

I then agreed to settle this matter privately with him and I had paid him the cost of the damages.



**SINGAPORE
POLICE FORCE**



T/20180602/2019

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

3 of 3

Report No. T/20180602/2019

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:
G /
Sgt 2 MOHAMAD IZWAN BIN MOHAMAD
ISHAK

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt TANG SIEW PING
Contact No.: 65476430

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
02/06/2018 09:21

Classification Of Case:



REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. S1428637C



Name
 ONG PANG PUN

王 邦 本

Race
 CHINESE

Date of birth
 06-09-1960

Sex
 M

Country of birth
 SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LIC

Licence Number S1428637C

Name
 ONG PANG PUN

Birth Date 06 Sep 1960

Issue Date 25 Feb 2003



4731700



NRIC No. S1428637C



Date of issue

APT BLK 522C TAMPINES CENTRAL 7 #13-33
 SINGAPORE 523522

NRIC No. S1428637C

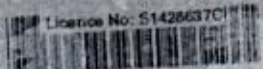
Date: 23/09/2014 (R)

#00-195
 SINGAPORE 520440

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLAS

Class	Vehicle	Pass Date
3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2000 kilograms	31 Mar 1993
4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2000 kilograms	30 Sep 1993
5	Motor Vehicles which are not constructed themselves to carry any load and the weight of vehicle unladen exceeds 2200 kilograms	01 Jan 1994

Licence No: S1428637C



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 Number : 5071850671-02

Cover : Comprehensive

- | | |
|---|----------------|
| 1. Index mark and Registration Number of Vehicle | : XB9969B |
| Chassis Number | : FV51SJA10104 |
| 2. Name of Policyholder | : ONG PANG PUN |
| 3. Effective Date of Insurance | : 23 Jun 2017 |
| 4. Expiry Date of Insurance | : 22 Jun 2018 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her 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# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |
- This Policy does not cover
- (a) Use for hire or reward.
 - (b) Use for racing, pace-making, reliability trial or speed-testing.
 - (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$500
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : TAN INSURANCE BROKERS PTE LTD (00000690287)

Date of Issue : 26 May 2017 11:21 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Claim Handling

Accident MT/0996958

Policy No.	5071850671-02	Vehicle No.	XB9969B	GST Registration No.	
Policyholder Name	ONG PANG PUN			Policyholder NRIC	51428637C
Product Code	COMMERCIAL VEHICLE INSURAN	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	90013311	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	<input type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Report Date

02/06/2018 16:51

Date of Accident

25/04/2018

Reporting Centre

Accident Location

PUNGGOL WAY

Accident Report Within 24 hrs

Yes

Time of Accident hh:mm

08:50

Orange Force

Accident Type

Collision - Head to Rear

Country of Accident

Singapore

ICM No.

Own damage Excess

2,000.00

Unnamed Driver Excess

Third Party Excess

0.00

Additional Excess

Outside Singapore OD Excess

Outside Singapore TP Excess

Windscreen Excess

500.00

GST Registered

No

GST Registration No.

Modification History

GST Registration Date

GST Status Verified

Yes

Address 1

BLK 522C #13-33

Address 4

Unit No.

Address 2

TAMPINES CENTRAL 7

Address Type

Singapore address

Related Policy Number

5071850671-03

Address 3

SINGAPORE 523522

Post Code

523522

Driver Name

Unnamed Driver

Unnamed driver Name

ONG PANG PUN

Register Date of Driver License

30/09/1993

Contact No.(Mobile)

90013311

Address 1

BLK 522C

Address 4

SINGAPORE 523522

Unit No.

#13-33

Does he own a Singapore Registered car?

Yes ☐ No ☐

Driver Type

Unnamed Driver

Driver NRIC

S1428637C

Driver Age

57

Contact No.(Office)

0

Address 2

TAMPINES CENTRAL 7

Address Type

Singapore address

Driver DOB

06/09/1960

Driving Experience

24

Contact No.(Home)

0

Address 3

TAMPINES GREENLEAF

Post Code

523522

Driver Insurer Company

Breathalyser or Blood Test Reading?

0 mg

Any injury?

☐ Yes ☐ No

Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	ONG PANG PUN	Insured NRIC	S1428637C
Contact No.(Mobile)	90013311	Contact No.(Home)	67841261	Contact No.(Office)	
Email Address	joseph_boyz@hotmail.com	Q1 Vehicle Number	XB9969B	TP Vehicle Number	FB81828M
Claim Description	XB9969B / FB81828M ON 25 Apr 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	02/06/2018 00:00
Date Registered	02/06/2018 16:56	Claim Close Date		Total Loss but Repaired	
Report Taken By	RDSLINDA	Workshop Repairer			

☒ Print AX letter

Save

Submit

Attachment

Accident No.	MT/0996958	Claim No.	001	Category *	Confidential	Urgency *	Descr
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	02/06/2018 00:00				
Path *							
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

Choose File No file chosen

Choose File No file chosen

Message Read

Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal

Sen

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:56	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:56	SAS	Normal	SAS 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:56	Photos	Normal	Photos 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:55	Photos	Normal	Photos 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:55	Photos	Normal	Photos 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:55	Photos	Normal	Photos 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:55	Photos	Normal	Photos 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:55	Photos	Normal	Photos 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:55	Photos	Normal	Photos 2018-6-2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jun 2018 16:55	Photos	Normal	Photos 2018-6-2

Video List

Uploaded By/Date	Folder Date	File Name	Source
<div>Display in New Window Scan and uploading</div>			