

NATIONAL Assessment Centre Services. (ver 1 Jan 2003)

Date In: 02/06/2018 12:37

Ref No: NA/MSG18009987/K4

Veh No: FS-1321X

D.O.A: 29/5/2018 13:30

OD: TP / Reporting Only

Job description

SAS e-billing

E-mail (within 3hrs, A/C 3hrs)

1-Motor Claim Form

1-Motor W/O (within 00 hrs, TP 3hrs)

1-Photo Uploaded

Assessment/Survey Report

Ass't Report by Fax/ Hand to Owner/Wksp

Date & Time Completed

Done by

Preferred Wksp / INC Assign Wksp / OW: (

TP Particulars:

Veh No:

UNKNOWN

Tel:

Fax:

Owner / Driver: (

Policy No: (

Period: (

Tel:

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 repeller.

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

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

Remarks: () UNO hotline 6788 6616

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo (Repair Cost > \$3000) ()

Injury: ()

Site/Time:

Actions:

NA1803459

Incident Particulars:

Ref/Owner:

Contact No:

Insured Portion:

Checked by (Engr-In-Charge):

For Comments:

/ 3:

Invoice Preparation Credits:

1) AR: Accident Reporting (\$30)	
2) DA: Damage Assessment (\$100)	INC (\$30)
3) TP: Towing Fee	\$40/\$45
4) FT: Follow-Through Survey	\$130
5) RT: Follow-Through Survey (Resurvey)	\$30
Excluding against INC Only (wef 10 Jan 2010)	
6) TR: Re-inspection	\$75
7) NI: 1 day DA + SMRT Survey	\$160
8) NTUC Additional Services:	
Q11:	
*N3: Courtesy Car / Tpl Allowance	\$5
*N6: Repair Coordination	\$10
*N7: Post Repair Inspection	\$25
*N8: DY / Collision Uncover Coordination	\$5
TP (N1): TP (Non INC) against INC	\$20
9) N12: Idms Mobile	10

Invoice dated

Fee Charged

Invoice closed

Fee Charged

Stamp

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 12:37
Date Of Accident	29/05/2018 13:30
Exact Location Of Accident	JLN DATOH
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FS1321X
Insured/Policyholder	
Name Of Registered Owner	TEH CHEE TONG (ZHENG ZHIZHONG)
NRIC No	S7820232G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96806378
Alternative Phone No	OTHERS-96806378
Vehicle Particulars	
Manufacturer	YAMAHA
Model	RXZ
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	MOTORCYCLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/18-991473-WTT
Cover Note Number	
Driver	
Name of Driver	TEH BUCK YONG (ZHENG MURONG)
NRIC No	S7609290G
Date Of Birth	08/04/1976
Occupation	INDOOR
Date Of Driving Pass	11/10/2012
Driving Experience	5 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96806378
Fax Number	
Contact Number	OTHERS-96806378
E-Mail Address	NOEMAIL

Address	BLK 195 KIM KEAT AVENUE #07-332
Postcode	310195
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	RELATIVE
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

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	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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5. **Any false reporting may be referred to the Police for investigation.**
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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:

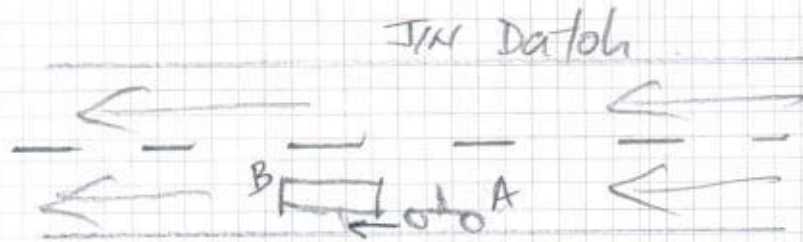
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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



A - FS 1321X
B - Unknown.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving motorbike A was along
JIN Datoh which the front of me was (B)
~~the~~ Cab. out of sudden the passenger of the
Cab open up the passenger door which I have
not enough time to brake, and COS of
~~the~~ I hit the Cab Left side passenger door
and fall.

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.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7609290G



Name
TEH BUCK YONG
(ZHENG MURONG)
郑木荣


Race
CHINESE

Date of birth
08-04-1976


Sex
M

Country of birth
SINGAPORE

4171507



NRIC No. S7609290G



Date of issue
06-02-2008

Address
APT BLK 195 KIM KEAT AVENUE
#07-332
SINGAPORE 310195

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7609290G

Name
TEH BUCK YONG
(ZHENG MURONG)

Birth Date 08 Apr 1976

Issue Date 25 Oct 2012



002118063K

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

Class	Description	Effective Date
Class 2B	Motorcycles <= 400 cc	17 Oct 2012
Class 3	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver, and motor tractors/vehicles <= 2500 kg	25 Oct 2012

S7609290G

S / No. 9000183550

NP 42BA



Licence No. S7609290G



W 704945
MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212Q)
4 Shenton Way, # 21-01, SGX Centre2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
www.msig.com.sg

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 Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)
Or any Amendment, Act or Acts passed in substitution thereof.

CERTIFICATE NO. : MSD/VMT/18-991473-WTT A0633-001/W0839

SUM INSURED : TPL

EXCESS : NIL

S7820232G

1. Index mark and Registration Number of Vehicle

FS1321X

YAMAHA RX1

133 c.c.

2. Name of Policyholder TEH CHEE TONG (ZHENG ZHIHONG)

3. Effective date of the Commencement of Insurance

for the purposes of the Act

0001AM 15/05/2018

4. Date of Expiry of Insurance

14/05/2019

5. Persons or Classes of Persons entitled to drive

a. The Policyholder.

b. II) TEH BUCK YONG ONLY

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. And provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitation as to Use

Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

7. The Policy does not cover

1. Use for hire or reward.

2. Use for racing, pace-making, reliability trial or speed-testing.

3. Use for the carriage of goods (other than samples) in connection with any trade or business.

4. 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.

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 the Road Transport Act, 1987 (Malaysia).

19/04/2018 (T)
WTT-CI-14/04/14

WTT INSURANCE AGENCIES PTE LTD
Underwriting Agent
For MSIG Insurance (Singapore) Pte. Ltd.