

# NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

Date In: 05/06/18	Job description	Date & Time Completed	Done by
Ref No: NA/CFI18010163/13	SAS e-filing		
Veh No: 5JJ3063C	E-mail (within 8hrs, AIC 2hrs)		
DOA: 04/06/18 1800	i-Motor Claim Form		
OD: (1P) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

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

TP Particulars:	Veh No: SGB2725K	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

NA1803493

Claimant's Particulars:-	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	1st Bill	Add Bill	
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)			
Damaged Portion:	3) TF: Towing Fee \$40/\$45			
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120			
Auditors' Comments:-	5) FT: Follow-Through Survey (Resurvey) \$30			
Cat. 1:	For claiming against INC Only (wef 10 Jan 2005)			
Cat. 2/3:	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			
	TP (N11): TP (Non 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 05/06/2018 14:36  
Date Of Accident 04/06/2018 18:00  
Exact Location Of Accident MOUNT PLEASANT RD TWDS THOMSON RD  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SJJ3063C  
**Insured/Policyholder**  
Name Of Registered Owner M/S BLAZE MOTORING PTE LTD  
Co Reg No -  
Email Address NOEMAIL  
Mobile Phone No  
Alternative Phone No OFFICE-91449265

### Vehicle Particulars

Manufacturer TOYOTA  
Model ALLION  
Exact Purpose for which vehicle was being used at time of accident GRAB  
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 HIRE

### Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number DMHCSN1716841700  
Cover Note Number

### Driver

Name of Driver CHONG CHUN JIE  
NRIC No S8620196H  
Date Of Birth 10/07/1986  
Occupation OUTDOOR  
Date Of Driving Pass 19/01/2016  
Driving Experience 2 YEARS AND 4 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-96677396  
Fax Number  
Contact Number  
Email Address NOEMAIL

Address	BLK 123 MCNAIR ROAD #06-17
Postcode	320123
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	SIDE SWIPE
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	SGB2725K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KADIR BIN NORDIN
NRIC/Passport Number	S0697191A
Contact Number	97762637
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.



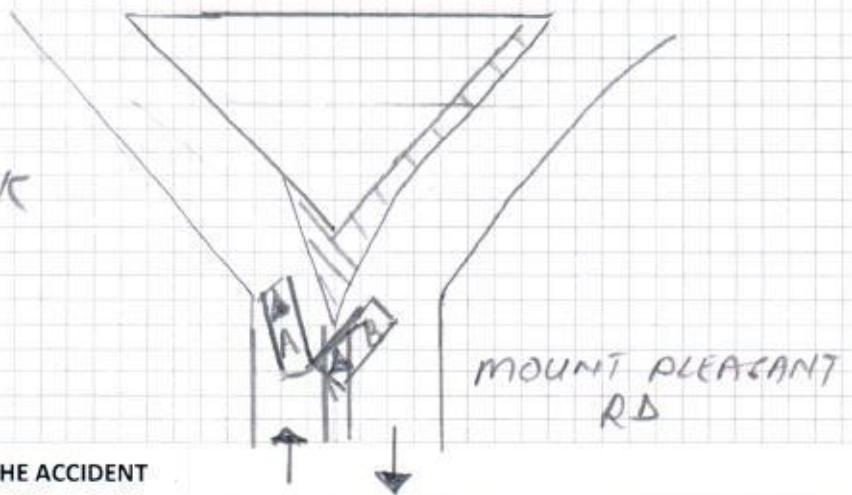
Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN

A-SJ13063C  
B-SGB2725K



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*Pls refer to the statement.*

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.:

*[Signature]* 5/6/18 *[Signature]* 05/06/18

**NOTICE OF REPORTING**

This is to confirm that Chong Chun Jie, NRIC/FIN: S8620196H HP: 96677396, has reported to the Police a non-injury traffic accident which occurred along Mount Pleasant Road on 04/06/2018 at <sup>1900</sup>2021hrs involving the following vehicles:

SJJ3063C – Complainant's vehicle

SGB2725K – Driver will be Kadir Bin Nordin, NRIC: S0697191A HP: 97762637. The driver was driving along Mount Pleasant road towards Thomson road in a fast speed and he couldn't stop in time during the turn and he swerved and hit the right side back portion of my vehicle.

The driver of SGB2725K did not stop until I stopped my car in front of his car. After stopping our vehicles, the driver of SGB2725K came down. He was speaking in an angry tone and he said, 'do whatever you want to my particulars'. Later we exchange particulars and left. I could see some black scratches and dent on his right front portion of the vehicle too.

I would like to inform that I called '999' at about 1817hrs and told the officer on the line that I got into an accident with an angry man and officer said that he will get traffic police to get in touch with me. The traffic police only called me at 1901hrs.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT Carol Tan  
Date: 04/06/2018 Time: 2037hrs  
S/D Ref: 182  
Police Post/Unit : Rochor NPC



Police  
Rank: SGT  
Name: Carol Tan  
Singapore 200070  
Tel: 1800-254536

Original - to be issued to informant  
Duplicate - to be submitted to Traffic Police

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8620196H



Name

CHONG CHUN JIE

張 俊 傑

Race

CHINESE

Date of birth

10-07-1986

Country/Place of birth

SINGAPORE

Sex

M



5738207



NRIC No. S8620196H

Date of issue

04-05-2017

Address

APT BLK 123 MCNAIR ROAD  
#06-17  
SINGAPORE 320123

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number

S8620196H

Name

CHONG CHUN JIE

Birth Date: 10 Jul 1986

Issue Date: 12 Jan 2016



002518010K

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq$  2500kg 12 Jan 2016

NP 428A



Licence No: S8620196H

# 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)

\$1400 \$2132.60

## CERTIFICATE No.

1. Index Mark and Registration  
Number of Vehicle

DMHCSN1716841700

Engine No :1NZD057782

Chassis No:NZT2603026717

SJ33063C

2. Name of Policy Holder

M/S BLAZE MOTORING PTE LTD

3. Effective date of the Commencement of Insurance for  
the purposes of the Regulations, Ordinance or Enactment

1 MARCH 2017  
(14:58 HOURS)

EXCESS SECT. I .....\$51,500.00  
EXCESS SECT. I (OUTSIDE SINGAPORE).....\$53,000.00  
EXCESS SECT. II .....\$51,500.00  
EXCESS SECT. II (OUTSIDE SINGAPORE).....\$53,000.00  
EX ON WINDSCREEN .....\$5100.00

4. Date of Expiry of Insurance

7 SEPTEMBER 2018

5. Persons or Classes of Persons entitled to drive \*

AS PER NAMED DRIVER(S) STATED BELOW.

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.

ANY EMPLOYEE OF THE COMPANY OR

ANY AUTHORISED HIRER/DRIVER ONLY

6. Limitations as to use \*

- USE FOR THE CARRIAGE OF PASSENGERS OR GOODS IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
- USE FOR SOCIAL DOMESTIC PLEASURE PURPOSES AND BUSINESS PURPOSES OF ANY PERSON TO WHOM THE VEHICLE IS  
HIRED.
- THE POLICY DOES NOT COVER
- USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
- USE WHILST DRAWING A TRAILER EXCEPT THE TOWING (OTHER THAN FOR REWARD) OF ANY ONE DISABLED  
MECHANICALLY PROPELLED VEHICLE.

HIRE PURCHASE CO. : TECH WEI CREDIT PTE LTD AS HP OWNER

\* 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 Part IV of the  
Road Transport Act, 1987 (Malaysia).  
Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:



Authorised Officer

TECH WEI CREDIT PTE LTD

Co Reg No.200512300K  
210 Turf Club Road The Grandstand  
Lot A3 Singapore 287995  
Tel 6465 0020 Fax 6465 0017  
www.techwei.sg

Authorised Signatory