

NATIONAL Assessment Centre Services

Date In: 06/06/18	Job description	Date & Time Completed	Done by
Ref No: NA/CTJ18010312/13	SAS e-filing		
Veh No: SLB82155	E-mail (within 3hrs; AIC 2hrs)		
D.O.A: 05/06/18 2310	i-Motor Claim Form		
OD: (TP) 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: SHD3100X 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)

Remarks:-	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

Claimant's Particulars :-	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);		
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:-		
	ON:		
	*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 date / 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	06/06/2018 16:08
Date Of Accident	05/06/2018 23:10
Exact Location Of Accident	NORTH BRIDGE RD ON LANE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB8215S
Insured/Policyholder	
Name Of Registered Owner	KUA YUXIAN(KE YUXIAN)
NRIC No	S8233508J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94369618
Alternative Phone No	OTHERS-94369618

Vehicle Particulars

Manufacturer	MASERATI
Model	GRANDTURISMO
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1729451801
Cover Note Number	

Driver

Name of Driver	KUA YUXIAN(KE YUXIAN)
NRIC No	S8233508J
Date Of Birth	30/09/1982
Occupation	INDOOR
Date Of Driving Pass	03/05/2008
Driving Experience	10 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-94369618
Fax Number	
Contact Number	OTHERS-94369618
Email Address	NOEMAIL

Address	47 JERVOIS ROAD #03-28
Postcode	247658
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 - CHANGE/CROSS LANE
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	SHD3122X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	HO SOON WAN
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:

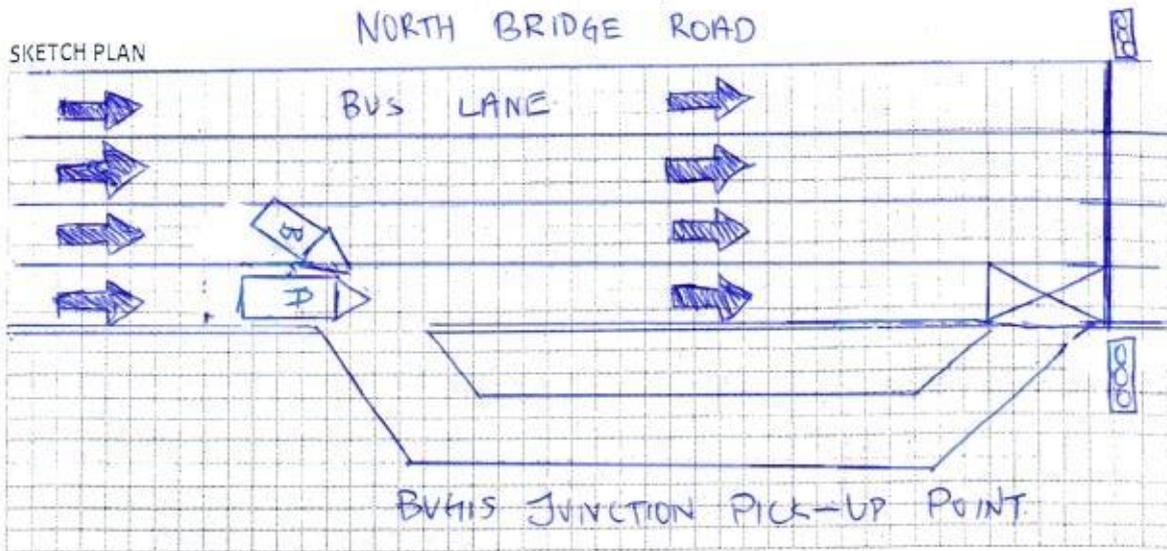
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

Sym 06/06/18



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I, KVA YU XIAN, NRIC S82335081, driver of vehicle A, SLB 82155, was moving off from NORTH BRIDGE ROAD, outside drop off point of Buhis Junction. Before I moved off, I have checked my blindspot and I am certain that there is no car trying to make a right turn into the pickup point before I proceed on the straight lane.

Prior to that, vehicle B, SHD 3122X, collided on my ~~right~~ left side of my vehicle.

that's all.

A - SLB 82155

B - SHD 3122X

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] 06/06/18

VEHICLE NO: SLB 8215 S MAKE & MODEL: Maserati grand turismo 4.2

DATE OF ACCIDENT: 05 / 06 / 2018 TIME: 11:09pm

TIME OF ACCIDENT: AM (PM)

LOCATION OF ACCIDENT: North Bridge Road, on Lane 1

Actual Purpose use during accident: _____

NAME OF OWNER: _____

VEHICLE NO: Kua YuXian

REG NO: S87 335081

CLAIM TYPE: OD / THIRD PARTY / Reporting Only

PRIVATE HIRE: YES/NO?

SURANCE CO: CHINA TAIPING

TYPE OF COVERAGE: Comprehensive / Third Party / Third Party Fire & Theft

POLICY NO: DMPG SN 1720451801

NAME OF DRIVER: As above / If No:

REG NO: Kua YuXian Any passengers: NIL

DATE OF BIRTH: 30 / 09 / 1982

OCCUPATION: Outdoor / Indoor

DATE OF DRIVING PASS: 03 / 05 / 2008

GENDER: Male / Female

CONTACT NO: 9436969 Office: _____ Home: _____

ADDRESS: 47 JERVOIS ROAD #03-26 Singapore 247656

DOES DRIVER HAVE ANY OWN Vehicle: NO / If yes: Reg No:

RELATIONSHIP: Employee / If No:

WEATHER CONDITION: Clear / Raining / Other:

ROAD SURFACE: Dry / Wet / Other:

ANY INJURIES: No / If yes: Who? _____

CONTACT NO: _____

POLICE REPORT: No / If yes: Where? _____

VEHICLE B NO: SHD 3122X Any Passenger: _____

NAME: HO SOON WAN

CONTACT NO: _____

VEHICLE C NO: _____ Any Passenger: _____

VEHICLE D NO: _____ Any Passenger: _____

VEHICLE E NO: _____ Any Passenger: _____

VEHICLE F NO: _____ Any Passenger: _____

ANY WITNESS: John Khor 90 @ gmail.com

WITNESS CONTACT NO: _____

Have you been approach by unknown person soliciting (s) / offering accident claims assistance? YES / NO

PARTICULAR WORKSHOP: Sme Motor Pte Ltd

VEHICLE NO: 1 Kaki bukit ave 6 #02-15

CONTACT PERSON: Autobay @ kaki bukit

PHONE NO: Singapore 417883

Tel: 67476106 (6 lines)

Fax: 67442368

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8233508J



Name

KUA YUXIAN
(KE YUXIAN)

柯毓賢

Race

CHINESE

Date of birth

30-09-1982

Sex

F

Country/Place of birth

SINGAPORE



S8233508J

5677235



NRIC No. S8233508J



Date of issue

16-11-2016

47 JERVOIS ROAD #03-28
SINGAPORE 247656

NRIC No:

S8233508J

Date:

25/03/2018

REPUBLIC OF SINGAPORE DRIVING LICENCE



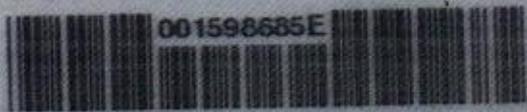
License Number: S8233508J

Name:

KUA YUXIAN
(KE YUXIAN)

Birth Date: 30 Sep 1982

Issue Date: 03 May 2008

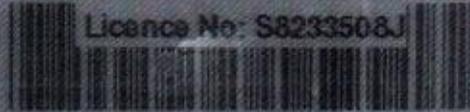


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg
with =< 7 passengers, exclusive of the driver, and
other motor vehicles without clutch pedals =< 2500kg

PASS DATE

03 May 2008



NP 428A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8915601G



Name
JOHN KHOR

許 凱

Race
CHINESE

Date of birth
17-05-1989

Sex
M

Country of birth
SINGAPORE

354767B



NRIC No. S8915601G

Date of issue
28-05-2004

Address
APT BLK 283 CHOA CHU KANG AVENUE 3
#08-408
SINGAPORE 680283



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Co. Reg. No. 200200384E

MX1/B
R SN
AN0567A
Cov. Type: C

MOTOR PRIVATE CAR

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE No. DMPCSN1729451801

Engine No : M139P130426
Chano: ZAMGH45C000037859

- 1. Index Mark and Registration Number of Vehicle: 5L882155
- 2. Name of Policy Holder: KUA YUXIAN (KE YUXIAN)
- 3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment: 23 April 2018
- 4. Date of Expiry of Insurance: 22 April 2019

Excess Sect I S\$7,000.00
Excess Sect. I (Outside Singapore)... S\$14,000.00
EX ON WINDSCREEN S\$500.00

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.

THE INSURED & WONG HONG MENG RAYMOND DRIVING ONLY

6. Limitations as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.
The Policy does not cover use for hire or reward tuition driving test 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.

HIRE PURCHASE CO. : CENTURY TOKYO LEASING (S) 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
Janice Lim
Autoshield Pte Ltd
Senior Manager

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: **Business Development**
Authorised Officer

Authorised Signatory

DID : 63851626 Mobile : 85889191

3 Cross Street #15-03 Singapore Tower Singapore 076009 Tel: 6359 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com
Website: www.autoshield.com.sg

10 Sin Ming Drive Singapore 575701
Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

27 Mar 2018

Our ref 2703180901N036058163

KUA YUXIAN (KE YUXIAN)
47 JERVOIS ROAD
#03-26
SINGAPORE 247656

Dear MS KUA YUXIAN (KE YUXIAN)

RENEWAL OF CERTIFICATE OF ENTITLEMENT (COE) FOR VEHICLE NO. SLB8215S

We refer to your application on 27 Mar 2018 to renew COE for the above vehicle.

2. You may be pleased to know that the COE for this vehicle has been renewed until 03 Apr 2028.
3. The road tax for this vehicle will expire/has expired on 03 Apr 2018. Please renew the road tax promptly as it is an offence to use or keep a vehicle without valid road tax and insurance. Late renewal fee will be imposed if road tax is renewed after its expiry.
4. Please visit <http://www.onemotoring.com.sg> for more vehicle-related information and services or contact our customer service officers on tel: 1800-CALL LTA (1800-2255 582) if you have any questions.

Yours sincerely

NG LAY CHOO (MS)
DEPUTY DIRECTOR, VRL SERVICE OPERATIONS
VEHICLE SERVICES GROUP
LAND TRANSPORT AUTHORITY

(This is a computer-generated notice that requires no signature.)

From 15 February 2017, you do not need to display road tax disc on the windscreen of your vehicle. LTA has stopped issuing physical road tax discs as part of our efforts to streamline our processes. Please ensure that your original motor insurance certificate is readily available in your vehicle at all times. If you are driving into Malaysia, you are advised to carry printed proof of the validity of your road tax in your vehicle.