

# NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In <b>06/06/18</b>	Job description	Date & Time Completed	Done by
Ref No <b>NA/MSG 18010317/13</b>	SAS e-filing		
Veh No <b>5JY418D</b>	E-mail (within 8hrs, A/C 2hrs)		
D.O.A <b>04/06/18 1110</b>	i-Motor Claim Form		
OD TP <b>Reporting Only</b>	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <b>Fax / Hand to Owner/Wksp</b>		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: <b>5J77504</b>	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

**NA1803540**

## Invoice Preparation Checklist

Amt (\$) Amt (\$)  
1st Bill Add Bill

### Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

### Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

- 1) AR : Accident Reporting (\$30);
- 2) DA : Damage Assessment (\$100); INC (\$80)
- 3) TF : Towing Fee \$40/\$45
- 4) FT : Follow-Through Survey \$120
- 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
- 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	06/06/2018 15:08
Date Of Accident	04/06/2018 11:10
Exact Location Of Accident	JOO CHIAT RD NEAR TO CEYLON LANE
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY418D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NG CHONG GHEE JEFFREY(HUANG CONGYI,JEFFREY)
NRIC No	S7204533E
Email Address	JNG210@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97665151
Alternative Phone No	OTHERS-97665151

#### Vehicle Particulars

Manufacturer	KIA
Model	SORENTO
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 CAR

#### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28983936 QMY
Cover Note Number	

#### Driver

Name of Driver	NG CHONG GHEE JEFFREY(HUANG CONGYI,JEFFREY)
NRIC No	S7204533E
Date Of Birth	10/02/1972
Occupation	INDOOR
Date Of Driving Pass	01/02/1993
Driving Experience	25 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97665151
Fax Number	
Contact Number	OTHERS-97665151
EMail Address	JNG210@GMAIL.COM

Address	BLK 12 JOO SENG ROAD #14-53
Postcode	360012
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?	YES
If Yes, Please state which Police Station	
Police Station Name	MACPHERSON NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 54 PIPIT ROAD #01-82/84 , POSTCODE: 370054 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7449999 - FAX NO: 65476366
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180605/2072 NOTE: THE PLACE OF THE ACCIDENT HAPPEN ON A SINGLE LANE ROAD. THERE IS NO ROAD DIVIDERS ALONG THIS SEGMENT OF JOO CHIAT ROAD, INDICATING IT IS A ONE WAY TRAFFIC. AT THE INSTANCE OF COLLISION, MY VEHICLE IS SLANTED AT AN ANGLE TO OVERTAKE THE BUS IN FRONT, WHILE THE OTHER VEHICLE CAME IN AT MORE THAN 40KM/H. THE POINT OF COLLISION TAKE PLACE BETWEEN MY CAR (AT THE FRONT BUMPER, RIGHT CORNER) AND HIS CAR (SIDE OF DOOR OF LEFT FRONT PASSENGER).

#### 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	SJT750U
Vehicle Make/Model/Colour	MAZDA 3
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAY SION TECK
NRIC/Passport Number	S0148942I
Contact Number	81834776

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



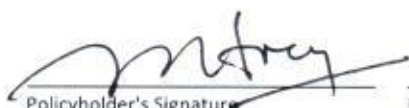
## SKETCH PLAN

### 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)**

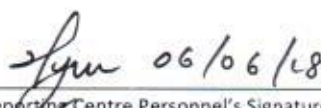
I understand, acknowledge, agree and consent that:

- (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.:

Hand-drawn sketch of a street intersection. A horizontal line represents the road, with a "BUS STOP" marked on the left. A vertical line represents the intersection. Two small rectangular boxes, labeled "A" and "B", are positioned near the intersection. Box "A" is tilted and contains a small black dot. Box "B" is upright and contains a small black dot. To the right of the intersection, the text "JOO CHIAT RD" is written. Below the sketch, the following text is written:

A - SJY4180  
B - SJT7504

Pls refer to the police report: T/20180605/2072

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

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





# SINGAPORE POLICE FORCE



T/20180605/2072

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

1 of 3

Report No. T/20180605/2072

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 05/06/2018 14:20	Vide Report No.:	Station Diary No.: 28
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**Informant's Particulars**

Name of Informant: NG CHONG GHEE, JEFFREY			Address: BLK 40 LORONG ONG LYE #03-03 SINGAPORE 536408		
ID Type / ID No.: NRIC NO / S7204533E			Contact No.: Home/Office: Mobile: 97665151		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 10/02/1972	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: ELECTRICITY SALES			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 04/06/2018 11:10	Type of Location: Straight Road
Location: Along Road 1 JOO CHIAT ROAD  Near to Ceylon lane				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJT750U	Car	MAZDA	MAZDA3 1.6L SDN	Silver	Slightly Damaged	0
SJY418D	Car	KIA	SORENTO 2.4 AT ABS D/AB 2WD 5DR HID SR	Silver	Slightly Damaged	0

**Details of Vehicle Insurance**

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



T/20180605/2072

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

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Report No. T/20180605/2072

## CONTINUATION OF REPORT

### Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJY418D	FWD Singapore Pte. Ltd	PNPV2017-00009484	27/12/2017	26/12/2018

### Details of Person Involved

Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Driver		Use of Pedestrian Crossing: NA	
Name	Tay Sion Teck	ID No.	S0148942I
Related Vehicle	SJT750U (Car)	Contact No.	81834776
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	NG CHONG GHEE, JEFFREY	ID No.	S7204533E
Related Vehicle	SJY418D (Car)	Contact No.	97665151
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 4/6/2018 at about 1110hrs, I was driving along Joo Chiat Rd near Ceylon rd (one way road) when I stopped behind the bus waiting for the bus to move before driving off. I waited too long so I check my right mirror it was clear and release my brakes as I want to overtake the bus. However, as I was overtaking there one incoming vehicle(SJT750U) coming from the back but I did not notice it was coming then which cause collision between my vehicle right front bumper and his left passenger door.

We then both came out of our vehicle to exchange particulars and he informed that he is travelling at 40 - 50km/h and will be proceeding to claim his insurance for the damages. I wish to state that there was no injuries suffered during the accident. I am making this report for recording purpose.





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999



T/20180605/2072

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Report No. T/20180605/2072

**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 MELSON CHEW WEI JIE

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:  
05/06/2018 14:20

Classification Of Case:



SINGAPORE  
POLICE FORCE

SIGNATURE

0400991



NRIC No. S7204533E



Blood Group A+ Date of issue 25-06-1992

APT BLK 12 JOO SENG ROAD #14-53  
SINGAPORE 360012

NRIC No: S7204533E Date: 22-04-2002 No: 3856383

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7204533E



Name

NG CHONG GHEE, JEFFREY  
(HUANG CONGYI, JEFFREY)



Race

CHINESE

Date of Birth

10-02-1972

Sex

M

Country of Birth

SINGAPORE





REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S7204533E**

Name  
**NG CHONG GHEE, JEFFREY**  
**(HUANG CONGYI, JEFFREY)**

Birth Date **10 Feb 1972**

Issue Date **21 Apr 2003**

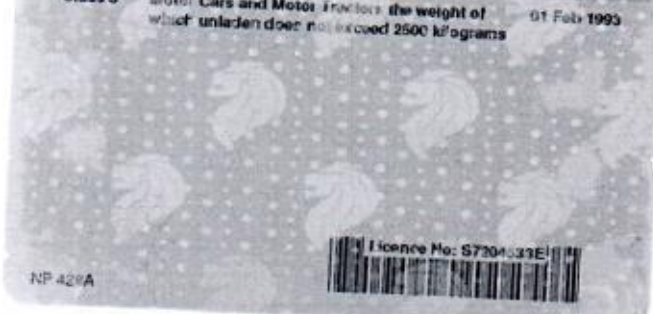


 000412331K

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

CLASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 01 Feb 1993



Licence No: S7204533E

NP 429A

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## 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 RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1  
 Individual Ownership

**MOTOR MAX PLUS**  
**Comprehensive**

Certificate No. A 28983936 QMY

Excess : SGD1,000

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle  
SJY418D
2. Name of Policyholder  
Ng Chong Ghee Jeffrey (Huang Congyi, Jeffrey)
3. Effective Date of the Commencement of Insurance for the purposes of the Act  
03/07/2017
4. Date of Expiry of Insurance  
02/07/2018
5. Persons or Classes of Persons entitled to drive\*  
 Ng Chong Ghee Jeffrey (Huang Congyi, Jeffrey)  
 Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.  
 \* Provided that the person driving is permitted in accordance with the licensing or other laws or 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\*  
 Use only for social domestic and pleasure purposes and for the Policyholder's business.  
 The Policy does not cover use for hire or reward 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.  
 \* 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.

**PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.**

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer