

NATIONAL Assessment Centre Services [Rev 12/05]

Date In: 07/06/18	Job description	Date & Time Completed	Done by
Ref No: NA/MSG18010407/13	SAS e-filing		
Veh No: G44495K	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 07/06/18 1100	i-Motor Claim Form		
OD: (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

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

TP Particulars: Veh No: **SFL8448E** 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 (\$)	Amt (\$)
		1st Bill	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:-		
	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	

NA1803562

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	07/06/2018 15:52
Date Of Accident	07/06/2018 11:00
Exact Location Of Accident	TOA PAYOH LOR 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GU4495K
Insured/Policyholder	
Name Of Registered Owner	KST AUTO RENTAL PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96355542

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	7VCT1737400
Cover Note Number	

Driver

Name of Driver	MUHAMMAD RAMADAN BIN JUMINGAN
NRIC No	S8613799B
Date Of Birth	10/05/1986
Occupation	OUTDOOR
Date Of Driving Pass	17/09/2009
Driving Experience	8 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82973157
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 42 BEDOK SOUTH ROAD #02-747
Postcode	4601142
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	CHAIN COLLISION
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

MY VEH WAS STATIONARY AT THE RED TRAFFIC LIGHT JUNC OF LOR 4 TOA PAYOH & TOA PAYOH CENTRAL. SUDDENLY I FELT THE IMPACT FROM MY REAR. I CAME OUT AND MY VEH WAS INVOLVED IN A CHAIN COLLISION OF 3 VEHS.

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	SFL8448E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HO KONG EE
NRIC/Passport Number	S7105395D
Contact Number	96695751
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJQ7281B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JONATHAN POH MING YU
NRIC/Passport Number	S9308053Z
Contact Number	90239464
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.



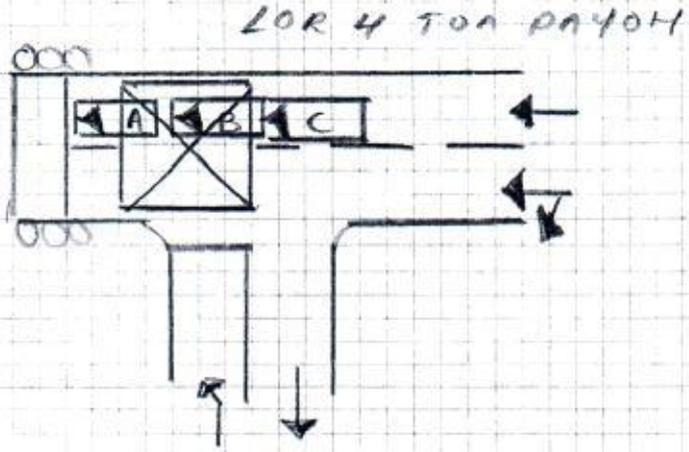
Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

A - GU4495K
B - SFL8448E
C - SJQ 7281B



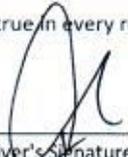
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s 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:

 07/06/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



MSIG

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 069807
Tel +65 6827 7888, Fax +65 6827 7800
www.msig.com.sg

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)

A0633 - 001

23-Aug-2017
Total Page

Certificate No

: 7VCT1737400

1. Index Mark and Registration Number of Vehicle

: GU4495K

2. Chassis Number of Vehicle

: LH1621001090

3. Name of Policyholder

: KST Auto Rental Pte Ltd

4. Effective date of the Commencement of Insurance for the purposes of the Act

: 20 SEP 2017 00:00 AM

5. Date of Expiry of Insurance

: 19 SEP 2018

6. Person or Classes of Persons entitled to drive*

Any person provided he is in the Policyholder's or their named Lessee's employ and is driving on their order or with their permission.

Named Lessee: AS PER LIST PROVIDED TO MSIG

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 to 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.

7. Limitations as to Use*

Use in connection with the Policyholder's or the specified Lessees' business

Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's or the specified Lessees' business.

Use for social domestic and pleasure purposes.

The Policy does not cover

(i) Use for hire or reward, leasing other than to specified Lessees or for racing pace-making reliability trial or speed testing

(ii) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle

* 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 & Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).



For MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurer

Not valid unless countersigned by Authorised Person

IMPORTANT NOTICE

This Certificate is not transferable to a new owner of the vehicle

If for any reason the Insurance is terminated during its currency, the Certificate must be returned to the Insurer, or if the Certificate has been lost or destroyed,

Statutory Declaration to that Effect must be made. Failure to comply with this obligation is an offence under the compulsory Insurance Legislation.

This Certificate must be returned if the insurance is suspended during its currency.

If you are involved in an accident, full details must be forwarded immediately to the Company

FORM MZ 400 (Commercial Vehicle)

(For the Issuance of Motor Certificate of Insurance only)

Stan R

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

19 Aug 2010

Our ref 1908100501N002364516

KST AUTO RENTAL PTE LTD
3021A UBI ROAD 1
#01-42
SINGAPORE 408715

00159046



Dear Sir/Madam

NOTIFICATION ON TRANSFER OF OWNERSHIP FOR VEHICLE NO. GU4495K

We are pleased to inform you that your application for the transfer of ownership of the above-mentioned vehicle has been approved. You are the current registered owner of the vehicle as at 19 Aug 2010.

2. The owner particulars are as follows:

1.	Name	: KST AUTO RENTAL PTE LTD
2.	Identification No. Type	: Company
3.	Identification No.	: 200806860W
4.	Place Of Passport Issue	: -

3. The information pertaining to your vehicle is as follows:

1.	Vehicle No.	: GU4495K
2.	Previous Vehicle No.	: -
3.	Effective Date of Ownership	: 19 Aug 2010
4.	Original Registration Date	: 20 Mar 2001
5.	First Registration Date	: 20 Mar 2001
6.	Vehicle Type	: A50 - Goods (Closed) Van/Van Panel (Delivery)
7.	Vehicle Scheme	: Normal
8.	Attachment 1	: No Attachment
9.	Attachment 2	: -
10.	Attachment 3	: -
11.	Vehicle Make	: TOYOTA
12.	Vehicle Model	: HIACE DIESEL
13.	Year of Manufacture	: 2001
14.	Primary Colour	: Green
15.	Secondary Colour	: -
16.	Passenger Capacity	: 1
17.	Chassis/Trailer Chassis No.	: LH1621001090 / -
18.	Propellant	: Diesel
19.	Engine No./Motor No.	: 5L5073823 / -
20.	Engine Capacity(cc)/Power Rating(kw)	: 2986 / -
21.	Unladen Weight(kg)	: 1500
22.	Maximum Laden Weight(kg)	: 3030
23.	Open Market Value	: \$26,245.00
24.	PARF Eligibility	: No

25.	PARF Eligibility Expiry Date	: -
26.	Minimum PARF Benefit	: \$0.00
27.	No. of Transfers	: 3
28.	IU Label No.	: 1041663013
29.	COE No.	: 2001020105001808E
30.	COE Expiry Date	: 19 Mar 2011
31.	COE Category	: C - Goods Vehicle & Bus
32.	Quota Premium/Prevailing Quota Premium	: \$6,420.00 / -
33.	Actual Quota Premium/PQP Paid	: \$6,420.00
34.	Actual ARF Paid	: \$1,313.00
35.	Vehicle Lifespan Expiry Date	: 19 Mar 2021
36.	Remarks	: To renew the COE, the Prevailing Quota Premium payable is that of Category C.

4. You may use your NRIC number and SingPass or User ID and Password (for non-Singaporeans/PRs) to login to <http://www.onemotoring.com.sg> and see the details of the above transaction. For ACRA-registered businesses and companies with EASY accounts, your authorised staff may also access the wide range of vehicle-related services via <http://www.onemotoring.com.sg> using EASY. If you do not have an EASY account, you can apply for it at <http://www.iras.gov.sg>. For non-Singaporeans/PRs who do not have a User Password, please contact us at 1800-CALL LTA (1800-2255 582) to request for a new password. Please note that a separate Transaction PIN is required for the following transactions via the Internet or at our Electronic Service Agents. Before you perform these transactions, please request for your Transaction PIN. You may find out more information on how to obtain your Transaction PIN and the documents needed (such as Board Resolution for companies and businesses, etc) via <http://www.onemotoring.com.sg> > LTA **Information & Guidelines > Transaction PIN & User Account.**

- a. Vehicle PIN - Transfer of Ownership and De-registration of Vehicle
- b. TCOE PIN - Transfer of TCOE (For Category C and E COE bid under individual)
- c. Rebate PIN - Transfer and Splitting of PARF/COE Rebate

5. All new In-vehicle Units (IUs) are covered by a 5-year warranty against manufacturer's defect.

6. Please contact our customer service officers at tel: 1800-CALL LTA (1800-2255 582) should you require further assistance.

7. Thank you.

Yours sincerely

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

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