

NATIONAL Assessment Centre Services

(weF 1 Jan 2003)

MMA 118075690

Date In: 11/6/18 16:14	Job description	Date & Time Completed	Done by
Ref No: NA/INC18010601/h4	SAS e-filing		
Veh No: SLN 6181E	E-mail (within 5hrs, APC 2hrs)		
D.O.A: 10/6/18 12:15	i-Motor Claim Form	MT/0998226 ⁻⁰⁰¹	11/6/18 19:25.
OD: <input checked="" type="radio"/> Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

GY 1899 C.

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

MA1803667

Invoice Preparation Checklist

Amt (\$)

Amt (\$)

1st Bill

Add Bill

Claimant's Particulars :-

1) AR : Accident Reporting (\$30); 30.00

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 2003)

6) TR : Re-inspection \$75

7) N1 : Idas DA + SMRT Survey \$160

8) NTUC Additional Services :-

OD*

*N5: Courtesy Car / Tpl 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: Idas Mobile 30

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Pat 1:

Pat 2 / 3:

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	11/06/2018 16:14
Date Of Accident	10/06/2018 13:15
Exact Location Of Accident	PASIR RIS INDUSTRIAL DR 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN6181E
Insured/Policyholder	
Name Of Registered Owner	THE PUPSTOP
Co Reg No	53249478D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88331818
Alternative Phone No	OFFICE-93869709

Vehicle Particulars

Manufacturer	AUDI
Model	S5 4.2 FSI QU AT ABS D/AB HID SR 2DR
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098480324
Cover Note Number	-

Driver

Name of Driver	KENNETH LEE KUN LIN
NRIC No	S9209372G
Date Of Birth	17/03/1992
Occupation	INDOOR
Date Of Driving Pass	25/02/2015
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88331818
Fax Number	
Contact Number	OFFICE-93869709
EMail Address	NOEMAIL

Address	BLK 276 BANGKIT RD #04-124
Postcode	670276
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	
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)	2
Passenger 1	NAME: : UNKNOWN
	GENDER: : MALE

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

PLEASE REFER TO 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	GY1899C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TAY SIEW TUCK
NRIC/Passport Number	S1025314D
Contact Number	98335646
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.
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7. By the lodging 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

Grid area for sketch plan.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 10/06/2018 at about 1315hrs, I was driving my vehicle (A) with registration plate SLN 6181E along Pasir Ris Industrial Drive 1. When the traffic light turned red, I came to a complete stop behind vehicle B with registration plate (KY 1899C). Out of a sudden, I felt a huge impact and heard a loud bang sound. When I alighted I realised it was vehicle (B) that did a reversed and hit into the front of my vehicle (A).

I would like to state that I have a witness named Mr Lim, H/P 9877 6637.



DECLARATION

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

Policeholder's Signature
Date & Time:

Driver's Signature
(if driver is not the Policeholder)
Date & Time:

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



Signature of Reporting Centre Personnel.

A - SLN6181E
B - GY 1899C



Pasir Ris Industrial Drive 1

Date of Accident : 10 June 2018 Accident Time: 13.15 (24-HR-Format)
Accident Place : Pasir Ris Industrial Drive 1
Vehicle Reg. No. (Car Plate No.) : SLN 6181E
Vehicle Make/Model : AUDI S5
Insurance Company : NTUC Policy No. 5098480324
Owner or Company Name / IC No. : The Pupstop
Owner or Company Contact No. : 9386 9709 Owner's Hp 8833 1818 Company Tel
DRIVER'S Name / IC No. : Kenneth Lee Fun Lin
DRIVER'S Date Of Birth : 17/03/1992 DRIVER'S License Pass Date 25/02/2015
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: own company car
DRIVER'S Address : Blk 276 Bangkit Road
DRIVER'S Contact No. / Alt No. : 1) 9386 9709 2) 8833 1818
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : THEPUPSTOP@hotmail.com
Weather & Road Surface : (CLEAR & DRY) RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): 2 M

Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particular (if any)

Vehicle Reg. No: GY 1899C

Vehicle Reg. No: _____

Vehicle Make/Model: _____

Vehicle Make/Model: _____

Name Driver: TAY SIEW TUCK

Name Driver: _____

IC No. Driver: S1025314D

IC No. Driver: _____

Driver's Contact & Add: 98335646.

Driver's Contact & Add: _____

APT Blk 550 Hougang ST 51
#03-170
SINGAPORE 1953

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9209372G



Name

KENNETH LEE KUN LIN

李 昆 霖

Race

CHINESE

Date of birth

17-03-1992

Sex

M

Country of birth

SINGAPORE

4022363



NRIC No. S9209372G

Date of issue

27-03-2007

Address

APT BLK 276 BANGKIT ROAD
#04-124
SINGAPORE 670276

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9209372G**

Name: **KENNETH LEE KUN LIN**

Birth Date: **17 Mar 1992**

Issue Date: **25 Feb 2015**

002399558C

SG 50

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

	EFFECTIVE DATE
Class 3A Motor cars without clutch pedals (Auto) \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals \leq 2500kg	25 Feb 2015

NP 428A



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)

Certificate Number: 5098480324

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SLN6181E
Chassis Number : WAUZZZ8T39A045907
2. Name of Policyholder : THE PUPSTOP
3. Effective Date of Insurance : 02 Mar 2018
4. Expiry Date of Insurance : 01 Mar 2019
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
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.

6. Limitations as to Use#

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

This Policy does not cover

- (a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.
(d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$1,500
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : HOBBS INSURANCE AGENCY (00000572363)

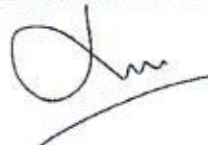
Date of Issue : 01 Mar 2018 16:45 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Claim Handling

The premium on this policy has not been collected.

Accident MT/0998226

Policy No.	5098480324	Vehicle No.	SLN6181E	GST Registration No.	
Policyholder Name	THE PUPSTOP			Policyholder NRIC	53249478D
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	88331818	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No
▼ Accident Details					
Report Date	11/06/2018 19:15	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	10/06/2018	Time of Accident hh:mm	13:15	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	PASIR RIS INDUSTRIAL DR 1				
▼ Benefits					
▼ Excess					
Own damage Excess	1,500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	1,500.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
▼ GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					
▼ Policyholder Mailing Address					
Address 1	BLK 276 #04-124	Address 2	BANGKIT ROAD	Address 3	SINGAPORE 670276
Address 4		Address Type	Singapore address	Post Code	670276
Unit No.	04-124	Related Policy Number	5098480324		
▼ OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	17/03/1992
Unnamed driver Name	KENNETH LEE KUN LIN	Driver NRIC	S9209372G	Driving Experience	3
Register Date of Driver License	25/02/2015	Driver Age	26	Contact No.(Home)	
Contact No.(Mobile)	88331818	Contact No.(Office)		Address 3	SINGAPORE 670276
Address 1	BLK 276 #04-124	Address 2	BANGKIT ROAD	Post Code	670276
Address 4		Address Type	Singapore address		
Unit No.	04-124				
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input type="radio"/>	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	THE PUPSTOP	Insured NRIC	53249478D
Contact No.(Mobile)	93869709	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SLN6181E	TP Vehicle Number	GY1899C
Claim Description	SLN6181E / GY1899C ON 10 Jun 2018			Name of Preferred Workshop	0
Preferred Workshop Contact No.	0	Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	11/06/2018 00:00
Date Registered	11/06/2018 19:24	Claim Close Date			
Report Taken By	LIEW SHAN HUI				
<input checked="" type="checkbox"/> Print AK letter					

Save

Submit

Attachment

Accident No.	MT/0998226	Claim No.	001		
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	11/06/2018 19:25		
Path *		Category *	Confidential	Urgency *	Descr
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

ClearPlease SelectNONormal

ClearPlease SelectNONormal

ClearPlease SelectNONormal

Sen

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:25	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-11
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:25	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-11
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:25	SAS	Normal	SAS 2018-6-11
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:25	Photos	Normal	Photos 2018-6-11
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:25	Photos	Normal	Photos 2018-6-11
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:25	Photos	Normal	Photos 2018-6-11
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:24	Photos	Normal	Photos 2018-6-11
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:24	Photos	Normal	Photos 2018-6-11
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:24	Photos	Normal	Photos 2018-6-11
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jun 2018 19:24	Photos	Normal	Photos 2018-6-11

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Display in New Window Scan and uploading