

# NATIONAL Assessment Centre Services

[wef: 1 Jan/99]

NA/468077950

Date In: 18/06/2018 11:05	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA/468010935/Y	E-mail (within 8hrs, AIC 2hrs)		
Veh No: SGG 8595C	i-Motor Claim Form	MT/0998876-001	18/06/2018
D.O.A: 18/06/2018 13:10	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		U: 18
OD: (TP) Reporting Only	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: SGG 4326B	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

NA1803846	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);		1st Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30			
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2004)			
	6) TR: Re-inspection \$75			
	7) NI: Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	9) NI: Idac Mobile			
	*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	18/06/2018 11:05
Date Of Accident	14/06/2018 13:10
Exact Location Of Accident	ALONG ENG NEO FLYOVER TOWARDS TUAS
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGG8595C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HO AH MIN
NRIC No	S1251978H
Email Address	HANCARREPAIRS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96260442
Alternative Phone No	OTHERS-96260442

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5080209904-02
Cover Note Number	

### Driver

Name of Driver	HO AH MIN
NRIC No	S1251978H
Date Of Birth	21/01/1957
Occupation	INDOOR
Date Of Driving Pass	30/07/1979
Driving Experience	38 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96260442
Fax Number	
Contact Number	OTHERS-96260442
EMail Address	HANCARREPAIRS@GMAIL.COM



### SKETCH PLAN

Vehicle No: \_\_\_\_\_

DOA: \_\_\_\_\_

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- 4) The issue & 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 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.
- 8) **Consent under the Personal Data Protection Act (PDPA):** I understand, acknowledge, agree and consent that:-
  - a) My insurer, my workshop & 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 & 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 & 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 & any necessary investigations relating to the claims;
    - (ii) 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) involved in this accident and the Insurers' 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.

PLEASE NOTE YOUR INSURER MAY HAVE A 14 DAY-TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY.

Policyholder's Signature  
Date & Time

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

Witnessed by Reporting Center  
Personnel

### Sketch Plan

Vehicle A :  
SGG8595C  
Vehicle B :  
SJQ4326B

Eng Neo  
Flyover  
(towards Tuas)

between Lamppost  
1069/1A and 1068/2

The diagram shows a road with five vertical dashed lines. On the right side, there are two vehicle icons labeled 'A' and 'B' stacked vertically. On the left side, there are five upward-pointing arrows, one in each lane. The text 'Vehicle A : SGG8595C' and 'Vehicle B : SJQ4326B' is written on the left. The text 'Eng Neo Flyover (towards Tuas)' is written on the left. The text 'between Lamppost 1069/1A and 1068/2' is written at the bottom. The text 'X Lamppost 1069/1A' is written at the top right, and 'X Lamppost 1068/2' is written at the bottom right.

**Describe Circumstances of the Accident**

I was travelling along ~~Highway~~ Eng Neo Flyover Towards Tuar Betwaan  
Lamp Post 1068/2 & 1069/1A.

I slowed down and came to a complete stop because car  
slowed down and  
in front of me, stopped.

Traffic was moderate.

However, vehicle (B) could not stop in time and hit onto my  
car (A)'s rear portion. My car (A)'s Rear boot was not able to  
close after the accident.


We exchanged particulars thereafter.

**Declaration**

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

  
\_\_\_\_\_  
Policyholder's Signature  
Date & Time

  
\_\_\_\_\_  
Driver's Signature  
(If driver is not policyholder)  
Date & Time

 18/06/2018  
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

## Claim Handling

Accident MT/098876

Policy No.	5080209904-02	Vehicle No.	SGG8595C	GST Registration No.	
Policyholder Name	HO AH MIN			Policyholder NRIC	S1251978H
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	96260442	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFR	Yes	TCA	Yes	eCode Reason	
NCD Protection	Yes	NCD Endowment(%)	50	Private Hire	No

## ▼ Accident Details

Report Date	18/06/2018 11:14	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	18/06/2018	Time of Accident hh:mm	13:10	Country of Accident	Singapore
Reporting Centre		Orange Fence		JCM No.	
Accident Location	ALONG ENG NED FLYOVER TOWARDS TUAS				

## ▼ Benefits

Coverage		Sum Insured	
Transport Allowance		99999999.99	
Excess Waiver		99999999.99	

## ▼ Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
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	44 BEDOK RJA PLACE	Address 2	BEDOK RJA	Address 3	SINGAPORE 489796
Address 4		Address Type	Singapore address	Post Code	489796
Unit No.		Related Policy Number	5080209904-02		

## ▼ OI Driver Info

Driver Name	HO AH MIN	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S1251978H	Driver DOB	21/01/1993
Register Date of Driver License	30/07/1579	Driver Age	51	Driving Experience	38
Contact No.(Mobile)	96260442	Contact No.(Office)		Contact No.(Home)	
Address 1	44 BEDOK RJA PLACE	Address 2	BEDOK RJA	Address 3	SINGAPORE 489796
Address 4		Address Type	Singapore address	Post Code	489796
Unit No.					
Does he own a Singapore Registered car?	Yes	Driver Vehicle No.	SGG8595C	Driver Insurer Company	NTUC

## Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes
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## Modification History

Claim 001 New

Claim Type *	GD-MX	Insured Name	HO AH MIN	Insured NRIC	S1251978H
Contact No.(Mobile)	96260442	Contact No.(Home)	84463548	Contact No.(Office)	
Email Address	aharino@singnet.com.sg	OI Vehicle Number	SGG8595C	TP Vehicle Number	5JQ4326B
Claim Description	SGG8595C / 5JQ4326B ON 14 Jun 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	18/06/2018 11:17	Claim Close Date		Date Received	18/06/2018 00:00
Report Taken By	ROSLI WAHAB				

Print Ak letter

Save Submit

## Attachment

Accident No.	MT/098876	Claim No.	001
Last Doc. Received	Yes	Upload Date	18/06/2018 11:18

Path \*

Choose File	No file chosen
Choose File	No file chosen
Choose File	No file chosen
Choose File	No file chosen
Choose File	No file chosen
Choose File	No file chosen
Message Read	

## ▼ Attachment List

Attachment	Uploaded By/Data	Category	Urgency	Description	Hsg Sent? Action (CD)
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	edit
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	edit

Send Message Upload



	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	Photos	Normal	Photos 2018-6-18	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	SAS	Normal	SAS 2018-6-18	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UNIT MERAH)) on 18 Jun 2018 11:18	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-18	<a href="#">Edit</a>
<b>Video List</b>					
Uploaded By/Date	Folder Data	File Name		Source	Action
<div>Display in New Window</div> <div>Scan and uploading</div>					

**PERSONAL PARTICULARS**

Date of Accident: 14/06/2018 Time of Accident: 1:10pm (24Hrs)  
Vehicle No: SG68595C Vehicle Make/Model: Toyota Altis 1.6A  
Exact Location of Accident: Along Eng Neo Flyover Toward Tuas Between Lamp Post 1068/2 & 1069/1A  
Owner's Name/NRIC: Ho Ah Min / S1251978H  
Driver's Name/NRIC: Ho Ah Min / S1251978H  
Driver's Contact: 96260442 Insurance Co & Policy No: NTUC  
Driver's Email Address: hancartrepairs@gmail.com  
Relationship between Owner & Driver: Spouse/Children/Friend/Parents/Others specify: —

What do you wish to claim (Please circle one only)

1) Own Insurance 2) Other Vehicle (The one you want to claim against) 3) Reporting (For Recording Purposes)

Exact Purpose for which the vehicle was being used at time of accident? (Please circle one only)

Private Use / Work Purpose

Weather Condition & Road Conditions?

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet

Occupation

Indoor / Outdoor

Any Injuries? (MC of 3 Days or more, police report is required)

Yes / No

If Yes, which police station? \_\_\_\_\_

The Other Party (Vehicle B) Details

Driver's Name/IC: Nurhayati Binte Sukiman / S8538402C Vehicle No: 5JQ 4326B

Insurance Company: \_\_\_\_\_ Driver's Contact: 94557341

(If more than 2 vehicles involved, please indicate the other party vehicle numbers below)

Other Vehicle (Vehicle C): \_\_\_\_\_

Independent Witness (If Any): \_\_\_\_\_ Contact: \_\_\_\_\_

Preferred Workshop (If Any): \_\_\_\_\_ Contact: \_\_\_\_\_

\* If no proper document are produced, IDAC should not file the report.

\* Information will be discarded after one week.

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1251978H



Name

HO AH MIN

何亚明

Race

CHINESE

Date of Birth

21-01-1957

Sex

M

Country of Birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S1251978H

Name

HO AH MIN

Birth Date: 21 Jan 1957

Issue Date: 16 Jun 2003



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

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

PASS DATE

30 Jul 1979



License No: S1251978H

N 428A



00059564



NRIC No: S1251978H

Blood Group

A+

Date of issue

27-08-1991

Address  
44 BEDOK RIA PLACE  
SINGAPORE 1648



## 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: 5080209904-02

Cover : drive CLASSIC

- |   |                     |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle  | : SGG8595C          |
| Chassis Number  | : MRO53REH104543293 |
| 2. Name of Policyholder   | : HO AH MIN         |
| 3. Effective Date of Insurance  | : 16 May 2018       |
| 4. Expiry Date of Insurance   | : 15 May 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)	: N/A
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	: YES (FREE)
TRANSPORT ALLOWANCE	: YES
EXCESS WAIVER	: YES
PRIMARY DRIVER	: HO AH MIN
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 : TAN YONG ENG (00000522724)

Date of Issue : 02 May 2018 10:06 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive