

NATIONAL Assessment Centre Services. [wef 1 Jan'05] MNA1807989

Date In: 21/6/18-10:29	Job description	Date & Time Completed	Done by
Ref No: NA INC18011326/24	SAS e-filing		
Veh No: SKR91054	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 16/6/18-14:05	i-Motor Claim Form	MT10999578-001	21/6/18 19:53
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SKU17322	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% P: 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

NA1807912	Invoice Preparation Checklist	Am't (\$) Inc Bill	Am't (\$) Add Bill
Claimant's Particulars:	1) AR: Accident Reporting (\$30);		
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		
	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:-		
	QD:		
	*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		
Auditors' Comments:	Invoice dated	Fee Charged	
Ref. 1:	Invoice dated	Fee Charged	
Ref. 2 / 3:			

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	21/06/2018 10:29
Date Of Accident	16/06/2018 14:05
Exact Location Of Accident	SLIP RD CTE TWDS BRADDELL RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR9105Y
Insured/Policyholder	
Name Of Registered Owner	ZAINOL ABIDIN BIN ABU BAKAR
NRIC No	S1413276G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96322568
Alternative Phone No	OFFICE-96322568

Vehicle Particulars

Manufacturer	HONDA
Model	STREAM 1.8 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	5092442222
Cover Note Number	

Driver

Name of Driver	ZAINOL ABIDIN BIN ABU BAKAR
NRIC No	S1413276G
Date Of Birth	05/01/1960
Occupation	INDOOR
Date Of Driving Pass	26/07/1980
Driving Experience	37 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96322568
Fax Number	
Contact Number	OFFICE-96322568
Email Address	NOEMAIL

Address	BLK 774 YISHUN AVENUE 3 #05-191
Postcode	760774
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 - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	4
Passenger 1	NAME: : - GENDER: : FEMALE
Passenger 2	NAME: : - GENDER: : FEMALE
Passenger 3	NAME: : - 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

ON STATED DATE AND TIME, MY VEHICLE WAS STATIONARY STOPPED BEFORE THE STOPPING LINE AS THERE WAS INCOMING VEHICLE COMING OUT FROM THE MAIN ROAD. SUDDENLY VEHICLE B HIT ONTO MY VEHICLE REAR PORTION.

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	SKU1732Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LAWRENCE LOY BOXUAN

NRIC/Passport Number

S7231948F

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1


SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.

 31/6/18 10:44

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

Bradden Rd

A = SKR91054

B = SKU17322

The sketch plan shows a road intersection on a grid background. A horizontal road is labeled 'Bradden Rd'. A vertical road intersects it from the bottom. A vehicle labeled 'A' is shown at the intersection, moving towards the top right. A vehicle labeled 'B' is shown at the intersection, moving towards the bottom left. The vehicles are represented by rectangles with arrows indicating their direction of travel.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to statement.

A large rectangular box with horizontal lines for writing. A diagonal line is drawn across the box from the bottom left to the top right.

DECLARATION

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

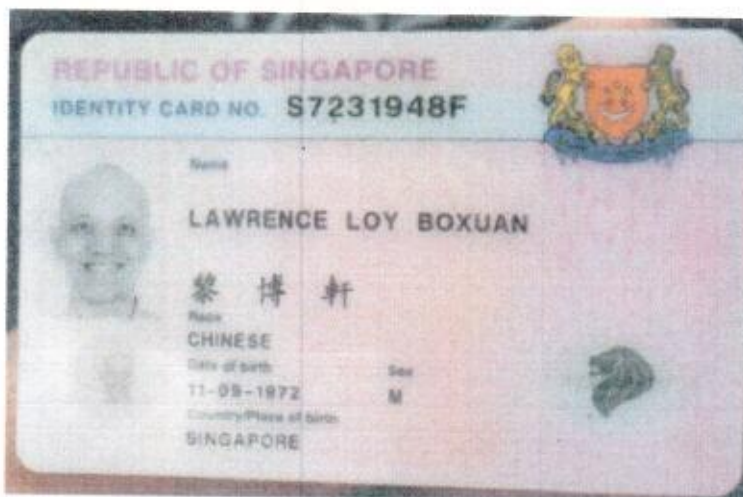
Policyholder's Signature
Date & Time:

GIA/INC SketchPlanForm_V2

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

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







REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1413276G**
 Name: **ZAINOL ABIDIN BIN ABU BAKAR**

Birth Date: **05 Jan 1960**
 Issue Date: **03 Sep 2010**


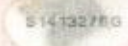
001888221C

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. **S1413276G**

Name: **ZAINOL ABIDIN BIN ABU BAKAR**

Race: **MALAY**
 Date of birth: **05-01-1960** Sex: **M**
 Country of birth: **SINGAPORE**

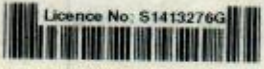



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		EFFECTIVE DATE
Class 3	Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg	26 Jul 1980
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	09 Oct 1989

NP 428A

Licence No: **S1413276G**




4628088

NRIC No. S1413276G

Date of issue: **28-08-2010**

Address: **APT BLK 774 YISHUN AVENUE 3
 #05-191
 SINGAPORE 760774**

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="16/06/2018 14:05"/>						
Vehicle No.(For Motor)	<input type="text" value="SKR9105Y"/>								
<input type="button" value="Search"/>									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5092442222	ZAINOL ABIDIN BIN ABU BAKAR	S1413276G	GPC	drive CLASSIC	SKR9105Y	SKR9105Y	08/07/2017	23/10/2018
<input type="button" value="Continue"/>									

▼ Policy Information

Policy No.	5092442222	Policyholder Name	ZAINOL ABIDIN BIN ABU BAKAF	Policyholder NRIC	S1413276G
Address	BLK 774 #05-191 YISHUN AVENUE 3 SINGAPORE 760774				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	07/07/2017	Effective Date	08/07/2017 00:00	Expiry Date	23/10/2018 23:59
Excess Type		All Claim Excess			
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0	Young/Inexperience Driver Excess	
Agent	TECK WEI CREDIT PTE. LTD.	Agent Tel.	64650020 null	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 774 #05-191	Address 2	YISHUN AVENUE 3	Address 3	SINGAPORE 760774
Address 4		Address Type	Singapore address	Post Code	760774
Unit No.	05-191	Related Policy Number	5092442222		

▶ Insured Object: SKR9105Y

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	23/04/2018 00:00	POI Extension/Shorten	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that the Period of Insurance of this policy is amended as follows: PERIOD OF INSURANCE: 08 Jul 2017 TO 23 Oct 2018 In view of this amendment, an additional premium of \$216.86 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash, credit card or NETS.

Continue

Cancel

- **Exit.**

Policy No.	5092442222	Vehicle No.	SKR9105T	GST Registration No.	
Policyholder Name	ZAINOL ABIDIN BIN ABU BAKAR	Cover Type	drive CLASSIC	Policyholder NRIC	S1413276G
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	96322568	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	<div><div></div><div></div></div>
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	50	eCode Reason	
NCD Protection	No	Accident Report Within 24 hrs	Yes	Private Hire	No
▼ Accident Details		Time of Accident hh:mm	14:05	Accident Type	Collision - head to Rear
Report Date	21/06/2018 19:52	Orange Force		Country of Accident	Singapore
Date of Accident	16/06/2018			ICM No.	
Reporting Centre					
Accident Location	SUP RD CTE TWDS BRADDELL RD				
▼ Benefits					
▼ Excess					
Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
▼ GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					

Address 1	BLK 774 #05-191	Address 2	YISHUN AVENUE 3	Address 3	SINGAPORE 760774
Address 4		Address Type	Singapore address	Post Code	760774
Unit No.	05-191	Related Policy Number	5092442222		
OI Driver Info					
Driver Name	ZAINUL ABDIN BIN ABU BAKAR	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S1413276G	Driver DOB	05/01/1960
Register Date of Driver License	26/07/1980	Driver Age	58	Driving Experience	37
Contact No.(Mobile)	96322568	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 774	Address 2	YISHUN AVENUE 3	Address 3	SINGAPORE 760774
Address 4		Address Type	Singapore address	Post Code	760774
Unit No.	05-191				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	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 Type *	GD-MX	Insured Name	ZAINOL ABIDIN BIN ABU BAKAR		Insured NRIC	S1413226G
Contact No. (Mobile)	96322568	Contact No. (Home)			Contact No. (Office)	
Email Address		OI Vehicle Number	SKR910SY		TP Vehicle Number	SKU1732Z
Claim Description	SKR910SY / SKU1732Z ON 16 Jun 2018				Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault			
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown		GIA report	Received
Date Registered	21/06/2018 19:53	Claim Close Date			Date Received	21/06/2018 00:00
Report Taken By	Jackson					
<input checked="" type="checkbox"/> Print AK letter						

Save Submit

Accident No.	MT/0999578	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	21/06/2018 19:55

Path *	Category *	Confidential	Urgency *	Description *
<input type="text"/> <input type="button" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text"/> Please Select <input type="button" value="Clear"/>	<input type="text"/> NO <input type="button" value="Clear"/>	<input type="text"/> Normal <input type="button" value="Clear"/>	<input type="text"/>
<input type="text"/> <input type="button" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text"/> Please Select <input type="button" value="Clear"/>	<input type="text"/> NO <input type="button" value="Clear"/>	<input type="text"/> Normal <input type="button" value="Clear"/>	<input type="text"/>
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<input type="text"/> <input type="button" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text"/> Please Select <input type="button" value="Clear"/>	<input type="text"/> NO <input type="button" value="Clear"/>	<input type="text"/> Normal <input type="button" value="Clear"/>	<input type="text"/>

Attachment	Uploaded By/Date	Category		Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:55	NRIC/ Driving License		Normal	NRIC/ Driving License 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	SAS		Normal	SAS 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	Photos		Normal	Photos 2018-6-21		Edit
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:54	Photos		Normal	Photos 2018-6-21		Edit
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:53	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:53	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:53	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:53	Photos		Normal	Photos 2018-6-21		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jun 2018 19:53	Photos		Normal	Photos 2018-6-21		Edit
 Video List							
Uploaded By/Date	Folder Date	File Name		Source	Action		
<div>Display in New Window</div> <div>Scan and uploading</div>							