

NATIONAL ASSESSMENT CENTRE SERVICES (NAC)

Date In: 25/06/2018 10:30

Ref No: NA/II/18011454/KY

Veh No: SLG 5554G

D.O.B: 23/06/2018 14:00

OD TP Reporting Only

TP Insured:

Job description

Date & Time Completed

Done by

SAS e-filing

E-mail (within 24hrs, AIC 24hrs)

1-Motor Claim Form

1-Motor W/O (within 100 hrs, 24 hrs)

1-Photo Uploaded

Assessment/Survey Report

Assessment Report by Rax/Hand to Owner/WKSP

Preferred WKSP / INC Assign WKSP / OWI

TP Particulars

Yeh No

SLK 8304 X

INC

Tel

Fax

Owner/Driver

Policy No

Period

Tel

Confirmed by

Cover Type

Insured/Driver Liability

% (Note: BIL, SLANI (WO): NI 0-20%; PI 21-79%; PI 80-100%)

Year of Registration

Warranty: YES / NO

Excess (\$)

Loading: \$1,000 / \$2,000

General Remarks

() Work-In Customer: Customer's information strictly confidential & strictly NO later of repair.

() Total Loss Case: to e-mail insurer URGENTLY.

Drive-In

Towed-In

Invoiced

YES / NO

Towing Co

Remarks

INC Hotline: 6788 0016

1) Apply for Towing Allowance

() / Courtesy Car ()

2) QC Check / Post Repair Inspection

()

3) Upload Resurvey Photo (Repair Cost > \$3000)

()

Injury

Date/Time

Action

NA1803984

Invoice Breakdown of Charges

Insurance Particulars

Driver/Owner

Policy No

Assessed Position

Checked by (Eng-In-Charge)

Comments

LL

7/2

1) ARI Accident Report Unit (300)	
2) DAID Damage Assessment (300)	INC (40)
3) TP Towing Fee	\$250
4) PT Follow Through Survey	115
5) PT Follow Through Survey (Resurvey)	115
Exclusion: as per INC Only (Ref 10 Jan 2018)	
6) TRAI Inspection	415
7) NTUC OA + SMRT Survey	1140
8) NTUC Additional Survey	
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Invoice dated

File Charge

Printed

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	25/06/2018 10:30
Date Of Accident	23/06/2018 14:00
Exact Location Of Accident	GRANGE RD TURNING RH INTO ORCHARD CINELEISURE C/P
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG5554G
Insured/Policyholder	
Name Of Registered Owner	TANG PENG YEW
NRIC No	S1372978F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98419444
Alternative Phone No	OTHERS-98419444

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	EVO 9 RS 2.0 M
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M494274
Cover Note Number	

Driver

Name of Driver	TANG JIA MING CLARENCE
NRIC No	S9201573D
Date Of Birth	12/01/1992
Occupation	INDOOR
Date Of Driving Pass	19/03/2010
Driving Experience	8 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98419444
Fax Number	
Contact Number	OTHERS-98419444
EEmail Address	NOEMAIL

Address	149 LOYANG RISE
Postcode	507452
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	2
Passenger 1	
	NAME: : NIL
	GENDER: : FEMALE

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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REVERT
Was there any audio recorded?	NO

Details of Witness 1

Name	
Phone Number	97812890
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLK8304X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KWOK WAI SIONG ALLEN
NRIC/Passport Number	S1649612Z
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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.

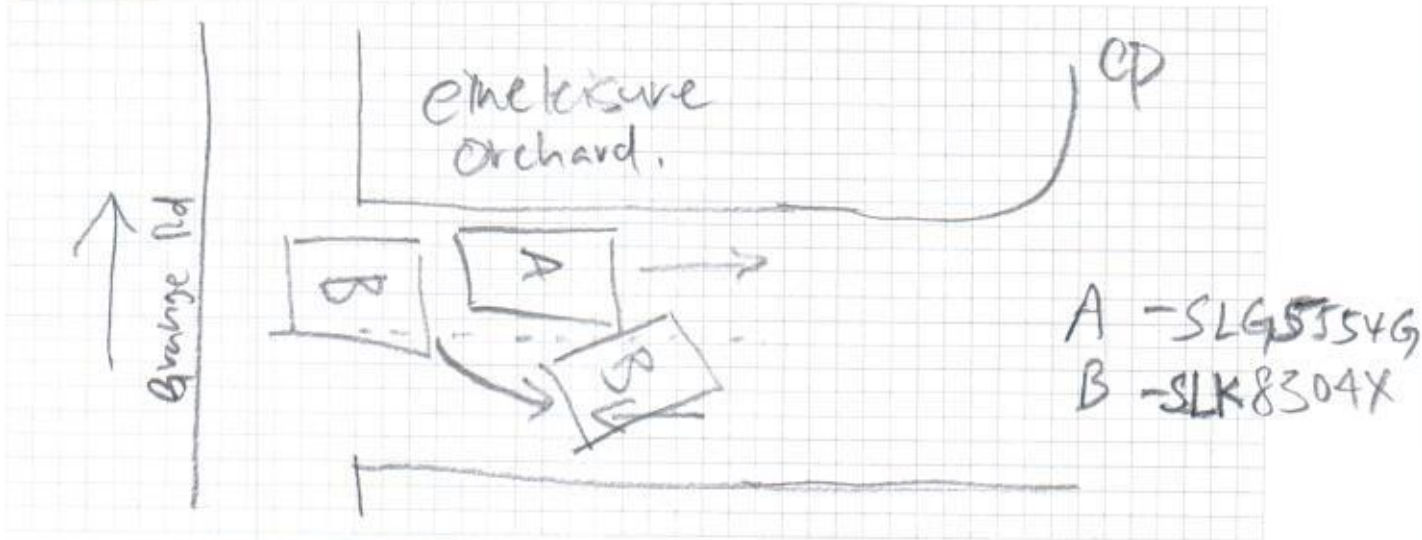
Policyholder's Signature
Date & Time:

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

25/06/18 1044 hrs.

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle A traveling down grange rd turning right into Orchard cineisure carpark entrance. When traveling towards the carpark as depicted above, Vehicle B went against oncoming traffic. Vehicle B then collided into the driver front side of vehicle A while trying to avoid collision with oncoming vehicle as vehicle B was driving against the flow of traffic.

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:

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

25/06/18 1044h4.

25/6/2018

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9201573D



Name

TANG JIA MING CLARENCE

鄧嘉明

Race
CHINESE

Date of birth

12-01-1992

Sex

M

Country/Place of birth
SINGAPORE



5552732



NRIC No. S9201573D



Date of issue

04-01-2016

Address

149 LOYANG RISE
SINGAPORE 507452

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
S9201573D

TANG JIA MING CLARENCE

Birth Date: 12 Jan 1992

Issue Date: 08 Feb 2017



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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg 19 Mar 2010

NP 428A



Monsterg @ singnet.com.sg ✓

S1372978F

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)

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 a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the legislation relating to compulsory Insurance.

The Certificate must be returned if the Insurance is suspended during its currency.

Agency Code: **75961SE**
Comprehensive

Insured/ Named Drivers Excess : **\$2000/- Sect I**
Unnamed Drivers Excess: **\$2500/- Sect. I & additional \$2500/- Sect. I for age**
Between 22 to 26 years or > 65 years old
Windscreen Excess: **\$100/-**

CERTIFICATE NO.

M494274

1. Index Mark and Registration
Number of Vehicle

SLG 5554 G

2. Name of Policy Holder

Tang Peng Yew

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

25th December 2017

4. Date of Expiry of Insurance

24th December 2018

5. Person or Classes of Persons entitled to drive*

(a) The Policyholder

The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.

(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*

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.

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).

Date of Issue: **SJ/02.11.2017**

for India International Insurance Pte. Ltd.
(APPROVED INSURERS)

Remarks: **Policy does not cover driver below 22 years old**
Or with less than 2 years of driving experience

M.X. 1 (PRIVATE CAR)
INDIVIDUAL OWNERSHIP


Authorised Signatory

IMPORTANT NOTICE

Policyholders are hereby warned that under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap. 189), it shall be unlawful for any person to use or to cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

Policyholders are further warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance 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).

The Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agree to cover the new owner they will endorse the policy accordingly and will issue a new Certificate of Insurance in the new owner's name.

IN THE EVENT OF AN ACCIDENT NOTIFICATION SHOULD BE GIVEN IMMEDIATELY TO THE COMPANY. FAILURE TO DO SO WILL RESULT IN UNDERWRITERS DECLINING LIABILITY.

Agent/Broker Name: **P&C**

Hire Purchase Company: **NA**