NATIONAL Assessment Centre Services MUA48082577

Date In: 26/06/2018 18:17	
Ref No: NBB/FMC/180/165914	
Veh No: SKM 5701E	
D.O.A: 25/06/2018 18:55	
OD TP Reporting Only	
TP Insurer:	

Job description	Date & Time Completed	Done by
SAS e-filing		
E-mail (within 8hrs, AIC 2hrs)		
i-Motor Claim Form	M1/1000504-001	27/06/2018 11:56
i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
i-Photo Uploaded		
Assessment/Survey Report		
Ass't Report by Fax / Hand to Owner/Wksp		

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

TP Particulars: Veh No: SKE 4732B 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

NA1804060

Claimant's Particulars :- (

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist		Amt ($) 1st Bill	Amt ($) Add Bill
1) AR : Accident Reporting ($30);			
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 2005)			
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*		[redacted]
Invoice dated	*Fee Charged*	[redacted]	

MNA418082577 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 26/06/2018 18:17
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

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	26/06/2018 18:17
Date Of Accident	25/06/2018 18:56
Exact Location Of Accident	AIRPORT BOULEVARD TOWARDS TERMINAL 3 EXIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKN5101E
Insured/Policyholder	
Name Of Registered Owner	OW SIEW WENG
NRIC No	S0264060J
Email Address	DAVE_OW@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97995119
Alternative Phone No	OTHERS-98427750
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	ELANTRA-1.6 ELITE (MD) (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	REPORTING ONLY
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	5066296165-04
Cover Note Number	
Driver	
Name of Driver	OW SIAK WEI (OU XUWEI)
NRIC No	S7313323H
Date Of Birth	07/04/1973
Occupation	INDOOR
Date Of Driving Pass	21/08/1996
Driving Experience	21 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97995119
Fax Number	
Contact Number	OTHERS-98427750
EMail Address	DAVE_OW@YAHOO.COM

Address	BLK 19 GHIM MOH ROAD #04-241
Postcode	270019
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	2
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: : WIFE 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

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLE4733B
Vehicle Make/Model/Colour	TOYOTA SIENTA
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	MOHAMAD HANIM BIN ALIYAS
NRIC/Passport Number	S1592534E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: :

GENDER: :

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**.
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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.

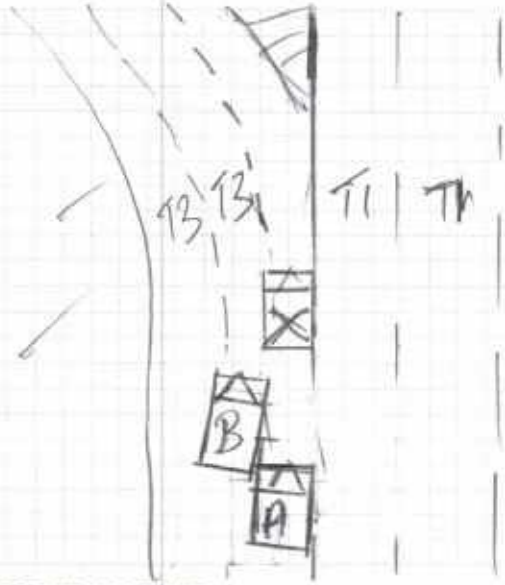
   (e) the information so collected under (d) above may be shared / disclosed:

   (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: 26/6/2018 1000am	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN AIRPORT BOULEVARD TOWARDS TERMINAL 3 EXIT



A) SKM 5101E

B) SLE 4732B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At 645pm 25 June 2018, I was exiting into the lane for Changi airport terminal 3 within a safe distance from a white car in front when a black Toyota Sienta SLE 4732B cut into my lane very quickly and scratched the left side of my car. From the recorded car video, I noted that the driver of SLE 4732B had actually accelerated and overtook a white car behind me before the accident. The driver then stopped his car in front of me and we exchanged our information.

DECLARATION

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

26/06/2018

Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time: 26/6/2018 1000 am	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Claim Handling

Exit

Accident MT/1000504

Policy No.	5066296165-04	Vehicle No.	SKN5101E	GST Registration No.	
Policyholder Name	OW SIEW WENG			Policyholder NRIC	S0264060J
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive PREMIUM	Loading	0
Contact No.(Mobile)	97995119	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	27/06/2018 11:29	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	25/06/2018	Time of Accident hh:mm	18:55	Country of Accident	Singapore
Reporting Centre		Orange Form		ICM No.	
Accident Location	AIRPORT BOULEVARD TOWARDS TERMINAL 3 EXIT				

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 Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 92 #07-720	Address 2	COMMONWEALTH GRVE	Address 3	SINGAPORE 140092
Address 4		Address Type	Singapore address	Post Code	140092
Unit No.		Related Policy Number	5066296165-04		

01 Driver Info

Driver Name	OW SIAK WEI	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S7533323H	Driver DOB	07/04/1973
Register Date of Driver License	21/08/1996	Driver Age	45	Driving Experience	21
Contact No.(Mobile)	98427750	Contact No.(Office)		Contact No.(Home)	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SKN5101E	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No

Modification History

Claim 001 OD-MX New

Claim Type *	OD-MX	Insured Name	OW SIEW WENG	Insured NRIC	S0264060J
Contact No.(Mobile)	97995119	Contact No.(Home)	6475260	Contact No.(Office)	
Email Address		OI Vehicle Number	SKN5101E	TP Vehicle Number	SLE4732B
Claim Description	SKN5101E / SLE4732B ON 25 Jun 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferered Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	27/06/2018 11:55	Claim Close Date		Date Received	27/06/2018 00:00
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss but Repaired	

Print AK letter

Save Submit

Attachment

Accident No.	MT/1000504	Claim No.	001
Last Doc. Received	Yes No	Upload Date	27/06/2018 11:56

Path *

	Category *	Confidential	Urgency *	Description *
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	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	

Message Read Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 27 Jun 2018 11:56	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-27		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 27 Jun 2018 11:56	SAS	Normal	SAS 2018-6-27		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27		Edit

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 27 Jun 2018 11:56	Photos	Normal	Photos 2018-6-27	Edit

▽ **Video List**

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: (25 / 06 / 2018) (DD/MM/YYYY), TIME: (18 : 54) (HH:MM)

LOCATION: AIRPORT BLVD Towards ~~Changi Airport~~ Terminal 3 Exit.

1. **DETAILS OF VEHICLE**
   a) VEHICLE NUMBER: SKN 5101 E
   b) INSURANCE COMPANY: NTUC Income
   c) POLICY NUMBER: 5066296165-03
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)
   e) MAKE & MODEL: Hyundai Electra Elite
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: Private use
   I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
   IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. **INSURED / POLICY HOLDER**
   A) NAME: Ow Siew Weng (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S0264060J CONTACT: 97995119
   c) ADDRESS: 92 Commonwealth Drive #07-720 S(140092)

* CONTINUE TO **3.d** IF DRIVER ALSO POLICY HOLDER

*No of passenger (including driver) (2)

3. **DRIVER**
   a) NAME: Ow Siak Wei (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S7313323H CONTACT: 98427750
   c) ADDRESS: 19 Shih Mah Road #04-2011 S(270019)
   *d) DATE OF BIRTH: (07 / 04 / 1973) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS : : 21/08/1996

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Son

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
   b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)
   IF YES, PLEASE STATE WHICH POLICE STATION:

8. **THIRD PARTY VEHICLE**
   a) VEHICLE NUMBER: SLE4732B MODEL: Toyota Sienta
   b) DRIVER'S NAME: Mohamad Hanim Bin Aliyas
   c) NRIC/FIN/PASSPORT: S1592534E CONTACT:

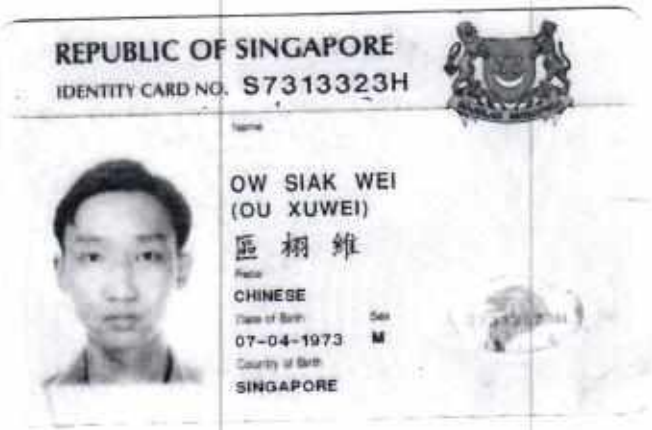
*No of passenger (including driver) (2)

9. THIRD PARTY VEHICLE
   d) VEHICLE NUMBER: MODEL:
   e) DRIVER'S NAME:
   f) NRIC/FIN/PASSPORT: CONTACT:

*No of passenger (including driver) ( )

email = dave_ow@yahoo.com

fax =


REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7313323H

Name

OW SIAK WEI
(OU XUWEI)

区栩维

Race
CHINESE

Date of Birth
07-04-1973

Sex
M

Country of Birth
SINGAPORE


REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7313323H

Name

OW SIAK WEI
(OU XUWEI)

Birth Date 07 Apr 1973

Issue Date 04 Jul 2003

0006263555H


1296192

NRIC No S7313323H

Blood Group

Date of Issue

AB+ 21-09-1993

Address

APT BLK 18 GHIM MOH ROAD #04-241
SINGAPORE 270018

NRIC No: S7313323H Date: 05/01/2018


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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 21 Aug 1996

12:00
10月1日 星期一

Licence No: S7313323H

NP 428A

eBaoTech GeneralClaim

Hello, NAC_BUKIT_MERAH_800676 · Change Language · Change Password · Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.
Date of Accident 25/06/2018 14:46
Vehicle No.(For Motor) SKN5101E

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5066296165-04	OW SIEW WENG	S0264060J	GPC	drivo PREMIUM	SKN5101E	SKN5101E	21/06/2018	20/06/2019

Continue