

NATIONAL Assessment Centre Services

(wef 1 Jan 2015)

MA468022703

Date In: 27/06/2018 09:57	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NBO/MA4680/167714	E-mail (within 3hrs, A/C 2hrs):		
Veh No: FBE 6627 C	i-Motor Claim Form: MR/1000465-001	27/06/2018	
D.O.A: 26/06/2018 14:45	i-Motor W/O (Within: OD 2hrs, TP 4hrs):	10:20	
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: FBE 9058A	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

MA46804090 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 1) AR: Accident Reporting (\$30); 2) DA: Damage Assessment (\$100); INC (\$30) 3) TF: Towing Fee \$40/\$45 4) FT: Follow-Through Survey \$120 5) RT: 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:- ON* *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		Ant (\$) 1st Bill	Ant (\$) Add Bill
	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	27/06/2018 09:57
Date Of Accident	26/06/2018 14:45
Exact Location Of Accident	INTERSECTION OF CRAIG ROAD/TANJONG PAGAR ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE6627C
Insured/Policyholder	
Name Of Registered Owner	ZHENG HUIRONG, LYNETTE ANN
NRIC No	S8938965H
Email Address	LYNETTEZHENG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90170039
Alternative Phone No	OTHERS-90170039

Vehicle Particulars

Manufacturer	DUCATI
Model	HYPERMOTARD796-803CC (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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5091879289
Cover Note Number	

Driver

Name of Driver	ZHENG HUIRONG, LYNETTE ANN
NRIC No	S8938965H
Date Of Birth	06/11/1989
Occupation	INDOOR
Date Of Driving Pass	08/06/2017
Driving Experience	1 YEAR AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90170039
Fax Number	
Contact Number	OTHERS-90170039
Email Address	LYNETTEZHENG@GMAIL.COM

Address	18 TAMAN SERASI #08-24
Postcode	257722
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	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?	YES
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)	1

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?	NO
Was there any audio recorded?	NO

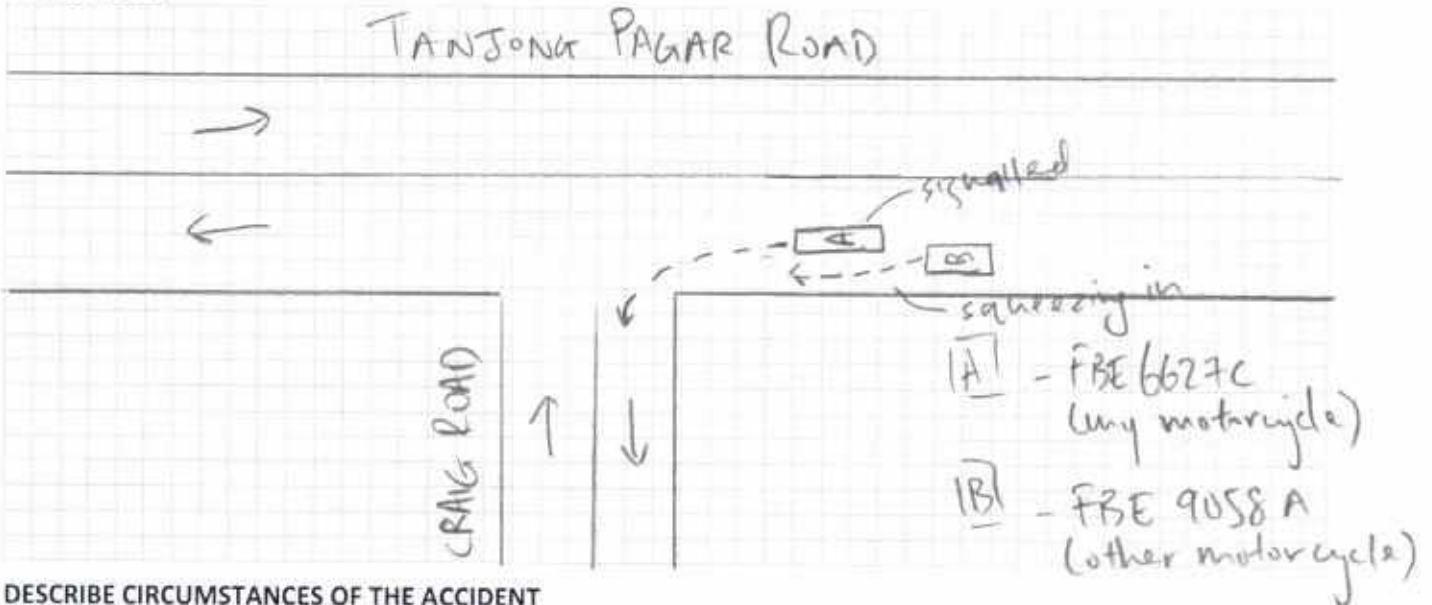
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBE9058A
Vehicle Make/Model/Colour	HONDA CBF150
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	ONG LIANG HOCK
NRIC/Passport Number	S0007462D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	ZHENG HUIRONG, LYNETTE ANN
------	----------------------------

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

New Sketch Plan

DECLARATION

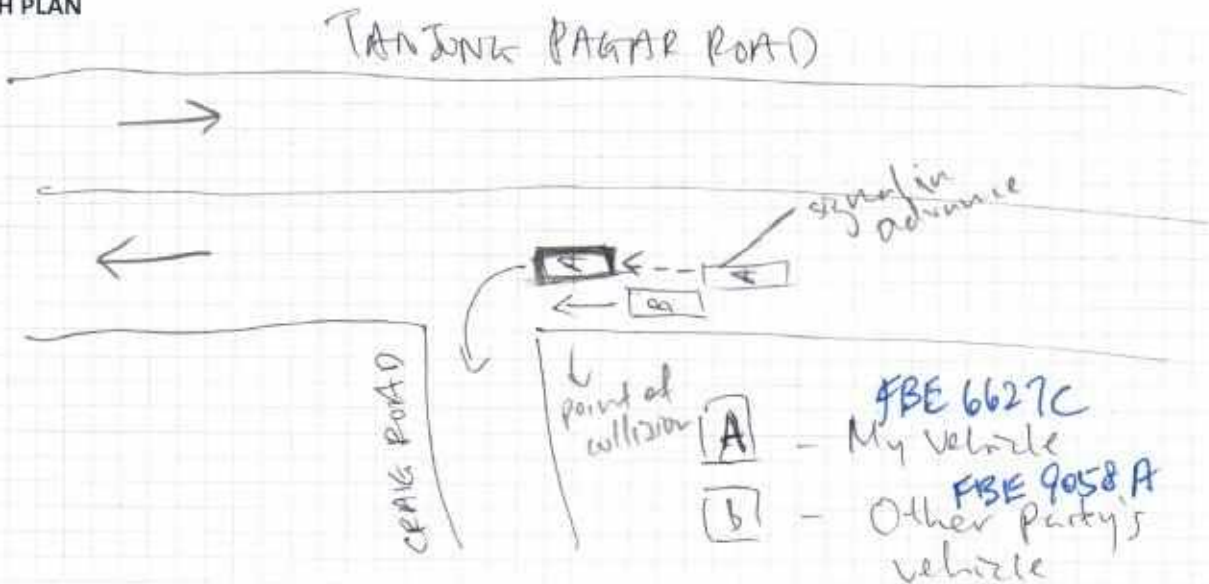
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 27/6/2018

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

Reporting Centre Personnel's Signature
Name: 27/06/2018
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was riding along Tanjong Pagar Road and going to turn left onto Craig Road. I had signalled my intention to turn left in advance and was preparing to make the turn when I heard shouting from behind me on the left. I saw the other rider coming straight towards me on my left side. I immediately applied the brakes but he collided into the left side of my bike, and both our bikes fell to the left. We both got out from our bikes with assistance from bystanders. He admitted that he was trying to continue straight on Tanjong Pagar Road. He had clearly not been paying attention to my signal and tried to squeeze on my left hand side instead of giving way. In my opinion, he was clearly at fault. My bike has sustained damage to its hand guard (and left turn signal), side mirror and fairing. I believe I should be entitled to claim for this damage.

DECLARATION

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

Policyholder's Signature

Date & Time: 26/6/18
3:55 pm

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name: [Signature]
NRIC/FIN No.: [Signature]

Claim Handling

Accident HT/1000465

Policy No.	3051875289	Vehicle No.	FBE6627C	GST Registration No.	
Policyholder Name	ZHENG HUIRONG, LYNETTE ANN			Policyholder NRIC	S8838955H
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	90570039	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFE	= No Yes	TCA	= No Yes	eCode Reason	
NCD Protection	No	NCD Endowment(%)	15	Private Hire	No

Accident Details

Report Date	27/06/2018 09:35	Accident Report Within 24 Hrs	Yes	Accident Type	Side Swipe
Date of Accident	26/06/2018	Time of Accident hh:mm	14:45	Country of Accident	Singapore
Reporting Centre		Damage Force		TCM No.	
Accident Location	INTERSECTION OF CRAIG ROAD/TANJONG PAGAR ROAD				

Benefits

Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore CO Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					

Policyholder Mailing Address

Address 1	10 TAMAN SERASI	Address 2	#09-24 BOTANIC GARDEN MAN	Address 3	SINGAPORE 257722
Address 4		Address Type	Singapore address	Post Code	257722
Unit No.		Related Policy Number	3051875289		

OI Driver Info

Driver Name	ZHENG HUIRONG LYNETTE ANN	Driver Type	Main Driver	Driver DOB	06/11/1989
Unnamed driver Name		Driver NRIC	S8938955H	Driving Experience	8
Register Date of Driver License	12/10/2009	Driver Age	28	Contact No.(Home)	
Contact No.(Mobile)	90570039	Contact No.(Office)		Address 3	SINGAPORE 257722
Address 1	10 TAMAN SERASI	Address 2	#09-24 BOTANIC GARDEN MAN	Post Code	257722
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.	FBE6627C	Driver/Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading	0 mg	Any Injury?	Yes = No		
------------------------------------	------	-------------	----------	--	--

Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	ZHENG HUIRONG, LYNETTE ANN	Insured NRIC	S8838955H
Contact No.(Mobile)	90570039	Contact No.(Home)	N/A	Contact No.(Office)	
Email Address	lynettesheng@gmail.com	OT Vehicle Number	FBE6627C	TP Vehicle Number	FBE9058A
Claim Description	FBE6627C / FBE9058A On 26 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	GTA report	Received
Date Registered	27/06/2018 09:35	Claim Close Date		Date Received	27/06/2018 00:00
Report Taken By	ROSLI WAHAB				

Print All letter

Save Submit

Attachment

Accident No.	HT/1000465	Claim No.	001
Last Doc. Received	Yes No	Upload Date	27/06/2018 10:20

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	
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_8006761 NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH) on 27 Jun 2018 10:20	SAS	Normal	SAS 2018-6-27		Edit
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH) on 27 Jun 2018 10:20	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-27		Edit
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH) on 27 Jun 2018 10:20	Photos	Normal	Photos 2018-6-27		Edit



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	Photos	Normal	Photos 2018-6-27	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B-UKIT MERAH)) on 27 Jun 2018 10:00	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: 26/06/2018 (DD/MM/YYYY), TIME: 14:45 (HH:MM)

LOCATION: Intersection of Coong Road and Tanjong Pagar Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBE 6627 C
 b) INSURANCE COMPANY: NTUC Insurance
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Yamaha Hypermotor 716
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Personal
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
 IF NO, PLEASE STATE (THIRD PARTY CLAIM) REPORTING ONLY

2. INSURED / POLICY HOLDER

- a) NAME: Aileen Huiyong Lynette Ann (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8438965 H CONTACT: 9072034
 c) ADDRESS: 18 Taman Sereni #08-24
Singapore 257722

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ASABOY (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

*d) DATE OF BIRTH: 06/11/1989 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: _____

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

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: FBE9058 A MODEL: Honda CBF 150
 b) DRIVER'S NAME: Ang Liang Hock
 c) NRIC/FIN/PASSPORT: S000742 D CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email = lynettezhang@gmail.com
 Fax = _____

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8938965H



Name

ZHENG HUIRONG, LYNETTE
ANN

郑慧蓉

Race

CHINESE

Date of birth

06-11-1989

Sex

F

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S8938965H
Name

ZHENG HUIRONG, LYNETTE
ANN

Birth Date: 06 Nov 1989

Issue Date: 08 Aug 2011



3897555

NRIC No: S8938965H



Date of issue:
16-11-2004

16 TAMAN SERASI #08-24
SINGAPORE 257722

NRIC No: S8938965H

Date: 27/11/2017

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

EFFECTIVE DATE

Class 2B	Motorcycles <= 200 CC	12 Oct 2009
Class 2A	Motorcycles between 201 CC and 400 CC	05 Oct 2015
Class 2	Motorcycles > 400 CC	09 Jan 2017
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver, and motor tractors/vehicles <= 2500 kg	29 Oct 2008

S / No. 9000268521

S8938965H

NP 42RA



Hello, NAC_BUKIT_MERAH_800676

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

Policy Query

Policy No.		Date of Accident	26/06/2018 15:47						
Vehicle No.(For Motor)	FBE6627C								
Search									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5091879289	ZHENG HUIRONG, LYNETTE ANN	S8938965H	GMC	Third Party	FBE6627C	FBE6627C	17/06/2017	09/08/2018
Continue									

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MAY18082703 Vehicle Registration No: FBE 6627C
Name (as shown in NRIC): ZHANG HUIRONG, LYNETTE ANN NRIC/FIN/Passport No: 889389654
(*Vehicle Driver / Vehicle Owner / *) Please delete as appropriate
Address: _____ Singapore ()
Contact (Tel): _____ Mobile No.: 90170039
Email Address: _____
Date of Accident: 26/06/2018 Time of Accident: 14:45
Place of Accident: INTERSECTION OF CRAIG ROAD / TONGKONG ROAD RO
Insurance Company: NRMC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ACCIDENT CIRCUMSTANCES & SKETCH PLAN.

I would like to make clear that I had signalled my intention to turn left onto Craig Road well in advance of the turn. Further, I had started moving towards the left side of the lane and was slowing down for the turn. I realised that my earlier drawing and statement may not have made this clear and hence have provided this additional statement.

Policyholder / Driver's Signature
Date: 27/6/2018

Reporting Centre Personnel's Signature
Name: Rafael Wong
NRIC/FIN No: _____
Date: 27/06/2018