

NATIONAL Assessment Centre Services (wef 1 Jan 2005) **MNA118083689**

Date In: 28/6/18-18:08	Job description	Date & Time Completed	Done by
Ref No: NA/NA118011859/24	SAS e-filing		
Veh No: SL69703	E-mail (within 3hrs, AIC 2hrs)		
D.O.A : 27/6/18-17:50	i-Motor Claim Form		
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

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

TP Particulars: Veh No: **SL55603K** 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:	Date & Time Completed	Done by
(INC hotline: 6788 6616)		
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

Claimant's Particulars:	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			For Bill	Add Bill
Driver/Owner:	1) AR : Accident Reporting (\$30);			
Contact No:	2) DA : Damage Assessment (\$100); INC (\$80)			
Damaged Portion:	3) TF : Towing Fee \$40/\$45			
QC Checked by (Engr-In-Charge):	4) FT : Follow-Through Survey \$120			
	5) FT : Follow-Through Survey (Resurvey) \$30			
Auditors' Comments: :	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR : Re-inspection \$75			
Cat. 1:	7) N1 : Idao DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
Cat. 2 / 3:	9) N12 : Idao Mobile 30			
	*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			
	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	28/06/2018 18:08
Date Of Accident	27/06/2018 17:50
Exact Location Of Accident	BLK 524 AMK AVE 5 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG9703S
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Insured/Policyholder

Name Of Registered Owner	YEOW LEH GUAT
NRIC No	S1237512C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96840831
Alternative Phone No	OFFICE-96840831

Vehicle Particulars

Manufacturer	TOYOTA
Model	LEXUS ES250 LUXURY A/T S/R
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	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MOMVP000003803-00-000
Cover Note Number	

Driver

Name of Driver	YEOW KEK UN
NRIC No	S1462493G
Date Of Birth	02/01/1961
Occupation	INDOOR
Date Of Driving Pass	24/05/1979
Driving Experience	39 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96257212
Fax Number	
Contact Number	OFFICE-96257212
EMail Address	NOEMAIL

Address	BLK 80A LORONG 4 TOA PAYOH #02-450
Postcode	311080
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
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?	
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

REFER TO STATEMENT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLS5603K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.

Policyholder's Signature
Date & Time:

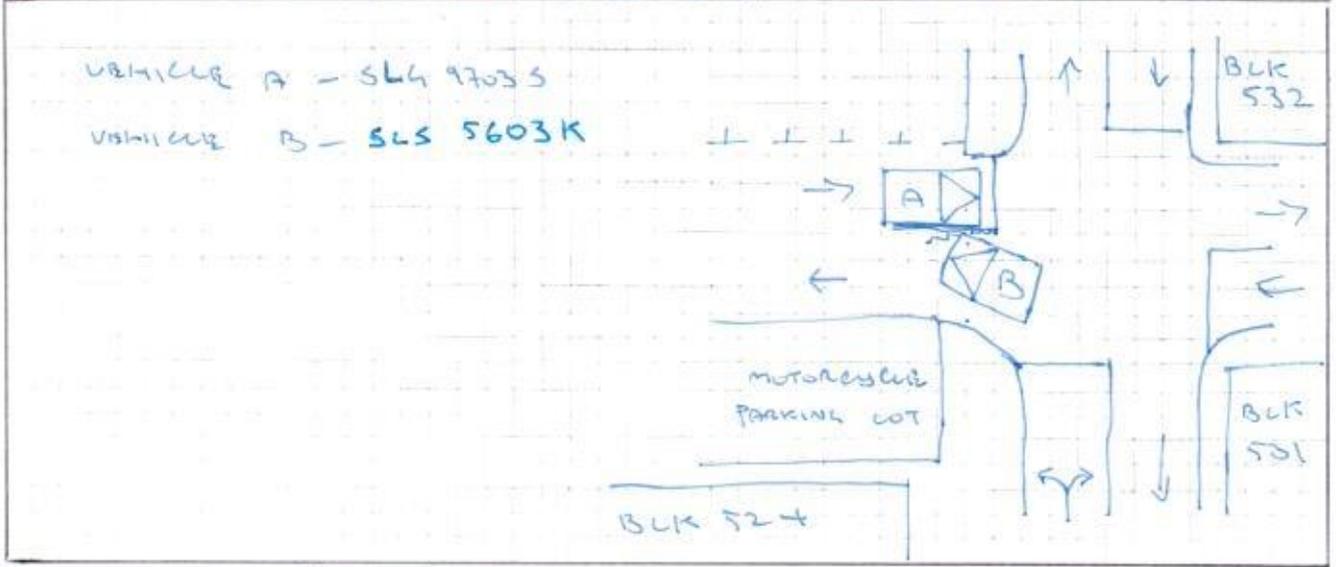
 28/6/18

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



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

SKETCH PLAN OPEN CARPARK IN FRONT OF BLOCK 524 AMK AVE 5



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

MY VEHICLE WAS STATIONARY STOPPED AT THE STOP LINE IN FRONT OF BLOCK 524 AMK AVE 5.

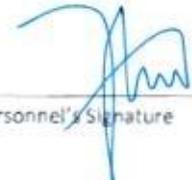
WHILE I WAS AT THE STOP LINE, I SAW A VEHICLE WAS COMING TOWARDS MY DIRECTION, SO I DIDN'T PROCEED TO MOVE, AND INTENT TO GIVE WAY TO THIS VEHICLE, AND SUDDENLY A VEHICLE MADE A LEFT TURN, AND WHILE DOING SO, THE FRONT RIGHT PORTION OF THE VEHICLE COLLIDED TO THE RIGHT SIDE OF MY VEHICLE.

THIS ACCIDENT FOOTAGE WAS CAPTURED BY MY IN-CAR CAMERA.

VEHICLE A - SLG 9703 S
 VEHICLE B - SLS 5603 K

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: 28/6/18
 Reporting Centre Personnel's Signature:  Name: _____ NRIC/FIN No.: _____

Vehicle No.	SLG 9703 S	Model / Make Lexus ES 250
Date of Accident	27/06/2018	
Time of Accident	1750	HRS
Location of Accident	OPEN CARPARK OP AMK AVE 5 INFRONT BLK	
Exact purpose use during accident	PRIVATE USE	S24
Name of Owner	YEW LKH CHAT	
Telephone No.	H/P: 9684 0831	Home: Office:
NRIC	S1237512 C	
Address	80A, LORONG 4 TUA PAJUH #02-450 S(311080)	
Claim type	OD	THIRD PARTY REPORTING ONLY
Insurance Company	GREAT AMERICAN	
Type of Coverage	Comprehensive	Third Party Third Party / Fire /Theft
Policy No.	MOMVP 000003803-00-000	
Name of Driver	As Above If No, YEW KEK UN	
NRIC	S1462493G	Any Passengers: 0
Date of birth	02/01/1961	
Occupation	Outdoor /	Indoor
Driving License Pass Date	24 MAY 1979	
Gender	Male / Female	
Contact No.	H/P: 9625 7212	Home: Office:
Address	BLK 80A LORONG 4 TUA PAJUH #02-450 S(311080)	
Driver have any own vehicle	No, If yes, Reg No.	
Relationship	Employee,	If no, state SLUBUNHS
Weather condition	Clear	Raining Other
Road Surface	Dry	Wet Other
Any Injuries	No, If Yes, Who?	
Name And Contact No.		
Name And Contact No.		
Police Report	No, If Yes, Where?	
Vehicle B No.	SL5 5603 K	Any Passengers:
Name of Driver		Contact No.:
Vehicle C No.		Any Passengers:
Vehicle D No.		Any Passengers:
Vehicle E no.		Any Passengers:
Vehicle F No.		Any Passengers:
Vehicle G No.		Any Passengers:
Witness Name		Witness Contact:
Accident Portion	RIGHT SIDE OF VEHICLE	
Camera Recorder	Yes / No	
Email Address		
PARTICULAR WORKSHOP	TWINCAR AUTOMOTIVE PTE LTD	
CONTACT NO.	6842 0051 / 6744 0510	
CONTACT PERSON	IAN	
FAX NO	6741 0510	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1237512C**



Name
YEOW LEH GUAT
姚丽月



Race
CHINESE

Date of Birth Sex
08-08-1957 F

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1462493G



Name
YEOW KEK UN

姚柯安

Race
CHINESE

Date of birth Sex
02-01-1961 M

Country of birth
SINGAPORE

S1462493G

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1462493G

Name
YEOW KEK UN

Birth Date: 02 Jan 1961

Issue Date: 18 Feb 2004



001126447H

4547134



NRIC No. S1462493G



Date of issue
05-03-2010

APT BLK 80A LORONG 4 TOA PAYOH #02-450
SINGAPORE 311080

NRIC No: S1462493G Date: 07/02/2018

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PASS DATE

Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	24 May
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	21 Jun 1983



Licence No: S1462493G

NP 428A

**GREAT AMERICAN INSURANCE COMPANY**

UEN: T15FC0029B GST REG. NO.: M90370081T
3 TEMASEK AVENUE, #16-01 CENTENNIAL TOWER
SINGAPORE 039190
TEL: +65 6804 6000
FAX: +65 6235 2616

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)

Policy Details

Certificate Number	: MOMVP000003803-00-000	Cover	: Private Car (Comprehensive)
Policyholder Name	: Yeow Leh Guat (Not Driving)	Chassis Number	: JTHBJ1GG102094262
NCD Entitlement	: Nil	Engine Number	: 2ARF245473
Hire Purchase	: UNITED OVERSEAS BANK LIMITED	Registration Number	: SLG9703S
Period of Insurance	: From 01/06/2018 (00:00) To 31/05/2019 (23:59) (Both Dates Inclusive)		

Persons or Classes of Persons entitled to Drive

- a) The Policyholder
 - b) Any person who is driving on the Policyholder's order or with their permission
- Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor or so has been Vehicle 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

Limitations as to Use

Use only for social, domestic and pleasure purposes and for Policyholder's business
This Policy does not cover:

- a) Use for Hire and Reward
- b) Use for racing, pace making, reliability trial or speed testing
- c) Use for carriage of goods (other than samples) in connection with any trade of business
- d) Use for any purpose in connection with 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

Excess (Section 1)	: SGD 600.00	Workshop	: Dealer Workshop
Excess (Section 2)	: N/A	Off Peak Car	: No
Windscreen Excess	: SGD 100.00	NCD Protection	: No
ADDITIONAL EXCESS	: Please refer overleaf		

Driver Details

Main Driver	: Yeow Kek Un
Named Driver 1	: N/A
Named Driver 2	: N/A
Named Driver 3	: N/A
Name of Intermediary	: OKI
Date of Issue	: 31/05/2018

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Signed for and on behalf of

Great American Insurance Company

Authorised Signatory

gaw