

NATIONAL ASSESSMENT Centre Services (011 222090)

Date In: 05/07/2018 10:11
Ref No: NA/INC18012228/KY

Veh No: SLK 3505C
D.O.A: 05/07/2018 08:40

OO / TP / Reporting Only

TP Insured:

Job description	Date & Time Completed	Done by
SAS calling		
E-mail (within 2hrs, AIG 2hrs)		
1-Motor Claim Form	MT/001840-001	5/7/18 17:55
1-Motor VVO (within 100 miles, 24 hrs)		
1-Photo Uploaded		
Assessment/Survey Report		
Ass'l Report by Fax/Hand to Owner/VVHSP		

Preferred Wksp / INC Assign Wksp / OW:

TP Particulars: Yell No: SJT3523P, INC:) / Non-INC:)

Owner / Driver:) Tel:) Fax:)

Policy No:) Period:) Cover Type:)

Confirmed by:) Date:)

Insured/Driver Liability: () % (Note: BSL stands (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 rider of repair.

() Total Loss Case: 1 to e-mail Insurer URGENTLY.

Driver-In: () / Towed-In: () Invoice: YES () / NO () Towing Co: ()

Remarks: NAB hotline: 6788 6016

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

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

Injury: ()

Date/Time: Action:

NA1804227

Invoice Preparation Checklist:

1) AR1 Accident Reporting (\$300)	
2) DA1 Damage Assessment (\$100)	INC (WO)
3) TP1 Towing Fee (\$200)	
4) FT1 Follow Through Survey (\$100)	
5) PT1 Follow Through Survey (Recovery)	
6) TR1 Towing Fee (\$100)	
7) NTUC Additional Survey (\$100)	
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Insured's Name:

Driver/Owner:

Policy No:

Assessed Pardon:

C Checked by (Engi-In-Charge):

Insured's Comment:

L.L:

1772

Invoice dated

Per Checked

Invoice dated

Per Checked

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	05/07/2018 10:11
Date Of Accident	05/07/2018 08:40
Exact Location Of Accident	THE SIGNATURE BUILDING (51 CHANGI BUSINESS PARK)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK5505C
Insured/Policyholder	
Name Of Registered Owner	RAGHAV KAPOOR
NRIC No	S8279284H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92777537
Alternative Phone No	OFFICE-97540613

Vehicle Particulars

Manufacturer	KIA
Model	CARENS 1.7 DCT DIESEL 5DR FWD
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	5098853167
Cover Note Number	

Driver

Name of Driver	MOK SU-YIN, NICOLA (MO SUYIN, NICOLA)
NRIC No	S8206994A
Date Of Birth	10/03/1982
Occupation	INDOOR
Date Of Driving Pass	17/12/2005
Driving Experience	12 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92777537
Fax Number	
Contact Number	OTHERS-97540613
Email Address	NOEMAIL

Address	8 JALAN KUPANG
Postcode	468604
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJT3523P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BANERJEE SIDHARTHA
NRIC/Passport Number	G6225245L
Contact Number	98251422
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

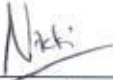
IMPORTANT NOTICE

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 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.

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

A - SLK5505C
B - SJT3523P

B

↓ reversed suddenly

A
stationary

The Signature
Office
building.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

8:40 The Signature Building near the lobby exit. Address: 51 Chayl Business Park

I was behind the other car SJT3523P, ~~in a line of~~ stationary. There were other cars behind me also.

Suddenly, he reversed. I tried to horn him, but too late. He banged my car. Damaged the front light (banged out of position). Scratches and dents on front bumper. Not sure if there was internal damage to the car, ^{will send} the car for check at Progressive Automobile right now.

The other car SJT3523P acknowledged full responsibility, as per our whatsapp chat.

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: 10:06am 5/7/18

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

_chat.txt

[5/7/18, 8:55:30 AM] Accident: Messages to this chat and calls are now secured with end-to-end encryption.

[5/7/18, 8:55:30 AM] Nicola: This is nicola. This morning 8.40am my car was on and stationary behind you in a line of cars at the Signature building, near the lobby. You reversed suddenly and did not stop despite my horn. Banged into my car slk5505c and damaged the front. The damage was scratches on the front bumper and the right car front light has been banged out of position

[5/7/18, 8:55:41 AM] Nicola: Pls acknowledge this account is correct

[5/7/18, 8:55:58 AM] Nicola: <attached: 00000004-PHOTO-2018-07-05-08-55-58.jpg>

[5/7/18, 8:56:20 AM] Nicola: <attached: 00000005-PHOTO-2018-07-05-08-56-20.jpg>

[5/7/18, 8:56:36 AM] Nicola: This is the right car light

[5/7/18, 8:56:40 AM] Nicola: Above

[5/7/18, 8:56:47 AM] Nicola: This is the left below

[5/7/18, 8:56:56 AM] Nicola: <attached: 00000009-PHOTO-2018-07-05-08-56-55.jpg>

[5/7/18, 8:57:57 AM] Accident: Yes thats right

[5/7/18, 8:58:23 AM] Nicola: This is a picutr of how your car back looks now, below. There appears to be some preexisting damage on your car left bumper that may not be related to this accident

[5/7/18, 8:58:29 AM] Nicola: <attached: 00000012-PHOTO-2018-07-05-08-58-29.jpg>

[5/7/18, 8:58:41 AM] Nicola: Other than that your car seems to have been not damaged

[5/7/18, 9:00:04 AM] Nicola: <attached: 00000014-PHOTO-2018-07-05-09-00-04.jpg>

[5/7/18, 9:00:25 AM] Nicola: <attached: 00000015-PHOTO-2018-07-05-09-00-25.jpg>

[5/7/18, 9:02:06 AM] Nicola: As spoken. You are not carrying your car insurance document with you. Hence, you need to whatsapp me later the document to clarify whether i should now send the car to any workshop, or one authorised under your insurance plan. You believe it can be sent to any workshop. Anyway. Hope to hear from you asap. I need to go into office lunchtime so i will send the car in asap today to check it. Because external damage is one thing. They need to check if anything has been banged out of place on the inside.

[5/7/18, 9:04:54 AM] Nicola: <attached: 00000017-PHOTO-2018-07-05-09-04-54.jpg>

[5/7/18, 9:18:24 AM] Accident: <attached: 00000018-PHOTO-2018-07-05-09-18-24.jpg>

[5/7/18, 9:18:24 AM] Accident: <attached: 00000019-PHOTO-2018-07-05-09-18-24.jpg>

[5/7/18, 9:18:40 AM] Accident: My insurance details

[5/7/18, 9:25:08 AM] Nicola: I am driving to Progressive Automotive now to have them repair my car. I think the document states you must call yor insurance company now to inform them what has happened. Pls do so. Also, progressive automotive is rather far from my home and i have to rush back later in a taxi. Kindly agree to compensate my taxi fare, which i will whatsapp to you thereafter. You can transfer the taxi fare using dbs paylah to this telephone number. Ok?

[5/7/18, 9:29:55 AM] Accident: I am also goong to the garage as told by my insurance company

[5/7/18, 9:31:06 AM] Nicola: Sure. See you there then. I will arrive in 13mins.

[5/7/18, 9:33:13 AM] Accident: My company garage is in tampines for my car check up lah

[5/7/18, 9:33:56 AM] Nicola: Oh ok. Anyway i am going to Progressive which is fine, as stated in the insurnace doc you sent.

[5/7/18, 9:34:14 AM] Nicola: Hope you can pay for my taxi home?

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8206994A



Name
MOK SU-YIN, NICOLA
(MO SUYIN, NICOLA)
莫素音

Race
CHINESE

Date of birth
10-03-1982

Sex
F

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8206994A



Name
MOK SU-YIN, NICOLA
(MO SUYIN, NICOLA)

Birth Date 10 Mar 1982

Issue Date 17 Dec 2005

0013884820

4848348



MIRIC No. S8206994A



Date of issue
03-04-2012

Address
8 JALAN KUPANG
SINGAPORE 468604

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

PASS DATE 17 Dec 2005

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg

Licence No: S8206994A

NP 428A

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No. Date of Accident

Vehicle No. (For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5098853167	RAGHAV KAPOOR	S8279284H	GPC	drivo CLASSIC	SLK5505C	SLK5505C	12/03/2018	11/03/2019

▼ Policy Information

Policy No.	5098853167	Policyholder Name	RAGHAV KAPOOR	Policyholder NRIC	S8279284H
Address	8 JALAN KUPANG SPRING PARK ESTATE SINGAPORE 468604				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	12/03/2018	Effective Date	12/03/2018 00:00	Expiry Date	11/03/2019 23:59
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		
Agent	IMOTOR INSURE	Agent Tel.	68411279	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	8 JALAN KUPANG	Address 2	SPRING PARK ESTATE	Address 3	SINGAPORE 468604
Address 4		Address Type	Singapore address	Post Code	468604
Unit No.		Related Policy Number	5098853167		

▶ Insured Object: SLK5505C

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

Claim Handling

Accident MT/1001840

Policy No.	5098853167	Vehicle No.	SLK5505C	GST Registration No.	
Policyholder Name	RAGHAV KAPOOR			Policyholder NRIC	S82
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	92777537	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	TCA	<input type="radio"/> No <input checked="" type="radio"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

▼ Accident Details

Report Date	05/07/2018 17:51	Accident Report Within 24 hrs	Yes	Accident Type	Colli
Date of Accident	05/07/2018	Time of Accident hh:mm	08:40	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	THE SIGNATURE BUILDING (51 CHANGI BUSINESS PARK)				

▼ Benefits

▼ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.
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	8 JALAN KUPANG	Address 2	SPRING PARK ESTATE	Address 3	SIN
Address 4		Address Type	Singapore address	Post Code	468
Unit No.		Related Policy Number	5098853167		

▼ OI Driver Info

Driver Name	MOK SU YIN NICOLA	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S8206994A	Driver DOB	10/C
Register Date of Driver License	17/12/2005	Driver Age	36	Driving Experience	12
Contact No.(Mobile)	92777537	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	8 JALAN KUPANG	Address 2		Address 3	
Address 4		Address Type	Singapore address	Post Code	468
Unit No.					
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
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Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	RAGHAV KAPOOR	Insured NRIC	S82
Contact No.(Mobile)	81571037	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address		OI Vehicle Number	SLK5505C	TP Vehicle Number	SJT
Claim Description	SLK5505C / SJT3523P ON 5 Jul 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Rec
Date Registered	05/07/2018 18:01	Claim Close Date		Date Received	05/C
Report Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> Print AK letter					

Save

Submit

Attachment

Accident No.

MT/1001840

Claim No.

001

Last Doc. Received

☒ Yes
 ☐ No

Upload Date

05/07/2018 17:55

Path *

Category *

Confidential

Urgency *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen
























Choose File No file chosen

Choose File No file chosen

Message Read

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Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼
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Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 18:01	NRIC/ Driving License	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:59	SAS	Normal	SAS 201
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:59	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jul 2018 17:58	Photos	Normal	Photos 20
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