

NATIONAL Assessment Centre Services.

[wef 1 Jan'05] NA18096480

Date In: 26/7/18 - 11:04	Job description	Date & Time Completed	Done by
Ref No: NA/LP18013583/24	SAS e-filing		
Veh No: JT 2916P	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 23/7/18 - 18:45	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 Fax / Hand to Owner/Wksp		

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

TP Particulars: Veh No: 5H76261K 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% P: 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

NA1809735 Invoice Preparation Checklist

Claimant's Particulars: 1) AR: Accident Reporting (\$30); 2) DA: Damage Assessment (\$100); INC (\$80)

Driver/Owner: 3) TF: Towing Fee \$40/\$45

Contact No: 4) FT: Follow-Through Survey \$120

Damaged Portion: 5) FT: Follow-Through Survey (Resurvey) \$30

6) TR: Re-inspection \$75

7) N1: Idac DA + SMRT Survey \$160

8) NTUC Additional Services:-

QC Checked by (Engr-In-Charge): QN*

Auditors' Comments:- *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

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	26/07/2018 11:04
Date Of Accident	23/07/2018 18:45
Exact Location Of Accident	ALONG NICOLL HIGHWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT2996P
Insured/Policyholder	
Name Of Registered Owner	BBC CHARTERING SINGAPORE PTE LTD
Co Reg No	199905498W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65764151

Vehicle Particulars

Manufacturer	BMW
Model	320I AT 2.0L ABS D/AIRBAG HID 2WD 4DR
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI18V01764/VPC/R04
Cover Note Number	

Driver

Name of Driver	DILLON STEVEN MICHAEL
Passport No/FIN	F0894737Q
Date Of Birth	30/07/1961
Occupation	INDOOR
Date Of Driving Pass	09/12/2010
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91850469
Fax Number	
Contact Number	OFFICE-91850469
Email Address	NOEMAIL

Address	10 LORONG 29 GEYLANG
Postcode	388066
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	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	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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGT6261K
Vehicle Make/Model/Colour	AUDI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIEW HWEI CHEUNG
NRIC/Passport Number	S7201753F
Contact Number	93690765
Address	
Postcode	
Insurance Company Name	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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:

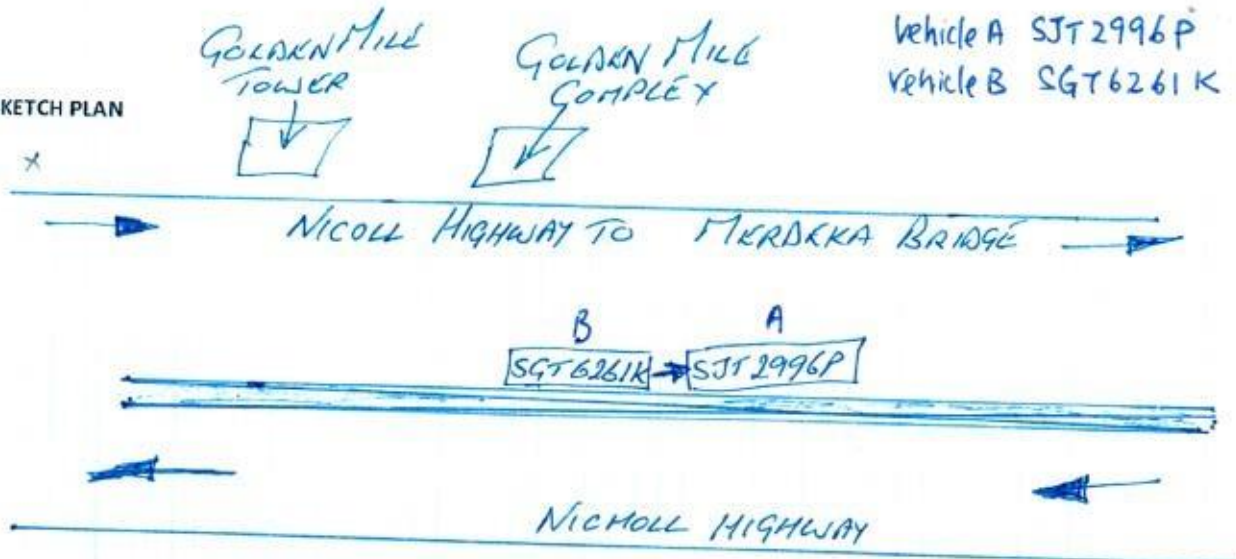
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

 **BBC Chartering**
-as agents for and on behalf of the carrier-
BBC Chartering Singapore Pte Ltd
8 Shenton Way #22-01 - Singapore 068811
www.bbc-chartering.com

25-07-18
12.30

SKETCH PLAN



Vehicle A SJT 2996P
Vehicle B SGT 6261K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Y

SJT 2996P WAS STATIONARY IN TRAFFIC WAITING FOR TRAFFIC TO START TO FLOW.

A HUGE BOOM FROM REAR, I EXITED CAR TO SEE MRS LIKW OF SGT 6261K HAD DRIVEN INTO MY REAR.

WE CHECKED THAT DRIVERS OK THEN EXCHANGED DETAILS

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Reporting Only

Claim OD

Claim TP

Claim OD / TP at other workshop

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.:

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-as agents for and on behalf of the carrier-
BBC Chartering Singapore Pte Ltd
8 Shenton Way #22-01 · Singapore 068811
www.bbc-chartering.com

25-07-18
12.45

SINGAPORE ACCIDENT STATEMENT

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ACCIDENT STATEMENT

Date Of Report 25 July 2018
 ☆ Date Of Accident 23 July 2018
 ☆ Exact Location Of Accident NICOLL HIGHWAY 6:45pm
 ☆ Country/State Of Loss Singapore

DETAILS OF OWN VEHICLE

☆ Vehicle Registration Number SJT 2996P
Insured/Policyholder
 Name Of Registered Owner / Company Bbc Chartering Singapore Pte. Ltd.
 RIC No / Work Permit No / ROC No 199905498W
 Email Address ecv@elitecarventures.com
 Mobile Phone No (LOCAL) +65 - 65764151
 Alternative Phone No _____
 Others- _____
Vehicle Particulars
 ☆ Manufacturer BMW
 ☆ Model 320i
 ☆ Exact Purpose for which vehicle was being used at time of accident Private Use Commercial Use/ Hirer Use
 ☆ Are you claiming under your own insurance policy for repair to your vehicle?
 If No, Please state action to be taken Yes / No / Third Party
 ☆ Vehicle Category Private Use Commercial Vehicle / Motorcycle / Taxi / Bus / Goods Vehicle / Tanker / Mobile Equipment / Motor Trade / Government
Insurance Company
 Name of Insurance Company Liberty Insurance Pte Ltd
 Type Of Coverage Comprehensive, Unlimited Windscreen
 Policy Number Yes / No
 Cover Note Number SI18V01764/VPC/R04
Driver
 ☆ Name of Driver Dillon Steven Michael
 ☆ NRIC No F0894737Q
 ☆ Date Of Birth 30 Jul 1961
 ☆ Occupation Indoor / Outdoor
 ☆ Date Of Driving Pass 09 Dec 2010
 Driving Experience 8 years
 ☆ Gender Male
 ☆ Mobile Number (Local) +65 - 9185 0469
 Fax Number _____
 Contact Number _____
 EMail Address smdillon61@gmail.com

☆ Address

☆ Postcode

☆ Was driver an employee of the Insured's Company

☆ If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

Yes / No

Owner / Relative / Friend / Parent / Spouse / Children / Sibling / Hirer

General Information of the Accident

☆ Type Of Accident

☆ Weather Conditions

☆ Road Surface

Other Information

☆ Was any foreign vehicle involved in this accident?

☆ Foreign Vehicle Registration Number

☆ Was any body injured in the Accident?

Was any other material or property damaged?

Have been approached by unknown person(s)

soliciting/offering accident claims assistance.

☆ Number of Passengers (Including Driver)

Collision: Head to Rear

X Raining / Clear / Other:

X Wet / Dry / Other:

Yes / No

Yes / No

Yes / No

Yes / No

Name:

1

Details of Police Action

☆ Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name

Police Station Address

Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

Yes / No

ROAD:

, POSTCODE:

, COUNTRY:

TEL NO:

- FAX NO:

Yes / No

Attachment(s)

Are accident photos available for attachment?

Yes / No

☆ Was there any video captured by Car Camera?

Yes / No

Was there any audio recorded?

Yes / No

DETAILS OF OTHER VEHICLE PROPERTY 1

☆ Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Sgt 6261K

Audi

Liew Hwei cheung

S7201753F

Mob: 9369 0765 / em: cargt88@gmail.com

Direct Asia Insurance (Singapore) Pte Ltd.



-as agents for and on behalf of the carrier-
BBC Chartering Singapore Pte Ltd
8 Shenton Way #22-01 · Singapore 068811
www.bbc-chartering.com

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight ≤ 3000kg with ≤ 7 passengers, exclusive of driver, and other motor vehicles with unladen weight ≤ 2500kg 09 Dec 2010



Licence No: F0894737Q

NP 428A

VISIT PASS

Immigration Regulations

Name
DILLON STEVEN MICHAEL



Date of Birth	Sex	Nationality
30-07-1961	M	BRITISH
FIN	Date of Issue	Date of Expiry
F0894737Q	03-01-2018	03-12-2018

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU



 **BBC Chartering**

as agents for and on behalf of the carrier-

BBC Chartering Singapore Pte Ltd

8 Shenton Way #22-01 · Singapore 069811

www.bbc-chartering.com

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)

Name of Policyholder:

BBC CHARTERING SINGAPORE PTE. LTD.

Date of Issue:

07 Feb 2018

Effective Date of Commencement:

30 Mar 2018 00:00

Registration No.:

SJT2996P

Chassis No.:

WBAPG5602QNM16050

Certificate No.:

SI18V01764/ VPC / R04

Date of Expiry:

29 Mar 2019 23:59

Type of Certificate:

MX4

Persons or Classes of Persons entitled to drive*:

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 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials or speed-testing.
- C) Use for the carriage of goods (other than samples) in connection with any trade or business.
- D) Use for any purpose in connection with the Motor Trade.

*Limitations rendered inoperative by Section 6 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).



For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers

For Information Only:

Coverage(s):	Comprehensive, Unlimited Windscreen
Sum Insured:	MARKET VALUE AT THE TIME OF LOSS
Excess:	Section I - Named Drivers S\$500, Section I - Unnamed Drivers S\$1000, Young & Inexperienced Drivers S\$2500, Windscreen Excess S\$100
Name of Finance Company:	BMW FINANCIAL SERVICES SINGAPORE PTE LTD
Name of Producer:	SD CONTEGO SERVICES (A1429-2)

 **BBC Chartering**
-as agents for and on behalf of the carrier-
BBC Chartering Singapore Pte Ltd
8 Shenton Way #22-01 · Singapore 068811
www.bbc-chartering.com