

NATIONAL Assessment Centre Services

1st Jan 2008

19/NA/8098894

Date In: 31/07/2008 14:55	Job description	Date & Time Completed	Done by
Ref No: NBA/LIP/18013902/Y	SAS e-filing		
Veh No: SDV 6838Y	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 30/07/2008 14:00	i-Motor Claim Form		
OD: TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SLD 6915	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

NA/804851	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)		
Cat 1:	6) TR: Re-inspection \$75		
Cat 2/3:	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		
	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	31/07/2018 14:55
Date Of Accident	30/07/2018 14:00
Exact Location Of Accident	89 JALAN PERGAM SINGAPORE 488365
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDV6838Y
Insured/Policyholder	
Name Of Registered Owner	CHIN MEI HAR (CHEN MEIXIA)
NRIC No	S0144469G
Email Address	MEIHAR89@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97220779
Alternative Phone No	OTHERS-97100487

Vehicle Particulars

Manufacturer	FORD
Model	FOCUS
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD17V11486/VPC2/R00
Cover Note Number	

Driver

Name of Driver	TAN SHI MING ,MATTHEW
NRIC No	S7926897F
Date Of Birth	11/09/1979
Occupation	INDOOR
Date Of Driving Pass	03/11/2003
Driving Experience	14 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97100487
Fax Number	
Contact Number	HOME-62149181
Email Address	GOLDENCREST@YAHOO.COM

Address	89 JALAN PERGAM
Postcode	488365
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)	3
Passenger 1	NAME: : JACQUELIN SEE GENDER: : FEMALE
Passenger 2	NAME: : RACHEL TAN 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 (TYPE OF COLLISION DAMAGE WHILE REVERSING)

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	SLD691S
Vehicle Make/Model/Colour	HONDA VEZEL
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ZAFRULLAH ANUAR GULAM
NRIC/Passport Number	S7225921A
Contact Number	91768066
Address	
Postcode	
Insurance Company Name	

Nature Of Damage:

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

SKETCH PLAN

Veh A: SDV 6838 Y

Veh B: 8LD 6A1 S

IMPORTANT NOTICE

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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**.
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:

31/7/18
1300 hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

31/7/2018
1300hrs

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

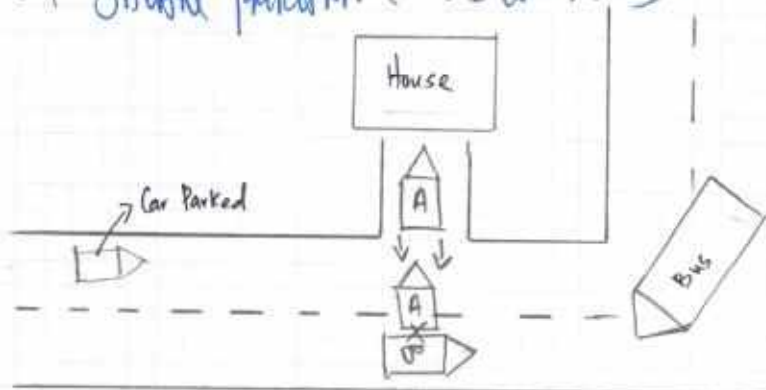
31/07/2018
Roshan Kumar

SKETCH PLAN

Veh A: SDV 6838Y

Veh B: SLD 691 S

89 JAWAN PARKWAY S(488365)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I opened my gate and began reversing out of my driveway. The weather was clear and fine at that time and there was no rain. It was a quiet residential area as well. As I was reversing, I ensured that it was safe to do so, that there were no cars behind me. As I moved out past my gate, I saw a car coming from down the road, on the wrong side of the road. I continued reversing as the other car should have given way to me as I was moving into my lane and had full, unobstructed view of my reversing car as well. However the car did not stop and continued to approach my car. I then hit the back of that car that was trying to cut past my car, who obviously saw that my car was reversing and did not approach with due care. The car was moving at a high, reckless and unsafe speed and there was a childcare centre just opposite my house. There were no injuries on both sides.

DECLARATION

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



Policyholder's Signature

Date & Time:

31/7/18

1300 hrs



Driver's Signature

(If driver is not the policyholder)

Date & Time:

31/7/2018

1300 hrs

 31/07/2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Accord Auto Services Pte Ltd

Particular of Insured / Driver & Details of the Accident

Location of Accident: 89 Jalan Pergam, S(488365)
Landmark of Accident Area (IF ANY): -
No. of Passenger (Including Driver): 3
Passenger Name: Jacqueline See, Rachel Tan

Date of Accident: 30/7/2018
Time of Accident: 400hrs

Details of Own Vehicle

Vehicle Registration Number: SPV 6838Y Make/ Model: Ford Focus
Name of Preferred workshop: Accord Auto Services Pte Ltd Contact: 62717433

Insured/ Policy Holder

Name of Registered Owner: Chin Mei Har NRIC: S01444696
Address: 89 Jalan Pergam S 488365
Occupation: Retiree (Indoor / Outdoor) Mobile No: 97220747
Email: Mihar89@gmail.com

Driver

Name of Driver: Tan Shi Ming Matthew NRIC/Fin: S7926897F
Driving License Pass Date: 3/11/2003 DOB: 11/09/1979
Address: 89 Jalan Pergam
Occupation: Self Employed (Indoor / Outdoor) Mobile No: 97100487
Gender: Male / Female Other Contact: Home No. / Office / Others: 62149181
Email: goldcrest@yahoo.com

Insurance Company

Insurance Company: Liberty (C/TFPT/TPO) Policy No: S017V11486 / VPC2 / R00

*Comprehensive/Third Party Fire & Theft/Third Party Only

Driver an employee: Yes / No if no, what is relationship with the policyholder: _____

*If Driver is a policyholder, kindly ignore this question

Details of other vehicle Property 1

Vehicle Registration No.: SLD 691S
Vehicle Make/Model/Colour: Honda Vezel / white
Name of Driver: Zafullah Amir Gulsan
NRIC: 87225921A
No. of Passenger (Including Driver): 2
Contact Number: 91768066
Nature of Damage: Left side 2 doors dent / scratched

Details of other vehicle Property 2

For Official use only

Claiming Own Insurance: Yes / No If No, Reporting only / Third Party Claim

General Information of Accident

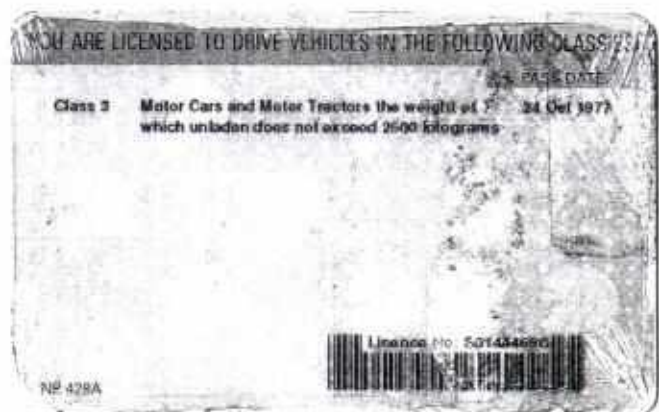
Type of Accident: Head-Rear / Side Swipe / Others: Reverse
Weather Conditions: Clear / Raining / Others: _____
Road Surface: Dry / Wet / Others: _____ Material / Property damaged: Yes / No
Any police report made: Yes / No Injured party: Yes / No 1. _____
Any Video Cam: Yes/No 2. _____
Summon Against Whom: _____ 3. _____

*For injured Party details, it must be supported by police report



S 0144469 G
CHIN MEI HAR
(CHEN MEI XIA)

89 Jalan Pergam Singapore 488365



REPUBLIC OF SINGAPORE DRIVING LICENCE



NRIC No: S7926897F

TAN SHI MING, MATTHEW
(CHEN SHIMING, MATTHEW)

Birth Date: 11 Sep 1979

Issue Date: 03 Nov 2003



000953367K

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7926897F



TAN SHI MING, MATTHEW
(CHEN SHIMING, MATTHEW)

陈世明

Race

CHINESE

Date of Birth

11-09-1979

Country of Birth

SINGAPORE

Sex

M

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

03 Nov 2003



Licence No: S7926897F

NP 428A



2933164

NRIC No: S7926897F



Blood Group: Date of issue

O+

23-12-1996

89 JALAN PERGAM
SINGAPORE 488365

NRIC No: S7926897F

Date: 25/04/2011

No: 6727080

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)

Certificate No. SD17V11486 /VPC2 /R00
Form MX1

Date of Issue 04-OCT-2017
1. Index Mark and Registration No. of Vehicle: SDV6838Y
2. Chassis number of Vehicle WF04XXGCC4GK14809
3. Name of Policyholder: CHIN MEI HAR (CHEN MEIXIA)
4. Effective date of Commencement of Insurance for the purposes of the Act: 28-SEP-2017 00:00 AM
5. Date of Expiry of Insurance: 27-SEP-2019 23:59 PM

6. Persons or Classes of Persons entitled to drive*:

A) The Policyholder.

B) Any other person who is driving on the Policyholder's order or with his 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.

7. Limitations as to use*:

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

8. 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 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.

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



Authorised Signature

For Information only:

COVERAGE:

SUM INSURED:

EXCESS:

FINANCE COMPANY:

PRODUCER NAME

Comprehensive, Unlimited Windscreen, NCD Protection

MARKET VALUE AT THE TIME OF LOSS

Section I \$5400, Additional Excess For Young & Inexperienced Drivers \$51000, Windscreen Excess: \$50

UNITED OVERSEAS BANK LIMITED

SD CONTEGO SERVICES

SCCA 20180731

Ver.1.260705