

NATIONAL Assessment Centre Services. (wef 1 Jan 05) NA118 10786701

Date In: 29/8/18-17:01	Job description	Date & Time Completed	Done by
Ref No: NA118 10786701	SAS e-filing		
Veh No: 56434C	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 20/8/18-13:10	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: FBL8598C	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

NA1805240

Claimant's Particulars:-	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) 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		
	4) FT: Follow-Through Survey \$120		
	5) FT: 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:-		
	OD:		
	*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		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
Auditors' Comments:-	Invoice dated	Fee Charged	
Dat 1:			
Dat 2 / 3:			

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	20/08/2018 17:01
Date Of Accident	20/08/2018 13:10
Exact Location Of Accident	ALONG CTE (CITY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG434C
Insured/Policyholder	
Name Of Registered Owner	OH CHENG HWA (HU QINGHUA)
NRIC No	S7703341F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96531370
Alternative Phone No	OFFICE-96531370

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC 1.5 TURBO VTIS SR
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	SD16V12707/VPC2/R00
Cover Note Number	

Driver

Name of Driver	OH CHENG HWA (HU QINGHUA)
NRIC No	S7703341F
Date Of Birth	31/01/1977
Occupation	INDOOR
Date Of Driving Pass	24/07/2004
Driving Experience	14 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96531370
Fax Number	
Contact Number	OFFICE-96531370
EMail Address	NOEMAIL

Address	BLK 318B ANCHORVALE LINK #12-251
Postcode	542318
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	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	PAYA LEBAR NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 114 HOUGANG AVENUE 1 #01-1270 , POSTCODE: 530114 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2899999 - FAX NO: 62815961
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180820/2096.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBL8598C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

SKETCH PLAN

IMPORTANT NOTICE

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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:

20/8/18

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

20/8/18

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

SKETCH PLAN

CTE



13. 8. 8

DoA 20/8/18

A SLG 434C

B : FBL 8598 c

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

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.:

Personal Particulars

Date of Accident: 20/8/18

Time of Accident: 1:07 pm

Exact Location of Accident: CTE towards City

Owner's Name: OH Chng Hwa NRIC No: S7703341F HP No: 96531370

Driver's Name: _____ NRIC No: _____ HP No: _____

Date of Birth: 31/1/1977 Driving Licence Passing Date: 24/7/2006 Occupation: Indoor / Outdoor

Address: 318 B Anchorvale Link #12-251 (5423187)

Relationship of Driver with Insured: Owner Email Address: _____

Vehicle No: SLG 434C Make & Model: Honda

Insurance Co: Liberty Coverage: Comprehensive Policy No: SD16V12707/VPCL2/R00

*Purpose of Reporting? ☒ Own Damage Claim / ☐ 3rd Party Claim / ☐ Not Claiming, Just Reporting Only

*Exact Purpose of The Vehicle Was Being Used At Time Of Accident: ☒ Private Use / ☐ Work

*Weather Condition? ☒ Clear / ☐ Raining / Others: _____ Wet / ☒ Dry / Others: _____

*Any passenger inside vehicle involved? (Yes / No) If yes, Vehicle No & How many pax:

A: 1 + 0 B: 1 + 1 C: _____ D: _____

*Was Anybody Injured? (☒ Yes / ☐ No) If yes,

Name / NRIC / In Vehicle: _____

*Was The Accident Reported To The Police?

☐ No ☒ Yes, Which Police Station? _____

*Does the Driver Own Any Other Vehicle?

☒ No ☐ Yes, Vehicle Registration No: _____ Insurer: _____

*Was any foreign vehicle involved? (Yes / ☒ No) If yes, Vehicle No & Category: _____

*Was there any video captured by Car Camera? (☒ Yes / ☐ No)

Third Party Driver's Particulars

Vehicle B No: FBL 8598C Make & Model: _____

Driver's Name: _____ NRIC No: _____ HP No: _____

Vehicle C No: _____ Make & Model: _____

Driver's Name: _____ NRIC No: _____ HP No: _____

Witness Particulars

Name: _____ NRIC No: _____ HP No: _____



SINGAPORE POLICE FORCE



T/20180820/2096

1 of 4

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

Report No. T/20180820/2096

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/08/2018 15:38	Vide Report No.:	Station Diary No.: 23
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Informant's Particulars			
Name of Informant: OH CHENG HWA		Address: APT BLK 318B ANCHORVALE LINK #12-251 SINGAPORE 542318	
ID Type / ID No.: NRIC NO / S7703341F		Contact No.: Home/Office: Mobile: 96531370	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 41	Date of Birth: 31/01/1977	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Engineer		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 20/08/2018 13:10	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY (CITY) BEFORE EXIT TO PIE (CHANGI) BESIDE BRADDELL FLYOVER				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						No of Passenger
Vehicle No.	Type	Make	Model	Color	Condition	
FBL8598C	Motorcycle	HONDA	CB190R	Yellow	Slightly Damaged	1
SLG434C	Car	HONDA	CIVIC 1.5	Red	Slightly Damaged	0

Details of Person Involved
Any Pedestrian Involved: No
Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180820/2096

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Report No. T/20180820/2096

Police Station Of Origin:

Paya Lebar NPP

114 Hougang Avenue 1 #01-1270

SINGAPORE 530114

Tel No: 1800-2899999

CONTINUATION OF REPORT

Pillion			
Name	Unknown Pillion	ID No.	NIL
Related Vehicle	FBL8598C (Motorcycle)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Rider			
Name	HUSAIN BIN JUMARI	ID No.	S9733151J
Related Vehicle	FBL8598C (Motorcycle)	Contact No.	83821589
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	OH CHENG HWA	ID No.	S7703341F
Related Vehicle	SLG434C (Car)	Contact No.	96531370
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 20/08/2018 at around 1307hrs, I was driving, SLG434C, along CTE (City) before exit to PIE (Changi) beside Braddell Flyover on the fourth lane when a lorry that is in front of me jammed brake without apparent reason. I immediately jammed brake too but a motorcycle, FBL8598C, that was behind of me unable to brake on time and hit onto the rear of my vehicle.

Ambulance and Traffic Police attended to us. The pillion of the motorcycle was conveyed to Hospital by Ambulance.

INVESTIGATION BRANCH
POLICE

CASE CARD

276



SINGAPORE POLICE FORCE



T/20180820/2096

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

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Report No. T/20180820/2096

CONTINUATION OF REPORT

Sketch Plan
Statement is not able to provide sketch plan



**SINGAPORE
POLICE FORCE**



T/20180820/2096

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Report No. T/20180820/2096

Police Station Of Origin:

Paya Lebar NPP

114 Hougang Avenue 1 #01-1270

SINGAPORE 530114

Tel No: 1800-2899999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

F /

Sr Staff Sgt MOHAMED AZMI BIN MOHAMED
RIDUAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt IRMAN BIN MOHAMAD SAID
Contact No.: 65476365

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

20/08/2018 15:38

Classification Of Case:

SN 085



Signature:

Singapore Police Force

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 : MNA118107862 Vehicle Registration No: SLA934C
Name (as shown in NRIC) : Oh Cheng Hwa (Ang Qinghua) NRIC/FIN/Passport No : 57703341F
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Blk 318B Anchorvale Link #12-251 Singapore (540318)
Contact (Tel) : _____ Mobile No. : 96531370
Email Address : _____
Date of Accident : 20/8/18 Time of Accident : 13:10
Place of Accident : Along OTE (City)
Insurance Company: Liberty Insurance

(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:

1. Amend time of accident (13:10)

Policyholder / Driver's Signature
Date:

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

001263076Δ1

Licence No: S770334 1F

Invoice No: C7M7U1F

NP 278A

1. The first step in the process of creating a new product is to identify a market need. This involves conducting market research to understand what consumers want and what gaps exist in the current market.

2. Once a market need is identified, the next step is to develop a concept. This involves brainstorming ideas and creating a rough sketch of the product.

3. The third step is to create a prototype. This is a physical model of the product that allows you to test its functionality and appearance.

4. After creating a prototype, you need to test it. This involves giving the prototype to a group of people and asking them for feedback. This helps you identify any issues and make improvements.

5. Once you have received feedback, you can refine the product. This involves making changes to the design and functionality based on the feedback you received.

6. The final step is to launch the product. This involves creating a marketing plan and promoting the product to the target market.

7. After launching the product, you need to monitor its performance. This involves tracking sales, customer feedback, and market trends to see how the product is doing.

8. If the product is successful, you may want to consider expanding it. This could involve creating new variations of the product or entering new markets.

9. Finally, you need to maintain the product. This involves ensuring that it continues to meet the needs of the market and making any necessary updates or improvements.

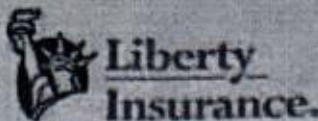


APT BLK 318B ANCHORVALE LINK #12-251
SINGAPORE 542318

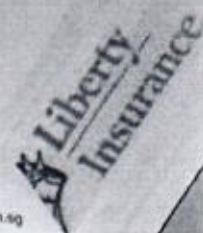
NRIC No: S7703341F

Date: 14/08/2003

No: 6050074



Liberty Insurance Pte Ltd
Registration no. 199002791D
51 Club Street
#03-00 Liberty House
Singapore 069428
Tel: (65) 6221 8611 Fax: (65) 6225 6890
Website: <http://www.libertyinsurance.com.sg>



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	SD16V12707 /NPC2/R00
Form	MX1
Date of Issue	04-OCT-2016
1. Index Mark and Registration No. of Vehicle:	SLG434C
2. Chassis number of Vehicle:	MRHFC1660GT000103
3. Name of Policyholder:	OH CHENG HWA (HU QINGHUA)
4. Effective date of Commencement of Insurance for the purposes of the Act:	20-SEP-2016 00:00 AM
5. Date of Expiry of Insurance:	19-SEP-2018 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	
 Authorized Signature	
For Information only:	
COVERAGE :	Comprehensive, Unlimited Windscreen
SUM INSURED:	MARKET VALUE AT THE TIME OF LOSS
EXCESS:	Section I S\$800, Additional Excess For Young, Elderly & Inexperienced Drivers S\$3000, Windscreen Excess S\$100
FINANCE COMPANY:	OVERSEA-CHINESE BANKING CORPORATION LTD
PRODUCER NAME:	KAH MOTOR COMPANY SDN BERHAD

PLET/PLET/04-OCT-16

S1_CI_T1_T3_OE_Template2-Ver1.

04-OCT-16