

# NATIONAL Assessment Centre Services

Date In: 23/08/2018 13:29	Job description	Date & Time Completed	Done by
Ref No: NA/INC18015291/K4	SAS e-filing		
Veh No: PA81913	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 22/08/2018 13:30	i-Motor Claim Form	MT/1008531-001	24/8/18 09:46
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: SJE606H 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)

Remarks	Date & Time Completed	Done by
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1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
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2) QC Check / Post Repair Inspection ( )		
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3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		
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Injury:

Date/Time	Actions
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NA1805299

Claimant's Particulars:	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	Inc Bill	Add Bill
Contact No:	2) DA: Damage Assessment (\$100); INC (\$50)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idno DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	Op*		
	*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: Idno Mobile \$30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

at 1:

at 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	23/08/2018 13:29
Date Of Accident	22/08/2018 13:30
Exact Location Of Accident	PETIR ROAD TWDS BKE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA8191J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LS 2 SERVICES PTE LTD
Co Reg No	199307477M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97515582
Alternative Phone No	OFFICE-97515582

### Vehicle Particulars

Manufacturer	TIGER
Model	HIACE MANUAL
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	BUS

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5075190096-02
Cover Note Number	

### Driver

Name of Driver	PANG CHONG KHENG
NRIC No	S1505245G
Date Of Birth	29/12/1961
Occupation	INDOOR
Date Of Driving Pass	11/08/1979
Driving Experience	39 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97515582
Fax Number	
Contact Number	OTHERS-97515582
EMail Address	NOEMAIL

Address	BLK 16 TECK WHYE LANE #10-107
Postcode	680016
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	RAINING
Road Surface	WET

#### 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)	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

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	SJE606H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM YEN NEE ( LIN YANNI )
NRIC/Passport Number	S7801142D
Contact Number	96636300
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.
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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:

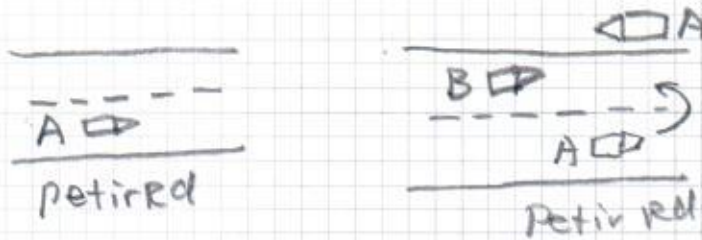
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

23/8/2018

SKETCH PLAN

A - PA8191J  
B - STE606H



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Veh NO PA8191J I was driving along Petir Rd  
to wards BKE ~~then~~ Suddenly my Veh skids  
and go up on top of the grass floor and  
then I come down and saw Vehicle B was  
hit and in front of me.

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.:

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1505245G



Name

PANG CHONG KHENG

彭 崇 球

Race

CHINESE

Date of birth

29-12-1961

Country/Place of birth

SINGAPORE

Sex

F



5984518



NRIC No. S1505245G



Date of issue

23-07-2018

Address

APT BLK 16 TECK WHYE LANE  
#10-107  
SINGAPORE 680016

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1505245G

Name

PANG CHONG KHENG

Birth Date 29 Dec 1961

Issue Date 15 Jul 2003

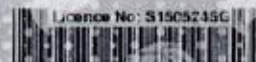


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms

11 Aug 1979



Licence No: S1505245G

NP 428A

\* Ask Driver the Vocational Licenses  
but she dose not have.

## 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 Number** : 5075190096-02

**Cover** : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle : **PA8191J**  
Chassis Number : JTFJ502P905001974
2. Name of Policyholder : LS 2 SERVICES PTE LTD
3. Effective Date of Insurance : 03 Nov 2017
4. Expiry Date of Insurance : 28 Oct 2018
5. 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/her 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.
6. Limitations as to Use\*
  - (a) Use for the carriage of passengers in connection with the Policyholder's business.
  - (b) Limited to carry 11 passengers

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: N/A
EXCESS (SECTION II)	: S\$3,000
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : GOLDEN PRIME INSURANCE AGENCY (00000613808)  
Date of Issue : 03 Nov 2017 13:20 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

PA8191J 5608  
24 Nov 2017

eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

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

## Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="22/08/2018 13:30"/>							
Vehicle No.(For Motor)	<input type="text" value="PA81913"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5075190096-02		LS 2 SERVICES PTE LTD	199307477M	GBS	Third Party, Fire & Theft	PA81913	PA81913	03/11/2017	28/10/2018
<input type="button" value="Continue"/>										

 Policy Information

Policy No.	5075190096-02	Policyholder Name	LS 2 SERVICES PTE LTD	Policyholder NRIC	199307477M
Certificate No.					
Address	1 BUKIT BATOK CRESCENT #04-40 WCEGA PLAZA SINGAPORE 658064				
Product Name	BUS INSURANCE	Plan			
Policy issue Date	03/11/2017	Effective Date	03/11/2017 00:00	Expiry Date	28/10/2018 23:59
Third Party Excess	3000	Own damage Excess	0	Windscreen Excess	0
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	GOLDEN PRIME INSURANCE AG	Agent Tel.	68426788	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

 Policyholder Mailing Address

Address 1	1 BUKIT BATOK CRESCENT	Address 2	#04-40 WCEGA PLAZA	Address 3	SINGAPORE 658064
Address 4		Address Type	Singapore address	Post Code	658064
Unit No.		Related Policy Number	5086412165-01		

 Insured Object: PA8191J

 Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

## Claim Handling

Accident MT/1008531

Policy No.	5075190096-02	Vehicle No.	PA8191J	GST Registration No.	M201
Certificate No.					
Policyholder Name	LS 2 SERVICES PTE LTD			Policyholder NRIC	1993
Product Code	BUS INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No.(Mobile)	97515582	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	15	Private Hire	No

## Accident Details

Report Date	24/08/2018 09:37	Accident Report Within 24 hrs	Yes	Accident Type	Side
Date of Accident	22/08/2018	Time of Accident hh:mm	13:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	PETIR ROAD TWOS BKE				

## Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	3,000.00	Outside Singapore TP Excess			

## Benefits

## GST Registered Information

GST Registered	Yes	GST Registration Date	22/01/2001
GST Registration No.	M201204747	GST Status Verified	Yes
Modification History			

## Policyholder Mailing Address

Address 1	1 BUKIT BATOK CRESCENT	Address 2	#04-40 WCEGA PLAZA	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	6580
Unit No.		Related Policy Number	5086412165-01		

## OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	PANG CHONG KHENG	Driver NRIC	S1505245G	Driver DOB	29/1
Register Date of Driver License	11/08/1979	Driver Age	56	Driving Experience	39
Contact No.(Mobile)	97515582	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 16	Address 2	TECK WHYE LANE	Address 3	
Address 4		Address Type	Singapore address	Post Code	6800
Unit No.	#10-107				
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	LS 2 SERVICES PTE LTD	Insured NRIC	1993
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	6281
Email Address		OI Vehicle Number	PA8191J	TP Vehicle Number	SJE6
Claim Description	PA8191J / SJE606H ON 22 Aug 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	24/08/2018
Date Registered	24/08/2018 09:46	Claim Close Date		Total Loss but Repaired	
Report Taken By	KRISHNASAMY	Workshop Repairer			

☒ Print AK letter

Save Submit

## Attachment

Accident No.	MT/1008531	Claim No.	001
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Last Doc. Received

☒ Yes ☐ No

Upload Date

24/08/2018 09:45

Path \*

Category \*











Confidential

Urgency \*

	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal

Message Read

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:46	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:44	SAS	Normal	SAS 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:44	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:44	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:44	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:44	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:44	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:43	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:43	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:43	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:43	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:43	Photos	Normal	Photos 2018-8-24
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:42	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:42	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:42	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:42	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:42	Photos	Normal	Photos 2018-8-24
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 24 Aug 2018 09:42	Photos	Normal	Photos 2018-8-24

## Video List

Uploaded By/Date	Folder Date	File Name	Source
<div>Display in New Window</div> <div>Scan and uploading</div>			