

NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

MAA/181/2001

Date In: 29/08/2008 14:46	Job description	Date & Time Completed	Done by
Ref No: NAB/QBE/8015752/4	SAS e-filing		
Veh No: 811 546 I	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 29/08/2008 09:10	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: GBB 4105X	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:	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

<p>Claimant's Particulars:</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments:</p> <p>Dat. 1:</p> <p>Dat. 2/3:</p>	<p>Invoice Preparation Checklist</p> <p>1) AR: Accident Reporting (\$30);</p> <p>2) DA: Damage Assessment (\$100); INC (\$50)</p> <p>3) TP: Towing Fee \$40/\$45</p> <p>4) FT: Follow-Through Survey \$120</p> <p>5) FT: Follow-Through Survey (Resurvey) \$30</p> <p>For claiming against INC Only (wef 10 Jan 2005)</p> <p>6) TR: Re-inspection \$75</p> <p>7) NI: Ideal DA + SMRT Survey \$160</p> <p>8) NTUC Additional Services:-</p> <p>ON*</p> <p>*N5: Courtesy Car / Tpl Allowance \$5</p> <p>*N6: Repair Co-ordination \$10</p> <p>*N7: Post Repair Inspection \$25</p> <p>*N8: DV / Collect Excess Coordination \$5</p> <p>TP (N11): TP (N/n INC) against INC \$20</p> <p>9) N12: Idna Mobile \$0</p>		<p>Am't (\$)</p> <p>Est. Bill</p>	<p>Am't (\$)</p> <p>Add Bill</p>
	<p>Invoice dated</p>		<p>Fee Charged</p>	
	<p>Invoice dated</p>		<p>Fee Charged</p>	

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	29/08/2018 14:46
Date Of Accident	29/08/2018 09:10
Exact Location Of Accident	CTE NEAR MOULMEIN EXIT TOWARDS TOWN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT546T
Insured/Policyholder	
Name Of Registered Owner	TAN YI LIN (CHEN YILIN)
NRIC No	S7906384C
Email Address	YLTTAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92733947
Alternative Phone No	OTHERS-92733947

Vehicle Particulars

Manufacturer	SUBARU
Model	FORESTER-2.0 XT (A)
Exact Purpose for which vehicle was being used at time of accident	TRAVEL TO WORK
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	QBE INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	8-V0015317-MVA-R001
Cover Note Number	

Driver

Name of Driver	TAN YI LIN (CHEN YILIN)
NRIC No	S7906384C
Date Of Birth	26/02/1979
Occupation	INDOOR
Date Of Driving Pass	22/06/1999
Driving Experience	19 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92733947
Fax Number	
Contact Number	OTHERS-92733947
Email Address	YLTTAN@GMAIL.COM

Address	72 SENGKANG SQUARE #15-49
Postcode	544706
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?	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

PLEASE REFER TO SKETCH PLAN

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	GBB4105X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TEOH CHIA CHING
NRIC/Passport Number	S7664516G
Contact Number	83395861
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.
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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: 29/8/2018
14:16

Driver's Signature

(If driver is not the policyholder)
Date & Time:

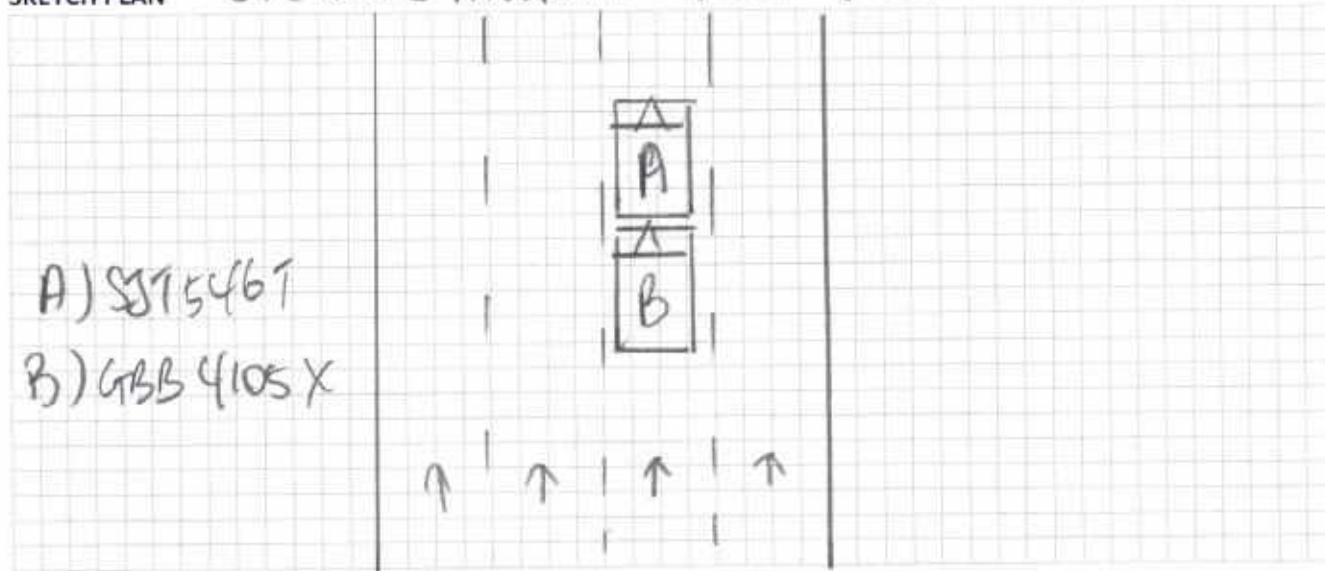
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

CTE NEAR MOULMEIN EXIT TOWARDS TOWN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along CTE ~~to~~ towards town when the accident happened near moulmein exit on 29 Aug 2018 9.12am. The weather was clear with moderate traffic. I was slowing down and came to a stop when the other car hit me from behind.

DECLARATION

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

Policyholder's Signature
 Date & Time: 29 Aug 2018 14.22

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

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

ACCIDENT STATEMENT

ACCIDENT DATE: 29/8/2018 (DD/MM/YYYY), TIME: 09:12 (HH:MM)
LOCATION: CTE near moulmein exit towards town

1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: STT546T
b) INSURANCE COMPANY: QBE
c) POLICY NUMBER: 8-00015317-MVA-R001
d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: SUBARU FORRESTER XT
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS) SUV
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: TRAVEL TO WORK
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO ~~UNDER THIRD PARTY~~
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

a) NAME: TAN YI LIN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S7906384C CONTACT: 92733947
c) ADDRESS: 72 SENGKANG SQUARE #15-49 S7544706

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

a) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* d) DATE OF BIRTH: 26/02/1979 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 22 JUN 1999

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: GBB 4105 X MODEL: _____
b) DRIVER'S NAME: TEOH CHIA CHING
c) NRIC/FIN/PASSPORT: S76645166 CONTACT: 8339 5861

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = ylttan@gmail.com

fax = tengchuena@motorimage.net

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7906384C



Name

TAN YI LIN
(CHEN YILIN)

陈一霖

Race

CHINESE

Date of birth

26-02-1979 M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



License No. S7906384C

TAN YI LIN
(CHEN YILIN)

Date of birth 26 Feb 1979

Exp. Date 03 Jun 2003



NRIC No. S7906384C



Date of issue

04-06-2009

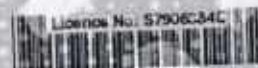
72 SENGKANG SQUARE #15-48
SINGAPORE 544708

NRIC No: S7906384C

Date: 10/12/2016

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

	PASS DATE
Class 1B Motorcycles not exceeding 250 cc	01 Jul 1998
Class 2A Motorcycles between 201 cc and 400 cc	07 Dec 1999
Class 2 Motorcycles exceeding 400 cc	20 Feb 2001
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	22 Jun 1999



NR 426A

QBE Insurance (Singapore) Pte Ltd

A member of the worldwide QBE Insurance Group - Unique Entity No. 198401363C

1 Raffles Quay, #29-10 South Tower, Singapore 048583

Tel: 65-6224 6633 Fax: 65-6533 3270

GST Registration No.: M200644018

www.qbe.com.sg

**Certificate of Insurance**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No.
8-V0015317-MVA-R001Account Name **I INSURANCE SG AGENCY**MCI Type **MX1**

- 1 Index Mark and Registration Number of Vehicle or Chassis No: **SJT546T**
- 2 Name of Policyholder **Tan Yi Lin**
- 3 Effective date of Commencement of Insurance for the purpose of the Regulations **30/06/2018**
- 4 Date of Expiry **29/06/2019**

- 5 Person or Classes of Person entitled to drive*

(a) The Policyholder

The Policyholder may also drive a motor car not belonging to him/her and not hired to him/her under a hire purchase agreement.

(b) Any 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 the 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

- 6 Limitations as to use*

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

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

- 7 Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk 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 Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

QBE Insurance (Singapore) Pte Ltd

Authorized Signature

Date of Issue: 24/05/2018