

NATIONAL Assessment Centre Services (wef 1 Jan 2005) <b>MNA48114623</b>			
Date In: <b>04/09/2018 14:19</b>	Job description	Date & Time Completed	Done by:
Ref No: <b>NBA/1101180/64514</b>	SAS e-filing		
Veh No: <b>GBD 93034</b>	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: <b>03/09/2018 16:30</b>	i-Motor Claim Form		
OD: TP: <b>Reporting Only</b>	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: <b>FBD 6771Z</b>	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

<b>XIA1805629</b>	<b>Invoice Preparation Checklist</b>		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			
	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*			
QC Checked by (Engr-In-Charge):	*N3: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
Auditors' Comments :-	TP (N11): TP (Non INC) against INC \$20			
Cat 1:	9) N12: Idac Mobile \$0			
Cat 2/3:	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	04/09/2018 14:19
Date Of Accident	03/09/2018 16:30
Exact Location Of Accident	NEAR TO NO. 8 KAKI BUKIT AVENUE 4
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD9303Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ENVIRON CONSTRUCTION CO PTE LTD
Co Reg No	197901804C
Email Address	GUNA@BLDRENAS.COM.SG
Mobile Phone No	(LOCAL) +65-94525094
Alternative Phone No	OFFICE-94525094

### Vehicle Particulars

Manufacturer	NISSAN
Model	NV200
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DHOM110143861503
Cover Note Number	

### Driver

Name of Driver	SINNAIAH ARIYAGUNASINGAM
NRIC No	S7961408D
Date Of Birth	20/05/1979
Occupation	OUTDOOR
Date Of Driving Pass	24/08/2006
Driving Experience	12 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94525094
Fax Number	
Contact Number	OTHERS-94525094
Email Address	GUNA@BLDRENAS.COM.SG



Address	BLK 115 BEDOK NORTH ROAD #06-301
Postcode	460115
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	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?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

ON 03-09-2018 AT ABOUT 16:30HRS I HAVE DRIVEN ALONG KAKI BUKIT AVENUE 4 AND WAS SWITCHING LANE DUE TO AHEAD PARKING LOT WAS SOME CARS PARKING ON THE ROAD SIDE. THE MOTORIST COME NEXT LANE AND HIT ON TO MY FRONT RIGHT OF MY VAN GBD9303Y BUT THE RIDER DID NOT FALL AND ONLY SOME SCRATCHES ON HIS BIKE FBD6771Z AND NO INJURIES. BEFORE I CHANGE LANE THERE WAS NO VEHICLE ON MY SIDE MIRROR THAT ALL.

#### 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	FBD6771Z
Vehicle Make/Model/Colour	YAMAHA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	YEO YONG QUAN
NRIC/Passport Number	S8526596B
Contact Number	81889350
Address	
Postcode	

## 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.
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.

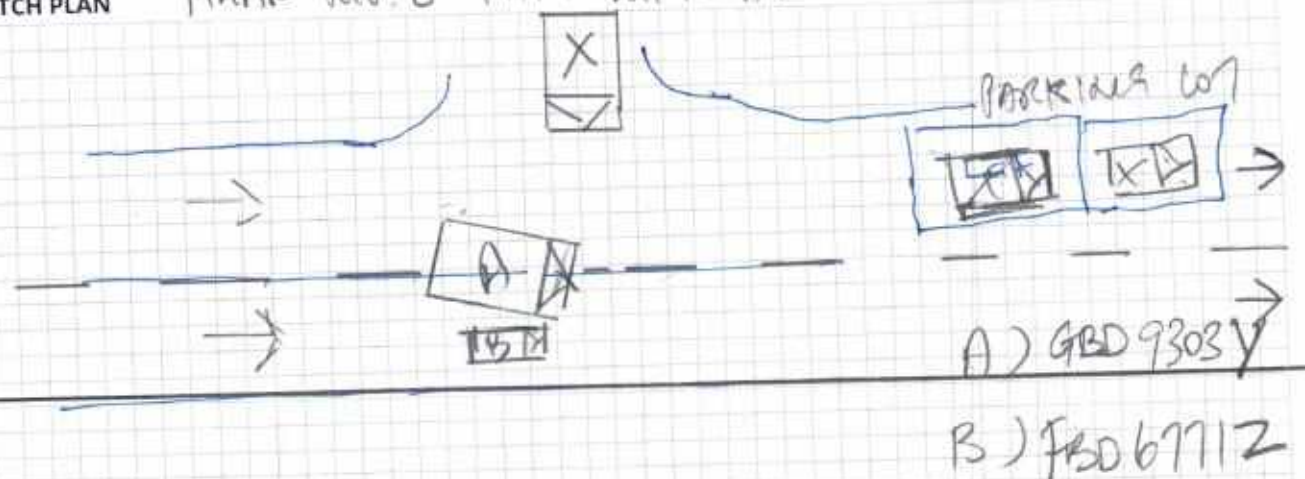
Policyholder's Signature  
Date & Time:

SA 04/09/18  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



TIKAR NO. 8 KAKI BUKIT ANAKAK 4



03, september, 2018. Time 4.30 pm. I have driven along ~~KAKI~~ ~~BUKIT~~ ~~AVKLY~~ and was switch lane due to the a head parking lot in the road, the motorist came next lane and get a clashes without any injuries. I had a blind shot and not viewed from mirror.

Refer to statement

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

S.A. 4/9/18  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Name: \_\_\_\_\_

NRIC/FIN No.:

**NOTICE OF REPORTING**

This is to confirm that Sinnaiah Ariyagunasingam, NRIC: S7961408D, has reported to the Police a non-injury traffic accident which occurred at near to No 8 Kaki Bukit Ave 4 on 03/09/2018 at 16:30pm to 16:40pm involving the following vehicles:

GBD9303Y (Nissan / Grey)

FBD6771Z (Yamaha / Red & White)

2. If accident was reported to the Police within 24 hrs of its occurrence, then he has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank / Name of Issuing officer: SSS Sim Cheng Siong

Date: 03/09/2018

Time: 1815hrs

S/D Ref: 71

Police Post/ Unit: BEDOK NORTH NPC

Original – To be issued to informant  
Duplicate- to be submitted to Traffic Police

**Bedok North NPC**  
No. 30 Bedok North Road  
Singapore 469676  
Tel: 1800-2449999



# ACCIDENT STATEMENT

ACCIDENT DATE: 03 / 09 / 2018 (DD/MM/YYYY), TIME: 04:30 PM (HH:MM)

LOCATION: NEAR TO 8 KAKI BUKIT AVE 4

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: G18D 9303 Y  
 b) INSURANCE COMPANY: UOB  
 c) POLICY NUMBER: PHDM 1101 4386 1503  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: NISSAN NV200  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: ENVIRON CONSTRUCTION CO PTE LTD (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 191901804C CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

No of passengers  
(including driver)

(1)

- a) NAME: SINNAIAH ARIYAGUNASINGAM (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 57961408D CONTACT: 94525094  
 c) ADDRESS: 115 BEDOK NORTH ROAD  
A 06-301 S460115

\* d) DATE OF BIRTH: 20 / 05 / 1979 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 24-08-2006

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

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: BEDOK NORTH NPC

## 8. THIRD PARTY VEHICLE

No of passengers  
(including driver)

( )

- a) VEHICLE NUMBER: FBD 6771Z MODEL: YAMAHA  
 b) DRIVER'S NAME: YEO YONG QUAN  
 c) NRIC/FIN/PASSPORT: 58526596B CONTACT: 8188 9350

## 9. THIRD PARTY VEHICLE

No of passengers  
(including driver)

( )

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

EMAIL = guna@bldrenas.com.sg

VIDEO =



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7961408D



Name  
SINNAIAH ARIYAGUNASINGAM

சி அரியகுணசிங்கம்

Race

SRI LANKAN

Date of birth

20-05-1979

Country/Place of birth

SRI LANKA

Sex

M



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S7961408D

Name  
SINNAIAH ARIYAGUNASINGAM

Birth Date 20 May 1979

Issue Date 13 Nov 2008



001675058J

5543315



NRIC No. S7961408D



Date of issue

23-12-2015

Address

APT BLK 115 BEDOK NORTH ROAD  
#06-301  
SINGAPORE 460115

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

CLASS DATE

Class 3 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg 24 Aug 2006



Licence No: S7961408D

NP428A



## 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)

**ORIGINAL**

<b>CERTIFICATE NO.</b>	DHOM110143861503	<b>Excess:</b>	\$800/-SECTION 1 \$200/-WINDSCREEN DAMAGE CLAIM \$4000/-APPL TO <25 YRS & OR <3YRS EXP
<b>Type of Cover</b>	COMPREHENSIVE		
<b>Vehicle Number</b>	GBD9303Y		
<b>Name of Insured</b>	ENVIRON CONSTRUCTION CO (PTE) LTD		
<b>Restricted Driver(s)</b>	NOT APPLICABLE		

**Period of Insurance** 22 July 2018 to 21 July 2019

**Engine#** K9KF276D054527  
**Chassis#** VSKYBAM20Z0099170

Goods carrying - Private Type [MZ 300]

### AUTHORISED DRIVER

Any person who is driving on the Insured's order or with their permission

### LIMITATIONS AS TO USE

- (1) Use in connection with the Insured's business
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business
- (3) Use for social domestic and pleasure purposes

### THE POLICY DOES NOT COVER

- (1) Use for hire or reward or for racing pace-making reliability trial or speed-testing
- (2) Use whilst drawing a trailer except the towing of any disabled mechanically propelled vehicle

Provided that the person 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

\*Limitation 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).

UNITED OVERSEAS INSURANCE LTD

FCTTS Date 18/06/2018

For the Company

