

# NATIONAL Assessment Centre Services. (wef 1 Jan 2005) MNA113116100

Date In: 7/9/8-521	Job description	Date & Time Completed	Done by
Ref No: NA/C218016384/24	SAS e-filing		
Veh No: 600DKE	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 6/9/8-1500	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: 305717	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% P: 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

NA180717	<b>Invoice Preparation Checklist</b>	Amf (\$) In Bill	Amf (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: 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: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QN*		
	*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: Idao Mobile 30		
Auditors' Comments:-	Invoice dated	Fee Charged	
Dat. 1:	Invoice dated	Fee Charged	
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	07/09/2018 15:21
Date Of Accident	06/09/2018 15:00
Exact Location Of Accident	JUNC ADMIRALTY RD WEST & WOOLANDS AVE 8
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB5215E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	M/S JIM'S FORCE SERVICES
Co Reg No	52916725E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97439445
Alternative Phone No	OFFICE-97439445

### Vehicle Particulars

Manufacturer	KIA
Model	KIA 2900L 5 M/T
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3054261800
Cover Note Number	

### Driver

Name of Driver	MUHAMMAD FIRDAUS BIN SAFRI
NRIC No	S9435951A
Date Of Birth	08/10/1994
Occupation	OUTDOOR
Date Of Driving Pass	17/07/2018
Driving Experience	0 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81625832
Fax Number	
Contact Number	OFFICE-81625832
Email Address	NOEMAIL

Address	BLK 759 YISHUN STREET 72 #03-286
Postcode	760759
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	COLLISION - CROSS JUNCTION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JQS7117 (PRIVATE CAR)
Number of vehicles involved in the accident	2
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)	3
Passenger 1	NAME: : MESWAN BIN IBRAHIM GENDER: : MALE
Passenger 2	NAME: : NOR AZMAN SHAH BIN ABDUL AZIZ GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20180906/2143.

#### 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	JQS7117
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver	WONG KEE HUI
NRIC/Passport Number	
Contact Number	+60197938880
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

## 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:

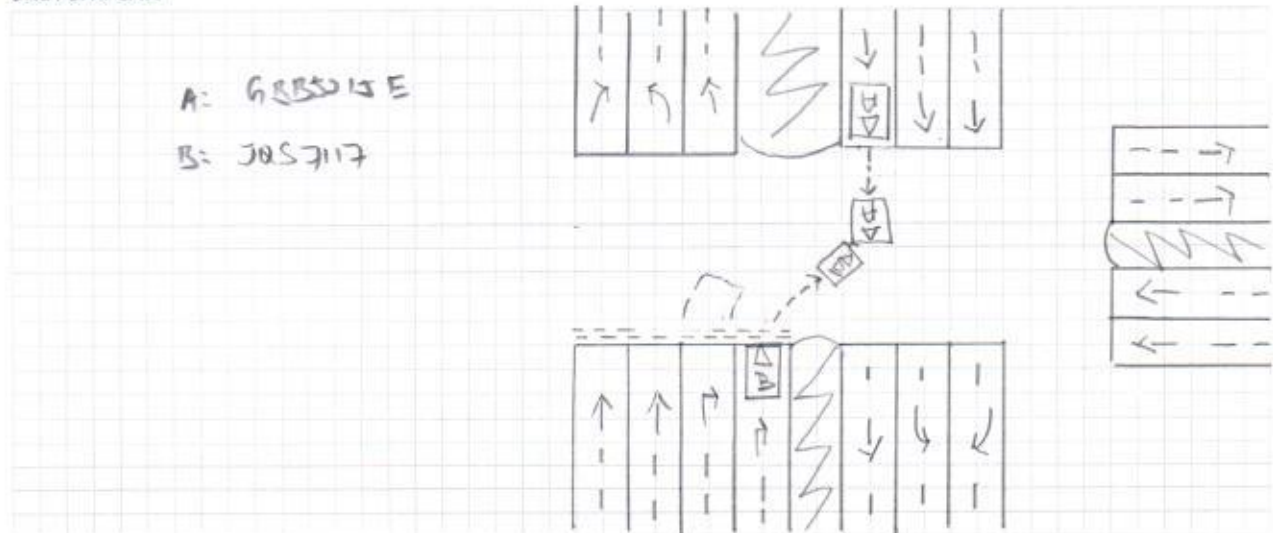
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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:

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

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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer attach to police report : 7/20180906/2143

## 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.:

VEHICLE NO: 888 5215 E

MAKE &amp; MODEL : KIA 2009L 5 MIT

DATE OF ACCIDENT	06 / 09 / 18
TIME OF ACCIDENT	1500 AM / <u>PM</u>
LOCATION OF ACCIDENT	Along Rd 1 traveling toward rd 2 Alaricathy Rd west / Woodland Ave 8
Exact Purpose use during accident	
NAME OF OWNER	Jims Force Services
TELP NO	9743 9445
NRIC REG NO	BNV 52916725 E
CLAIM TYPE	OD / <u>THIRD PARTY</u> / Reporting Only
PRIVATE HIRE	YES <u>(NO)</u> ?
INSURANCE CO.	Ching Taiping Insurance (Singapore) PTE LTD (CTI)
TYPE OF COVERAGE	<u>Comprehensive</u> / Third Party / Third Party Fire & Theft
POLICY NO.	DMCVSN 3054261800
NAME OF DRIVER	As above / If No: Muhammad Firdaus Bin Sarai
NRIC	89435951A Any passengers: 02
DATE OF BIRTH	08 / 10 / 1994
OCCUPATION	<u>Outdoor</u> / Indoor
DATE OF DRIVING PASS	17 / 07 / 2018
GENDER	<u>Male</u> / Female
CONTACT NO.	81625832 Office: Home:
ADDRESS	816 759 Yishun St 72 #03-286 SL 760759
DRIVER HAVE ANY OWN Vehicle	<u>NO</u> / If yes : Reg No:
RELATIONSHIP	<u>Employee</u> / If No:
WEATHER CONDITION	<u>Clear</u> / Raining / Other :
ROAD SURFACE	<u>Dry</u> / Wet / Other :
ANY INJURIES	No / If yes : Who?
CONTACT NO.	
POLICE REPORT	No / If yes : Where? Yishun
VEHICLE B NO.	3QS 7117 Any Passenger :
NAME	Wong Kee Hui
CONTACT NO.	+60197938880
VEHICLE C NO.	Any Passenger :
VEHICLE D NO.	Any Passenger :
VEHICLE E NO.	Any Passenger :
VEHICLE F NO.	Any Passenger :
ANY WITNESS	
WITNESS CONTACT NO.	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO
PARTICULAR WORKSHOP	Autowerke Automotive Pte Ltd
TELP NO	8 Kaki Bukit Ave 4 #705-01/02
CONTACT PERSON	Premier Building Singapore 415875
FAX NO.	Alex Ben 9091 0000
	6282 4292
	Enquiry @ autowerke.com.sg



# SINGAPORE POLICE FORCE



T/20180906/2143

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

1 of 3

Report No. T/20180906/2143

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 06/09/2018 20:58	Vide Report No.: T/20180906/2138	Station Diary No.: 123
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**Informant's Particulars**

Name of Informant: MUHAMMAD FIRDAUS BIN SAFRI	Address: APT BLK 759 YISHUN STREET 72 #03-286 SINGAPORE 760759
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ID Type / ID No.: NRIC NO / S9435951A	Contact No.: Home/Office: Mobile: 81625832
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Nationality: SINGAPORE CITIZEN	Email:
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Sex: Male	Age: 23	Date of Birth: 08/10/1994	Type of Informant: Driver
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Race: Malay	Language: English	Institution / School Name:
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Occupation: PEST CONTROL OFFICER	Driving Licence Information: Class: 3 Date of Expiry:
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**General Information of the Accident**

Type of Accident: Non-Injury Others	Drink Drive: No	Date/Time of Accident: 06/09/2018 15:00	Type of Location: X-Junction
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Location:  
Along Road 1 Traveling Toward Road 2  
ADMIRALTY ROAD WEST  
WOODLANDS AVENUE 8  
Admiralty Road West towards Admiralty Road

Weather: Clear	Road Surface: Dry	Road Speed Limit:
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Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate
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Type of Collision: Between Moving Vehicles - Head On	Anyone conveyed by ambulance: No
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**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB5215E	Lorry				Slightly Damaged	2
JGS7117	Car				Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20180906/2143

2 of 3

Report No. T/20180906/2143

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

**CONTINUATION OF REPORT**

**Brief Details.**

On 06/09/2018 at about 1500hrs, I was travelling in my lorry ( Black/ GBB5215E) from Admiralty Road West toward Admiralty Road.

At the junction, it was still green light, when I cross the stop line I noticed there was two cars from the opposite direction turning right, I jammed brake but I did not managed to stop in time. The first car managed to make the full turn and got away but I collided with the second car (white honda / JGS7117) who followed closely behind the car in front.

There was no visible injury on my passengers but I advised them to see a doctor as they knocked their head against the windshield. I got out of my vehicle and discovered a slight damaged to my front bonnet and slight damaged to the front bonnet of the other vehicle as well. There was also no visible injury on the other party. I managed to exchanged particulars with her . There was no Traffic police or Ambulance at scene.



**SINGAPORE  
POLICE FORCE**



T/20180906/2143

Police Station Of Origin:

Yishun North N.P.C

31 Yishun Central SINGAPORE 768827

Tel No: 1800-8529999

3 of 3

Report No. T/20180906/2143

**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 /

Sgt 2 BERNARD LAU MENG WAI

Sgt Lau Meng Wai

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Signature Of Informant:

Date/Time:

06/09/2018 20:58

SN 085

Classification Of Case:

Signature:

Singapore Police Force

Authentication Stamp

NP168

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S9435951A

Name:

MUHAMMAD FIRDAUS BIN SAFRI

Birth Date: 08 Oct 1994

Issue Date: 17 Jul 2018



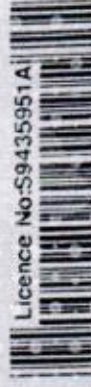
002825030A

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

Class 3 Motor cars with unladen weight  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq$  2500kg 17 Jul 2018

NP 428A



Licence No: S9435951A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9435951A



Name

MUHAMMAD FIRDAUS BIN  
SAFRI



Race

MALAY

Date of birth

08-10-1994

Sex

M

Country of birth

SINGAPORE

S9435951A

4369992



NRIC No: S9435951A



Date of issue

12-03-2009

APT BLK 759 YISHUN STREET 72 #03-286

SINGAPORE 760759

NRIC No: S9435951A

Date: 17/10/2010

No: 6647891

## 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.	DMCVSN3054261800	Engine No. A139126449	Chassis No. KNCUR014297385990
1. Index Mark and Registration Number of Vehicle	GBR5215K		
2. Name of Policy Holder	M/S JIM'S FORCE SERVICES		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	13 AUGUST 2018 (14:31 HOURS) 12 AUGUST 2019	EX SECT. 1 ..... EX ON WINDSCREEN .....	S\$500.00 S\$100.00
4. Date of Expiry of Insurance			
5. Persons or Classes of Persons entitled to drive *			

ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR 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: \*

- (1) USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
- (2) USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
- (3) USE FOR SOCIAL, DOMESTIC OR PLEASURE PURPOSES.

THE POLICY DOES NOT COVER.

- (1) USE FOR HIRE OR REWARD OR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED TESTING.
- (2) USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

\* 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). Please see reverse For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Countersigned By:

Authorised Officer

Authorised Signatory