

NATIONAL Assessment Centre Services

Date In 11/09/18	Job description	Date & Time Completed	Done by
Ref No NA/INC18016526/13	SAS e-filing		
Veh No SFK3228L	E-mail (within 8hrs, AIC 2hrs)		
D.O.A 11/09/18 1025	i-Motor Claim Form	MI/101109-001	
OD (P) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

4P5439E

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

NA1805804

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist

Am't (\$)

Am't (\$)

1st Bill

Add Bill

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$80)

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

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	11/09/2018 12:05
Date Of Accident	11/09/2018 10:25
Exact Location Of Accident	TURF CLUB ROAD TWDS PIE VIA VANDA LINK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFK3228L
Insured/Policyholder	
Name Of Registered Owner	TAN SHUI LONG ROLAND
NRIC No	S1598092C
Email Address	SHUILONGR@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96709063
Alternative Phone No	OFFICE-96709063

Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099962254
Cover Note Number	

Driver

Name of Driver	TAN SHUI LONG ROLAND
NRIC No	S1598092C
Date Of Birth	19/08/1963
Occupation	INDOOR
Date Of Driving Pass	17/09/1984
Driving Experience	33 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96709063
Fax Number	
Contact Number	OFFICE-96709063
EMail Address	SHUILONGR@YAHOO.COM

Address	BLK 41 BANGKIT ROAD #02-04
Postcode	679978
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?	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

I WAS TRAVELLING ALONG TURF CLUB ROAD TWDS PIE VIA VANDA LINK ON THE LEFT TURNING LANE. INFRT OF MY VEH STOP DUE TO THE TRAFFIC LIGHT AND I FOLLOWED SUIT. SUDDENLY VEH(B) FROM BEHIND CAME AND HIT ONTO MY REAR PORTION OF MY VEH DUE TO THE IMPACT MY VEH PUSHED FORWARD AND HIT ONTO THE REAR LEFT PORTION OF VEH C.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	DIDN'T TURN ON.
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP5439E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	PERYAKARUPPAN MURUGESAN
NRIC/Passport Number	G8095688L
Contact Number	81611187
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGM8987Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LAN YIHONG
NRIC/Passport Number	S8771650C
Contact Number	82220612
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.
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)**

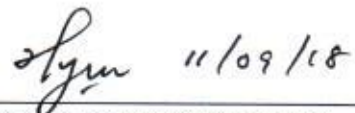
I understand, acknowledge, agree and consent that:

- (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.



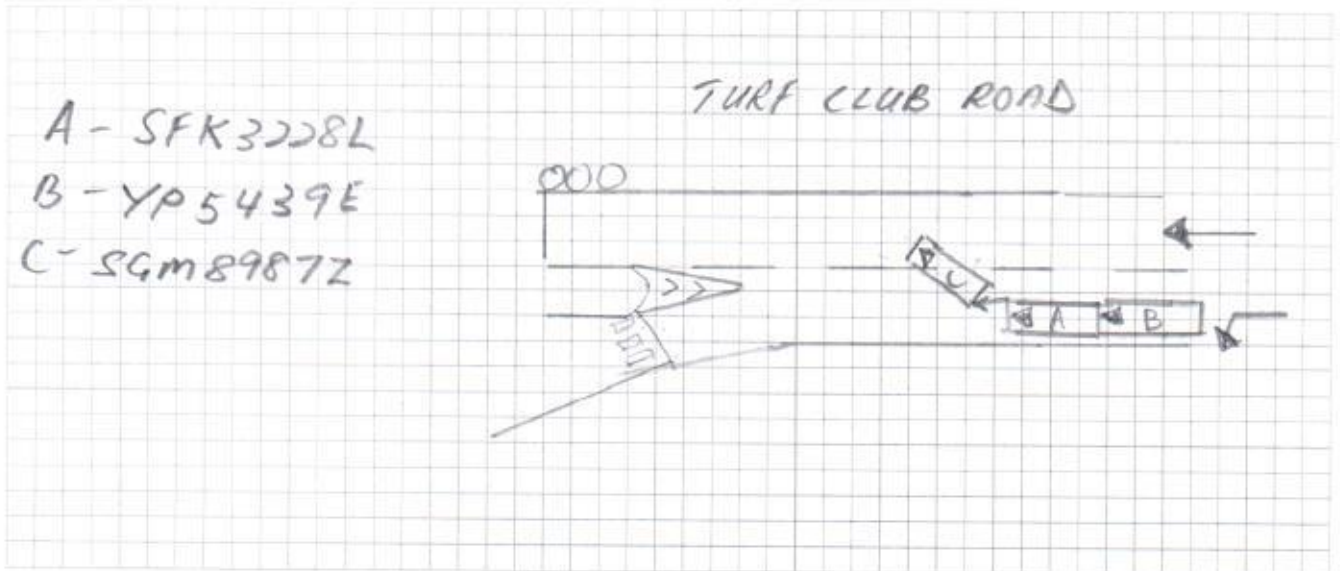
Policyholder's Signature
Date & Time:

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

P/s refer to the statement.

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:

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

[Signature] 11/09/18

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

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1598092C



Figure



TAN SHUI LONG ROLAND

陈水隆

Race

CHINESE

Date of Birth

19-08-1963

Sex

M

Country of Birth

SINGAPORE



302905

NRIC No. S1598092C



Blood Group

B+

Date of issue

09-06-1998

BLK 41 BANGKIT ROAD #02-04
SINGAPORE 679978

NRIC No. S1598092C

Date: 14/06/2012

No: 7018091

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number **S1598092C**

Name **TAN SHUI LONG ROLAND**

Birth Date **19 Aug 1963**

Issue Date **23 Apr 2004**





001203120E

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	17 Sep 1984



Licence No: S1598092C

NP 428A

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="11/09/2018 10:45"/>
Vehicle No.(For Motor)	<input type="text" value="SFK3228L"/>	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"/>	5099962254		TAN SHUI LONG ROLAND	S1598092C	GPC	drivo CLASSIC	SFK3228L	SFK3228L	16/04/2018	14/06/2019

Claim Handling

Task Transfer Exit

▼ Accident MT/1011109

LOS SAL SUB

Policy No.	5099962254	Vehicle No.	SFK3228L	GST Registration No.	
Certificate No.					
Policyholder Name	TAN SHUI LONG ROLAND			Policyholder NRIC	S1598092C
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	96709063	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	Yes	NCD Entitlement(%)	50	Private Hire	No

▼ Accident Details

Report Date	12/09/2018 08:57	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	11/09/2018	Time of Accident hh:mm	10:25	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	TURF CLUB ROAD TWDS PIE VIA VANDA LINK				

▼ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	41 BANGKIT ROAD	Address 2	#02-04 CHESTERVALE	Address 3	SINGAPORE 679978
Address 4		Address Type	Singapore address	Post Code	679978
Unit No.		Related Policy Number	5099962254		

▼ OI Driver Info

Driver Name	TAN SHUI LONG ROLAND	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S1598092C	Driver DOB	19/08/1963
Register Date of Driver License	17/09/1984	Driver Age	55	Driving Experience	33
Contact No.(Mobile)	96709063	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	41 BANGKIT ROAD	Address 2	CHESTERVALE	Address 3	SINGAPORE 679978
Address 4		Address Type	Singapore address	Post Code	679978
Unit No.	#02-04				
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

▼ Investigation

Claim 001 OD-MX New

▼ Claim Case Officer

Claim Type	OD-MX	Insured Name	TAN SHUI LONG ROLAND	Insured NRIC	S1598092C
Contact No.(Mobile)	96709063	Contact No.(Home)	67676970	Contact No.(Office)	670755
Email Address	shuilongr@yahoo.com	OI Vehicle Number	SFK3228L	TP Vehicle Number	YP5435
Claim Description	SFK3228L / YP5439E ON 11 Sept 2018			Name of Preferred Workshop	
Preferred Workshop	<input checked="" type="radio"/> Yes <input type="radio"/> No	Preferred Repair Option	Preferred Workshop, Name unknown	Insured Liability report	Not at fault
Date Registered	12/09/2018 09:05	Claim Close Date		Date Received	12/09/2018
Report Taken By	ROSLINDA	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> Print AK letter					
Modification History					

▼ Special Claim Creation Approval

Approval	Reason
Remarks	
Attachment	

Accident No.	MT/1011109	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	12/09/2018 00:00
Path *		Category *	Confidential
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Message Read		Clear	Please Select

▼ Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:04	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-9-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:04	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-9-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:04	SAS	Normal	SAS 2018-9-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:04	Photos	Normal	Photos 2018-9-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:04	Photos	Normal	Photos 2018-9-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:04	Photos	Normal	Photos 2018-9-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:02	Photos	Normal	Photos 2018-9-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:02	Photos	Normal	Photos 2018-9-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:02	Photos	Normal	Photos 2018-9-12
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Sep 2018 09:02	Photos	Normal	Photos 2018-9-12



▼ Video List

Uploaded By/Date

Folder Date

File Name



Source

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