

NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

MAINT 18128880

Date In: 08/10/2018 19:46	Job description	Date & Time Completed	Done by
Ref No: N24/INC 6017976/Y	SAS e-filing		
Veh No: SF2 338 G	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 08/10/2018 09:45	i-Motor Claim Form	MT/10/4259-001	08/10/2018 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: SLV 4644H

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

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 (\$)
1st Bill

Am't (\$)
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
- 6) TR: Re-inspection \$75
- 7) N1: Idao DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- 9) N12: Idao Mobile \$30

Invoice dated

Fee Charged

MAINT 18128880

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	03/10/2018 19:40
Date Of Accident	03/10/2018 09:15
Exact Location Of Accident	CTE (CITY) AFTER PIE (TUAS) EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFZ3318G
Insured/Policyholder	
Name Of Registered Owner	TAN SOON HONG
NRIC No	S1264962B
Email Address	NIGELQUAH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91551080
Alternative Phone No	OTHERS-91760182

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA-1.6 (A)
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	REPORTING ONLY
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	5055830142-05
Cover Note Number	

Driver

Name of Driver	QUAH ER BIN, NIGEL
NRIC No	S9024156G
Date Of Birth	25/06/1990
Occupation	INDOOR
Date Of Driving Pass	13/10/2010
Driving Experience	7 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91760182
Fax Number	
Contact Number	OTHERS-91551080
EMail Address	NIGELQUAH@GMAIL.COM

Address	BLK 542 SERANGOON NORTH AVENUE 4 #05-01
Postcode	550542
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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)	2
Passenger 1	NAME: : FIANCE GENDER: : FEMALE

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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLV4644H
Vehicle Make/Model/Colour	MAZDA 6
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TIONG HUI MIN
NRIC/Passport Number	S8223665A
Contact Number	87998707
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: 3/10/18 1620

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

SKETCH PLAN

CTE (CITY) AFTER PIE (TUNIS) EXIT

A) SFZ 3318G

B) SLV 4644H



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along CTE towards the City on my way to work. After passing PIE (Tunis) exit, the car in front of me suddenly jammed her brake. I saw also stepped on my brakes hard, but could not stop in time. I ended up bumping into the car 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: 5/10/18 1620

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

Claim Handling

Accident NT/1014259

Policy No.	S055830142-05	Vehicle No.	SF23318G	GST Registration No.	
Certificate No.					
Policyholder Name	TAN SOON HONG	Cover Type	drive CLASSIC	Policyholder NRIC	S1264962B
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	91551080	Special Remark		Contact No.(Home)	
Email Address		TCA	= No = Yes	eCode	No *
KF6	= No = Yes	NCD Entitlement(%)	50	eCode Reason	
NCD Protection	Yes			Private Hire	No
Accident Details					
Report Date	04/10/2018 09:37	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	03/10/2018	Time of Accident hh:mm	09:15	Country of Accident	Singapore
Reporting Centre		Orange Fence		ICM No.	
Accident Location	CTE (CITY) AFTER PIE (TUAS) EXIT				
Excess					
Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	500.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
Benefits					
Coverage		Sum Insured	99999999.99		
Excess Waiver			99999999.99		
Transport Allowance					
GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification history					
Policyholder Mailing Address					
Address 1	BLK 542 #05-01	Address 2	SERANGOON NORTH AVENUE 4	Address 3	SINGAPORE 550542
Address 4		Address Type	Singapore address	Post Code	550542
Unit No.		Related Policy Number	S055830142-06		
O1 Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	25/06/1990
Unnamed driver name	QUAH ER BIN, NIGEL	Driver NRIC	S9024116G	Driving Experience	7
Register Date of Driver License	17/06/2011	Driver Age	28	Contact No.(Home)	
Contact No.(Mobile)	91760162	Contact No.(Office)		Address 1	SINGAPORE 550542
Address 1	BLK 542 #05-01	Address 2	SERANGOON NORTH AVENUE 4	Post Code	550542
Address 4		Address Type	Foreign address		
Unit No.	05-01			Driver Insurer Company	NTLC
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.	SF23318G		
Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes = No		
Modification History					

Claim 001 New

Claim Type *	CO-MX	Insured Name	TAN SOON HONG	Insured NRIC	S1264962B	
Contact No.(Mobile)	91551080	Contact No. (Home)	64821164	Contact No. (Office)		
Email Address	quah.tan.soon.hong@tpgcom.sg	OT Vehicle Number	SF23318G	TP Vehicle Number	SLV464	
Claim Description	SF23318G / SLV464H ON 3 Oct 2018				Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Fully at Fault			
Repair No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	GIA report	Received	
Date Registered				Claim Close Date	04/10/2018 09:41	
Report Taken By				Date Received	04/10/2018	
Print AR letter						

Save Submit

Attachment

Accident No.	NT/1014259	Claim No.	001
Last Doc. Received	Yes No	Upload Date	04/10/2018 09:46
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Read			
Attachment List			

Attachment	Uploaded By/Date	Category		Urgency	Description	PS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:46	Photos		Normal	Photos 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:46	Photos		Normal	Photos 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:46	Photos		Normal	Photos 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:46	Photos		Normal	Photos 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:41	Photos		Normal	Photos 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:41	Photos		Normal	Photos 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:41	Photos		Normal	Photos 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:41	Photos		Normal	Photos 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:41	SAS		Normal	SAS 2018-10-4	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 04 Oct 2018 09:41	NRIC/ Driving License		Normal	NRIC/ Driving License 2018-10-4	
Video List						
Uploaded By/Date	Folder Date	File Name		Source		
<div>Display in New Window</div> <div>Scan and uploading</div>						

ACCIDENT STATEMENT

ACCIDENT DATE: 03/10/2018 (DD/MM/YYYY), TIME: (09 : 15) (HH:MM)

LOCATION: CTE (CITS), after PIE (TUAS) exit

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SF2 8318G
 b) INSURANCE COMPANY: NTUC Income
 c) POLICY NUMBER: 5055 8301 42-05
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Toyota Altis
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 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: Tan Soon Hong (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1264962 B CONTACT: 91551080
 c) ADDRESS: Blk 542, #05-01, Serangoon North Ave 4 S1550542

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Quah Er Bin Nigel (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S9024136 G CONTACT: 91760182
 c) ADDRESS: Blk 542, #05-01, Serangoon North Ave 4 S1550542

* d) DATE OF BIRTH: (25 / 06 / 1990) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 17/06/2011

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

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: 3LV 4644 H MODEL: Mazda 6

b) DRIVER'S NAME: Tiong Hui Min

c) NRIC/FIN/PASSPORT: 88223665 A CONTACT: 87998707

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: MODEL:

e) DRIVER'S NAME:

f) NRIC/FIN/PASSPORT: CONTACT:

EMAIL = nigel.quah@gmail.com

VIDEO =

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9024156G



Name

QUAH ER BIN, NIGEL

郭 豫 彬

Race

CHINESE

Date of birth

25-06-1990

Sex

M

Country of birth

SINGAPORE



NRIC No. S9024156G



Date of issue

16-06-2011

Address

APT BLK 542 SERANGOON NORTH AVENUE 4
#05-01
SINGAPORE 550542

4741171

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9024156G

Name:

QUAH ER BIN, NIGEL

Birth Date: 25 Jun 1990

Issue Date: 17 Jun 2011



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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 13 Oct 2010



Licence No: S9024156G

NP 426A

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: 5055830142-05

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SF23318G**
Chassis Number : **MR053ZEC107100469**
2. Name of Policyholder : **TAN SOON HONG**
3. Effective Date of Insurance : **13 Oct 2017**
4. Expiry Date of Insurance : **12 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 social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: YES
EXCESS WAIVER	: YES
PRIMARY DRIVER	: TAN SOON HONG
NAMED DRIVER (1)	: QUAH NAM SIAH
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: MAYBANK
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 : CREDENTIAL MOTOR PTE LTD (00000613028)
Date of Issue : 25 Sep 2017 12:00 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive