

# NATIONAL Assessment Centre Services.

[wef 1 Jan'09] **MYA118129306**

Date In: 5/10/18-14:05	Job description	Date & Time Completed	Done by
Ref No: NA/C7218018108/24	SAS e-filing		
Veh No: 6X37889	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 2/12/18-16:30	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: ( ) 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

Invoice Preparation Checklist	Am't (\$) Int 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		
For claiming against INC Only (wef 10 Jan 2009)		
6) TR: Re-inspection \$75		
7) N1: Idac DA + SMRT Survey \$160		
8) NTUC Additional Services:-		
Q1:		
*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 (N-in INC) against INC \$20		
9) N12: Idac Mobile \$0		
Invoice dated	Fee Charged	
Invoice dated	Fee Charged	

**NA180637T**

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Ref 1:

Ref 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 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. 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	05/10/2018 14:05
Date Of Accident	02/10/2018 16:30
Exact Location Of Accident	272A PASIR RIS ST 21 MULTISTORY CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX3788G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	M/S VEGETALK FOOD SUPPLIES PTE LTD
Co Reg No	200402979D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90073175
Alternative Phone No	OFFICE-90073175

### Vehicle Particulars

Manufacturer	TOYOTA
Model	LITEACE 5DR
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN3016451804
Cover Note Number	

### Driver

Name of Driver	KEE CHYE ONG
NRIC No	S1395874B
Date Of Birth	10/04/1959
Occupation	OUTDOOR
Date Of Driving Pass	04/04/1979
Driving Experience	39 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90073175
Fax Number	
Contact Number	OFFICE-90073175
EMail Address	NOEMAIL

Address	BLK 273 PASIR RIS STREET 21 #04-494
Postcode	510273
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - G/20181003/2072.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO



## 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.



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

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

No sketch

[illegible]

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



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

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



VEHICLE NO:	GX37886	MAKE & MODEL:	Toyota Hilux
DATE OF ACCIDENT	02 / 10 / 18		
TIME OF ACCIDENT	1630	AM/PM	
LOCATION OF ACCIDENT	222A PASIR RIS ST N MSCP Singapore 511878 and floor		
EXACT PURPOSE USE DURING ACCIDENT			
NAME OF OWNER	Vigotalk food supplies pte ltd		
TEL NO	90073175		
NRIC	2004029790		
CLAIM TYPE	OD / THIRD PARTY / <input checked="" type="checkbox"/> REPORTING ONLY		
INSURANCE CO	China Taping		
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft		
POLICY NO.	DMCVSN3016451804		
NAME OF DRIVER	As Above / If No: Kee Chye Ong		
NRIC	S13958743	Any Passengers:	NIL
DATE OF BIRTH	10 / 04 / 1959		
OCCUPATION	Outdoor / Indoor		
DATE OF DRIVING PASS	04 / 04 / 1979		
GENDER	Male / Female		
CONTACT NO.	90073175	Office:	Home:
ADDRESS	Blk 223 PASIR RIS ST N #104-494 Singapore 510273		
DRIVER HAVE ANY OWN VEHICLE	NO / If yes: Reg No:		
RELATIONSHIP	Employee / If No:		
WEATHER CONDITION	Clear / Raining / Other:		
ROAD SURFACE	Dry / Wet / Other:		
ANY INJURIES	No / If yes: Who?		
CONTACT NO.			
POLICE REPORT	No / If yes: Where? PASIR RIS H.P.C		
VEHICLE B NO.	unknown	Any Passenger:	unknown
NAME			
CONTACT NO.			
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.			
OWNER/DRIVER EMAIL			
PARTICULAR WORKSHOP	NEW HOCK TECK MOTOR PTE. LTD.		
	1 Kaki Bukit Ave 5, Blk C #01-43		
	Autobay@Kaki Bukit Singapore 417883		
TEL NO	TEL: 6747 9241		
CONTACT PERSON	Reena / Sukyi		
FAX NO.	FAX: 6741 7276		
EMAIL	reena@nhtmotor.com		
	admin@nhtmotor.com		



**SINGAPORE  
POLICE FORCE**



G/20181003/2072

1 of 2

**POLICE REPORT (NP299)**

Report No. G/20181003/2072

Police Station Of Origin  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

Date/Time Report Made 03/10/2018 13:38	Vide Report No.	Station Diary No. 55
Name Of Informant KEE CHYE ONG	Address APT BLK 273 PASIR RIS STREET 21 #04-494 SINGAPORE 510273	
ID Type / ID No. NRIC NO / S1395874B	Contact No. Home/Office Mobile 90073175	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation FOOD DELIVERY	Sex Male	Age 59
Institution/School Name	Date of Birth 10/04/1959	Race Chinese
Date/Time Of Incident 02/10/2018 16:30 - 03/10/2018 05:35	Location Of Incident 272A PASIR RIS STREET 21 MULTI STOREY CAR PARK SINGAPORE 511272 2ND FLOOR	

**Brief details.**

On 3/10/18 at about 0535hrs, I went to 272A MSCP Pasir Ris St 21, on the 2nd floor to retrieve my vehicle GX3788G. When I switched on the engine of my vehicle, the rear windscreen shattered. I made a check at the surrounding however I did not notice any foreign objects nearby. The two vehicles parked beside me were completely intact.

Signature Of Officer Recording The Report:

G / Sgt 3 S EVA SHERRIENA BINTI S AFFINDY

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
G / Pasir Ris N.P.C /  
Staff Sgt MUHAMMAD FIRDAUS BIN ABDUL  
SHAQUR  
Contact No.: 65852999

Authentication Stamp

Signature Of Informant:

Date/Time:  
03/10/2018 13:38

Classification Of Case:







**SINGAPORE  
POLICE FORCE**



G/20181003/2072

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20181003/2072

I had last seen my vehicle intact on 02/10/18 at about 1630hrs.

I do not have any suspects in mind. I am lodging this report under instructions of my company as it is a company vehicle.

I have an in-car camera in my vehicle however it was not recording when the engine is not on. I have made a checked to my vehicle and nothing is missing.

Signature Of Officer Recording The Report:

G / Sgt 3 S EVA SHERRIENA BINTI S AFFINDY

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
G / Pasir Ris N.P.C /  
Staff Sgt MUHAMMAD FIRDAUS BIN ABDUL  
SHAQUR  
Contact No.: 65852999

Authentication Stamp

Signature Of Informant:

Date/Time:  
03/10/2018 13:38

Classification Of Case:





REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1395874B



Name

KEE CHYE ONG

紀 再 旺

Race

CHINESE

Date of birth

10-04-1959

Sex

M

S1395874B

Country of birth

SINGAPORE

4824342



NRIC No. S1395874B



Date of issue

26-01-2012

Address

APT BLK 273 PASIR RIS STREET 21  
#04-494  
SINGAPORE 510273

REPUBLIC OF SINGAPORE

DRIVING LICENCE



KEE CHYE ONG

Birth Date: 10 Apr 1959

Issue Date: 27 Jan 2012



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

		EFFECTIVE DATE
Class 3	Motor Cars= $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles $\leq$ 2500kg	04 Apr 1979
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight $>$ 2500kg	26 May 1992
	*Motor vehicles which are not constructed to carry load and the unladen weight $<$ 7250kg	
Class 5	Motor vehicles not constructed to carry any load and the unladen weight $>$ 7250kg	23 Nov 1992

NP 428A





## 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**

DMCVEN3016451604

Engine No. 13C394161  
Chassis No. CP423004269

**1. Index Mark and Registration  
Number of Vehicle**

GX3788Q

**2. Name of Policy Holder**

N/S VEGETALK FOOD SUPPLIES PTE LTD

**3. Effective date of the Commencement of Insurance for  
the purposes of the Regulations, Ordinance or Enactment**

20 APRIL 2018

**4. Date of Expiry of Insurance**

19 APRIL 2019

**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 OF 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.

HIRE PURCHASE CO. : ETHOS GROUP LTD AS HS OWNER

\* 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.



Witnessed By

Authorised Officer

Authorised Signatory