

NATIONAL Assessment Centre Services

Date In: 06/10/2018 14:32	Job description	Date & Time Completed	Done by
Ref No: NA/INC18018128/K4	SAS e-filing		
Veh No: SLE 2576Z	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 06/10/2018 13:10	i-Motor Claim Form	MT/1014603 -001	8/10/18 10:15
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: SLK9180D	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:	Date & Time Completed	Done by
(INC hotline: 6788 6616)		
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NA1806379	Invoice Preparation Checklist	Amt (\$) In Bill	Amt (\$) Add Bill
Claimant's Particulars :- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge):	1) AR: Accident Reporting (\$30);		
	2) DA: Damage Assessment (\$100); INC (\$50)		
	3) TP: 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:-		
ON*			
*N5: Courtesy Car / Tpt Allowance \$5			
*N6: Repair Co-ordination \$10			
*N7: Post Repair Inspection \$25			
*N8: DV / Collect Excess Coordination \$5			
*N11: TP (Non INC) against INC \$20			
*N12: Idac Mobile 30			
Cat 1:	Invoice dated	Fee Charged	
Cat 2 / 3:	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 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	06/10/2018 14:32
Date Of Accident	06/10/2018 13:10
Exact Location Of Accident	JOO CHIAT TERRACE TWDS MANGIS ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE2576Z
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Insured/Policyholder

Name Of Registered Owner	TAN KOK HAN, ANDY (CHEN GUOHAN, ANDY)
NRIC No	S8102993H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83220107
Alternative Phone No	OTHERS-83220107

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL 1.5X CVT
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	5082237371-02
Cover Note Number	

Driver

Name of Driver	TAN KOK HAN, ANDY (CHEN GUOHAN, ANDY)
NRIC No	S8102993H
Date Of Birth	29/01/1981
Occupation	INDOOR
Date Of Driving Pass	25/03/2008
Driving Experience	10 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83220107
Fax Number	
Contact Number	OTHERS-83220107
Email Address	NOEMAIL

Address	27 PASIR RIS GROVE #08-50
Postcode	518073
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	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	
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)	3
Passenger 1	
	NAME: : NIL
	GENDER: : FEMALE
Passenger 2	
	NAME: : NIL
	GENDER: : MALE

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

PLS REFER TO THE ATTACHED STATEMENT.

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	SLK9180D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KANAGARATNAM SRITHARAN
NRIC/Passport Number	S7167388Z
Contact Number	98444141
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.
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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.

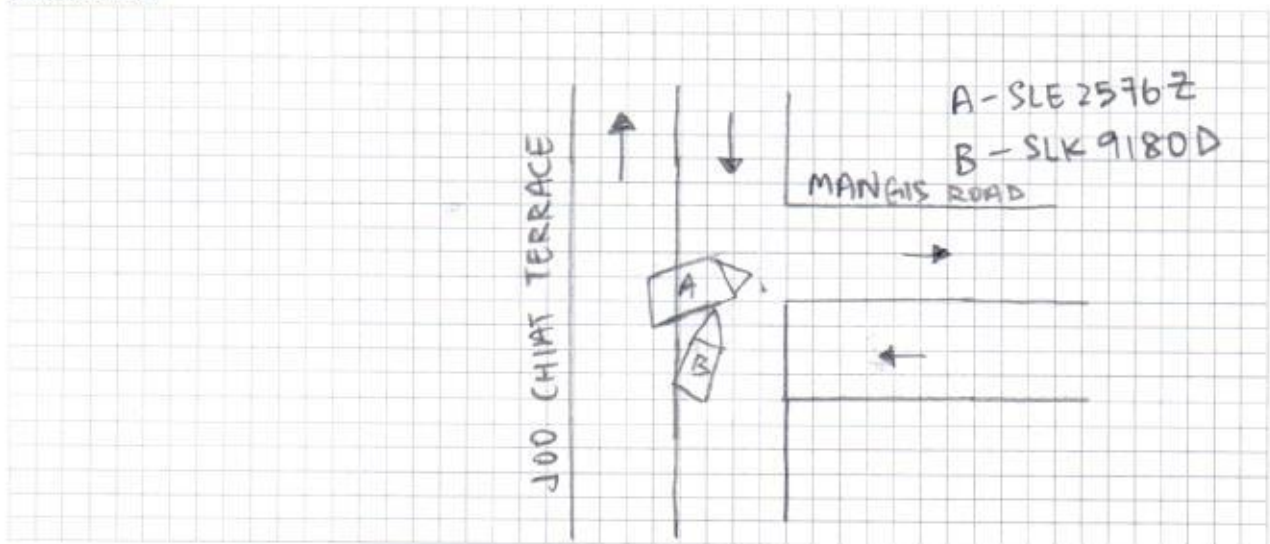
Policyholder's Signature
Date & Time:

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

6/10/2018

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

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On the above mentioned date & time, I was travelling on Joo Chiat Terrace turning Right into Mangis Road. When I signalled & was turning right, Suddenly, I felt an impact on my right. After alighting, I realised Vehicle B has hit onto my vehicle right portion. I wish to mention it was a one-way road & Vehicle B has travelled on the wrong direction road & caused this accident to happen.

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: 6/10/2018
 NRIC/FIN No.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8102993H



Name

TAN KOK HAN, ANDY
(CHEN GUOHAN, ANDY)

陈国汉

Race

CHINESE

Date of birth

29-01-1981

Country of birth

SINGAPORE

Sex

M

S8102993H

REPUBLIC OF SINGAPORE DRIVING LICENCE



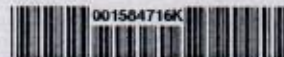
Licence Number S8102993H

Name

TAN KOK HAN, ANDY
(CHEN GUOHAN, ANDY)

Birth Date 29 Jan 1981

Issue Date 25 Mar 2008



001584716K



4886061



NRIC No. S8102993H

Date of issue

24-02-2011

27 PASIR RIS GROVE #08-50
SINGAPORE 518073

NRIC No: S8102993H

Date: 13/03/2018

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

PASS DATE

Class 3 Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg 25 Mar 2008



Licence No: S8102993H

NP 428A

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident
Vehicle No. (For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5082237371-02		TAN KOK HAN, ANDY (CHEN GUOHAN, ANDY)	S8102993H	GPC	drivo CLASSIC	SLE2576Z	SLE2576Z	14/07/2018	13/07/2019

▼ Policy Information

Policy No.	5082237371-02	Policyholder Name	TAN KOK HAN, ANDY (CHEN GUI	Policyholder NRIC	S8102993H
Certificate No.					
Address	27 PASIR RIS GROVE #08-50 COCO PALMS SINGAPORE 518073				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	19/06/2018	Effective Date	14/07/2018 00:00	Expiry Date	13/07/2019 23:59
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0		
Agent	VINCAR PTE LTD	Agent Tel.	64741119	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	27 PASIR RIS GROVE	Address 2	#08-50 COCO PALMS	Address 3	SINGAPORE 518073
Address 4		Address Type	Singapore address	Post Code	518073
Unit No.		Related Policy Number	5082237371-02		

► Insured Object: SLE2576Z

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

Claim Handling

Accident MT/1014603

Policy No.	5082237371-02	Vehicle No.	SLE2576Z	GST Registration No.	
Certificate No.					
Policyholder Name	TAN KOK HAN, ANDY (CHEN GUOHAN, ANDY)	Cover Type	drive CLASSIC	Policyholder NRIC	S810
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	83220107	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	50	eCode Reason	
NCD Protection	Yes			Private Hire	No

Accident Details

Report Date	08/10/2018 10:07	Accident Report Within 24 hrs	Yes	Accident Type	Side
Date of Accident	06/10/2018	Time of Accident hh:mm	13:10	Country of Accident	Singa
Reporting Centre		Orange Force		ICM No.	
Accident Location	300 CHIAT TERRACE TWDS MANGIS ROAD				

Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.0
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	27 PASIR RIS GROVE	Address 2	#08-50 COCO PALMS	Address 3	SING
Address 4		Address Type	Singapore address	Post Code	5180
Unit No.		Related Policy Number	5082237371-02		

OI Driver Info

Driver Name	TAN KOK HAN ANDY	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S8102993H	Driver DOB	29/0
Register Date of Driver License	25/03/2008	Driver Age	37	Driving Experience	10
Contact No.(Mobile)	83220107	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	27 PASIR RIS GROVE	Address 2		Address 3	
Address 4		Address Type	Singapore address	Post Code	5180
Unit No.	#08-50				
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

Claim 001 OD-MX New

Claim Type *	OD-MX	Insured Name	TAN KOK HAN, ANDY (CHEN GU	Insured NRIC	S810
Contact No.(Mobile)	83220107	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SLE2576Z	TP Vehicle Number	SLK9
Claim Description	SLE2576Z / SLK9180D ON 6 Oct 2018	Name of Preferred Workshop			
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault	GIA report	Rece
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	08/10
Date Registered	08/10/2018 10:13	Claim Close Date		Total Loss but Repaired	
Report Taken By	KRISHNASAMY	Workshop Repairer			

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/1014603	Claim No.	001
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Last Doc. Received

☒ Yes ☐ No

Upload Date

08/10/2018 10:15

Path *

Category *

Confidential

Urgency *

<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>
<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>
<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>
<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>
<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>
<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>

Message Read

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:13	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:12	SAS	Normal	SAS 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:11	Photos	Normal	Photos 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:11	Photos	Normal	Photos 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:11	Photos	Normal	Photos 2018-10-8
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:11	Photos	Normal	Photos 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:10	Photos	Normal	Photos 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:10	Photos	Normal	Photos 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:10	Photos	Normal	Photos 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:10	Photos	Normal	Photos 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:10	Photos	Normal	Photos 2018-10-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 08 Oct 2018 10:10	Photos	Normal	Photos 2018-10-8

Video List

Uploaded By/Date	Folder Date	File Name	Source
<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>			