

NATIONAL Assessment Centre Services <small>(wef 1 Jan 2005)</small> <span style="float:right">MANA 481280K</span>			
Date In: 03/10/2008 10:02	Job description	Date & Time Completed	Done by
Ref No: N30/CT118018176/Y	SAS e-filing		
Veh No: GBF 3639F	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 01/10/2008 10:00	i-Motor Claim Form		
OD / TP: <u>Reporting Only</u>	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: GBF 4153E	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		
<div style="font-size: 1.5em; font-weight: bold; margin-bottom: 10px;">NA1806424</div> Claimant's Particulars:-		<b>Invoice Preparation Checklist</b>	
Driver/Owner:		1) AR: Accident Reporting (\$30);	Amt (\$) 1st Bill
Contact No:		2) DA: Damage Assessment (\$100); INC (\$80)	Amt (\$) Add Bill
Damaged Portion:		3) TF: Towing Fee \$40/\$45	
QC Checked by (Engr-In-Charge):		4) FT: Follow-Through Survey \$120	
Auditors' Comments:-		5) FT: Follow-Through Survey (Resurvey) \$30	
Date 1:		For claiming against INC Only (wef 10 Jan 2005)	
Date 2 / 3:		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	
		TP (N11): TP (N-in INC) against INC \$20	
		9) N12: Idac Mobile \$0	
		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	03/10/2018 10:02
Date Of Accident	01/10/2018 10:00
Exact Location Of Accident	ALONG JALAN BUKIT MERAH OUTSIDE CALTEX STATION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF3639F
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NG KOK KHIM
NRIC No	S1608809I
Email Address	CKLIM188@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97745556
Alternative Phone No	OTHERS-97745556

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1663301802
Cover Note Number	

### Driver

Name of Driver	NG KOK KHIM
NRIC No	S1608809I
Date Of Birth	15/03/1963
Occupation	INDOOR
Date Of Driving Pass	28/05/1983
Driving Experience	35 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97745556
Fax Number	
Contact Number	OTHERS-97745556
Email Address	CKLIM188@GMAIL.COM



Address	33 WEST COAST ROAD #08-24
Postcode	127476
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH WEST NPC
Police Station Address	ROAD: 500 BUKIT MERAH VIEW #01-01 , POSTCODE: 159682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20181001/2146

#### 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	GBG4153E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MUHAMMAD SYAAFUDDIN BIN ABDUL SAMAD
NRIC/Passport Number	S9036923G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

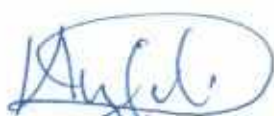
## SKETCH PLAN

### 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.:



Diagram illustrating a traffic intersection scenario. A horizontal road (Jalan Bukit Merah) has a queue of vehicles (car1, car2, car3, B, A) stopped at a traffic light. A vertical road (Bukit Merah Central) intersects it. A Caltex station is located near the intersection. The license plate options are:

- A) GBF 3639H
- B) GRG 4153 E

1. On 01/10/2018 at about 10.00 hrs, I was driving lorry A stop at traffic junction of Jalan Bukit Merah and Bukit Merah central as showed in the map.
2. My lorry A was at stop position. Estimate 6 to 7 vehicle away from the red light traffic junction.
3. All sudden, my lorry A moved in front and slightly knock the front Van B. as showed in the map.
4. Lorry A number : GBF 3639H.  
Lorry Van B number : G8G 4153E.
5. I have notice CCTV Cameras on the catter petrol station. Hope it can help to witness the unfortunate accident.

Российский отчет T/2018/001/2146

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

Kishi

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

*[Signature]*

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



Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999

Report No. T/20181001/2146

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/10/2018 18:37	Vide Report No.:	Station Diary No.: 45
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## Informant's Particulars

Name of Informant: NG KOK KHIM	Address: 33 WEST COAST RISE #08-24 SINGAPORE 127476		
ID Type / ID No.: NRIC NO / S16088091	Contact No.: Home/Office: Mobile: 97745556		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 55	Date of Birth: 15/03/1963	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: Fishmonger	Driving Licence Information: Class: Date of Expiry:		

## General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 01/10/2018 10:00	Type of Location: Straight Road
Location: Along Road 1 JALAN BUKIT MERAH				
Traffic light located outside of Caltex				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF3639H	Lorry	TOYOTA	DYNA 3.0 MANUAL	Silver	Slightly Damaged	0
GBG4153E	Van				Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GBF3639H	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMCVSN16633018 02	19/09/2018	14/09/2019





Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NG KOK KHIM	ID No.	S1608809I
Related Vehicle	GBF3639H (Lorry)	Contact No.	97745556
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Name	MUHAMMAD SYAAFUDDIN BIN ABDUL SAMAD	ID No.	S9036923G
Related Vehicle	GBG4153E (Van)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 01/10/2018 at about 1000hrs, I was driving my lorry (GBF3639H) along Jalan Bukit Merah towards Alexandra Road. I was driving at the 3rd lane of the said road. I was looking at my delivery order with regards to the location I will be heading to. When I put the said delivery order aside, suddenly, I noticed that there is a yellow coloured van (GBG4153E) that was stopped at the traffic light located outside of Caltex. Subsequently, I applied my brake however my vehicle could not stop in time. As a result, the head of my lorry collided to the rear of the said mentioned van (GBG4153E). After the accident, I went out of my vehicle to make a check on the damages. I discovered that there is a minor dent at the front of my lorry number plate area. I also noticed that there is a minor dent at the rear of the said van (GBG4153E). I wish to add that ambulance was activated and the driver of the mentioned van was conveyed to hospital for treatment.





**SINGAPORE  
POLICE FORCE**



T/20181001/2146

Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999

3 of 3

Report No. T/20181001/2146

**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:

D /

Sgt 1 PHOON KOK WAI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

01/10/2018 18:37

Officer In Charge Of Case:

TP / AEIT /

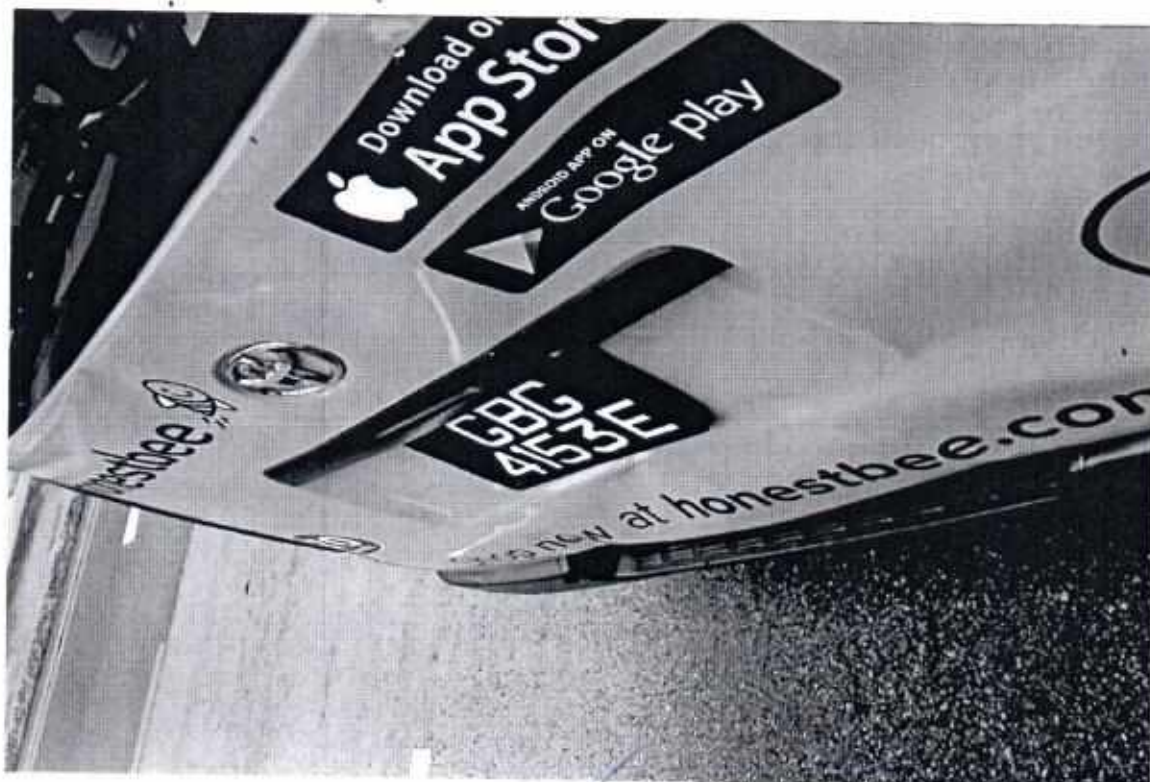
SSI 2 SITIMARSITA BINTE BOHARI

Contact No.: 65476219

Classification Of Case:

Authentication Stamp

NP168



*08/01/2018  
Rosa L. Watson*



DRIVER'S LICENSE

## ACCIDENT STATEMENT

ACCIDENT DATE: 01/10/2008 (DD/MM/YYYY), TIME: 10:00 (HH:MM)  
LOCATION: Jalan Bukit Merah Road (Near Library)

### 1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: GBF 3639H  
b) INSURANCE COMPANY: China Taiping Insurance Pte Ltd.  
c) POLICY NUMBER: \_\_\_\_\_  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: Toyota (Dyna 2.0 Manual)  
f) TYPE: (SALOON / COUPE / MPV / VAN (LORRY) / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: Transportation  
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: Ng Kok Khim (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S'6088091 CONTACT: 97745556  
c) ADDRESS: 33 West Coast Rise #08-24  
Singapore 127476

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No. of passengers  
(including driver)  
( )

DRIVER  
a) NAME: \_\_\_\_\_ (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\*d) DATE OF BIRTH: 15/03/1962 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 25 years

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

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: Bukit Merah West NPC

### 8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: CBG 4153E MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: Muhammad Syafuddin Bin ABDUL SAMAD  
c) NRIC/FIN/PASSPORT: S9036923G CONTACT: \_\_\_\_\_

### 9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

EMAIL =

VIDEO =

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1608809I



Name

NG KOK KHIM

黄国钦

Race

CHINESE

Date of birth

15-03-1963

Sex

M

Country of birth

SINGAPORE

S1608809I

4840330



NRIC No. S1608809I

Date of issue

25-02-2013

Address

33 WEST COAST RISE  
#08-24  
SINGAPORE 127476



REPUBLIC OF SINGAPORE DRIVING LICENCE

016088091

NG KOK KHIM

Birth Date: 15 Mar 1963  
Issue Date: 19 Nov 2003

001010102J



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	19 Mar 1981
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	28 May 1983
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	24 Jun 1997

27

NP 420A

Licence No: 51000001



MOTOR COMMERCIAL VEHICLE

**CERTIFICATE OF INSURANCE**Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

PLM 319379

ORIGINAL

CERTIFICATE No.

DMCVSN1663301802

Engine No : 1KD2609673

ChasNo: KDY2318024576

1. Index Mark and Registration  
Number of Vehicle

GBF3639H

2. Name of Policy Holder

MR NG KOK KHIM

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment19 September 2018 Excess Sect I ..... S\$900.00  
(16:30 Hours) EX ON WINDSCREEN ..... S\$100.00

4. Date of Expiry of Insurance

14 September 2019

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 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.

HIRE PURCHASE CO. : MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD

\* 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.

Issued By:

Authorised Officer

Authorised Signatory