

NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

MAA48732528

Date In: 15/10/2008 11:54	Job description	Date & Time Completed	Done by
Ref No: NBA/MC/8618615/V	SAS e-filing		
Veh No: 9V 1619 U	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 12/10/2008 19:15	i-Motor Claim Form	MT10/5010-001	15/10/2008 12:19
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: SMA 7852C

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

MAA86627

Invoice Preparation Checklist

Am't (\$)

Am't (\$)

1st Bill

Add Bill

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Ref. 1:

Ref. 2 / 3:

- 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 \$0

Invoice dated

Fee Charged

Invoice dated

Fee Charged

MAA86627

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	15/10/2018 11:54
Date Of Accident	12/10/2018 19:15
Exact Location Of Accident	ALONG BALESTIER ROAD TOWARDS SERANGOON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY1619U
Insured/Policyholder	
Name Of Registered Owner	HOME CLEANZ CLEANING & LAUNDRY SERVICES PTE. LTD.
Co Reg No	201130544H
Email Address	RYKPANG@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96818208
Alternative Phone No	OFFICE-96818208

Vehicle Particulars

Manufacturer	NISSAN
Model	URVAN
Exact Purpose for which vehicle was being used at time of accident	GOING BACK HOME FROM WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5053322165-06
Cover Note Number	

Driver

Name of Driver	PANG YUK KWEI RICHARD
NRIC No	S0154880H
Date Of Birth	22/11/1953
Occupation	INDOOR
Date Of Driving Pass	22/06/1975
Driving Experience	43 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96818208
Fax Number	
Contact Number	OTHERS-96818208
Email Address	RYKPANG@YAHOO.COM

Address	BLK 476 ANG MO KIO AVENUE 10 #11-816
Postcode	560476
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	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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)	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

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	SMA7852C ✓
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	S7028675J
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.

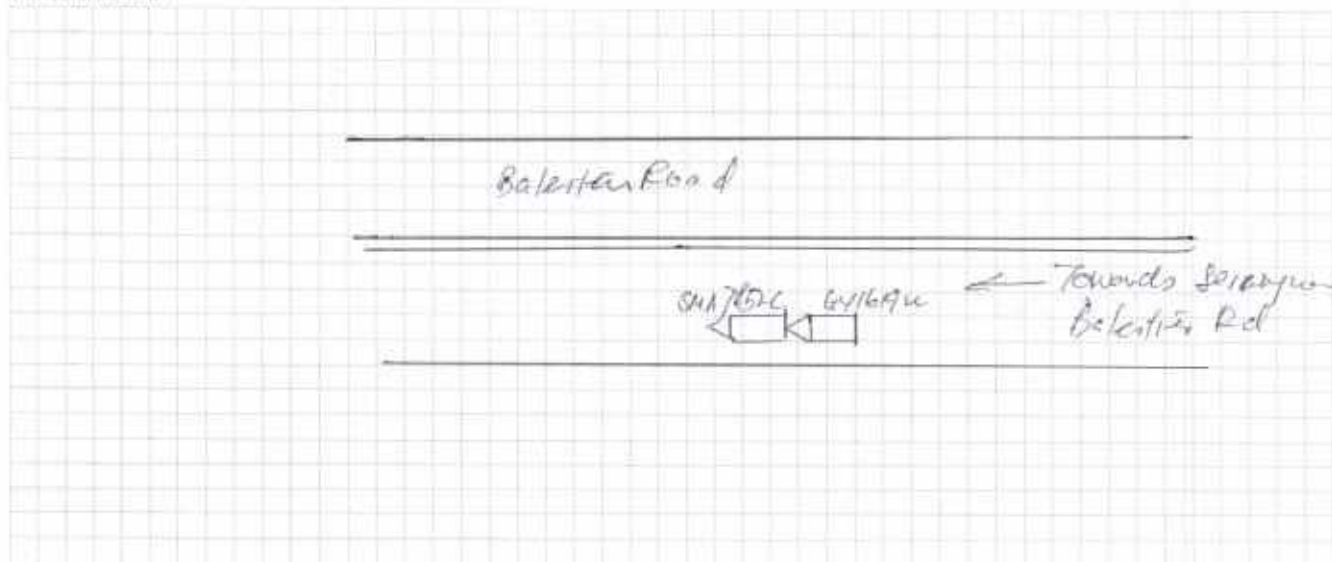
Policyholder's Signature
Date & Time:

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



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 12-10-2018 (Friday), around 19:17hrs, while driving along Balartan road towards Serangoon Road, front vehicle, Nissan (Red) Reg No SUA 7852C, suddenly stepped on his brake. Upon noticing it, I applied my brake too, but, due to heavy raining, my vehicle G4169W still slid towards SUA 7852C and slightly hit the rear of his vehicle. Photos were taken to show no serious damage to vehicle SUA 7852C.

Both parties exchanged particulars and left immediately, to avoid traffic jam to other users.

That's all

Thy Jey L

Rickard Pong Yuh Kwei

S0157880H

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:

NRIC/FIN No.:



15/10/2018
Roshni Kishor

Claim Handling

Accident MT/1015610

Policy No.	9051292165-06	Vehicle No.	QY1619U	GST Registration No.	201130544H
Certificate No.					
Policyholder Name	HOME CLEANZ CLEANING & LAUNDRY SERVICES PTE. LTD.	Policyholder NRIC		201130544H	
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Third Party, Fire & Theft	Leading	0
Contact No.(Mobile)	96818208	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	No *
HPK	- No Yes	TGA	- No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	15	Private Hire	No
Accident Details					
Report Date	15/10/2018 12:13	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	15/10/2018	Time of Accident hh:mm	19:20	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG BALESTIER ROAD TOWARDS SERANGOON ROAD				
Excess					
Own Damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			
Benefits					
GST Registered Information					
GST Registered	Yes	GST Registration Date	01/01/2012		
GST Registration No.	201130544H	GST Status Verified	Yes		
Modification History					
Policyholder Mailing Address					
Address 1	7 JALAN SAUDARA KU	Address 2	SEASIDE PARK	Address 3	SINGAPORE 457444
Address 4		Address Type	Singapore address	Post Code	457444
Unit No.		Related Policy Number	5104197216		
OT Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	PANG YUK KWEE RICHARD	Driver NRIC	S0154880H	Driver DOB	22/11/1953
Register Date of Driver License	22/06/1979	Driver Age	64	Driving Experience	41
Contact No.(Mobile)	96818208	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 476 #11-816	Address 2	ANG MO KIO AVENUE 10	Address 3	TECK GHEE HORL20N
Address 4	SINGAPORE 560476	Address Type	Foreign address	Post Code	560476
Unit No.	11-816				
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	QY1619U	Driver Insurer Company	NTUC
Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes - No		
Modification History					

Claim 001

New

Claim Type *	OD-MX	Insured Name	HOME CLEANZ CLEANING & LAUNDRY	Insured NRIC	201130544H
Contact No.(Mobile)	97970682	Contact No. (Home)		Contact No. (Office)	84406
Email Address	PHUJIMUN@HOMECLEANZ.COM	OT Vehicle Number	QY1619U	TP Vehicle Number	SMA78
Claim Description	QY1619U / SMA7832C ON 13 Oct 2018				
Preferred Workshop	Insured Liability	Fully at Fault	GIA report	Received	
Workshop No. Finalisation	Yes	Preferred Workshop Name unknown			
Date Registered	15/10/2018 12:19	Claim Close Date		Date Received	15/10/2018
Report Taken By	ROSLI WAHAB				
Print AK letter					
Save Submit					

Attachment

Accident No.	HT/1015610	Claim No.	001		
Last Doc. Received	Yes No	Upload Date	15/10/2018 12:19		
Path *					
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					
Attachment List					
Attachment	Uploaded By/Date	Category	Urgency	Description	Hi
NAC_BUKIT_MERAH_000576(NATIONAL ASSESSMENT CENTRE SERVICE S.(BUKIT MERAH)) on 15 Oct 2018 12:19		Photos	Normal	Photos 2018-10-15	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	Photos	Normal	Photos 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	SAS	Normal	SAS 2018-10-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Oct 2018 12:19	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-10-15

Video List

Uploaded By/Date	Folder Date	File Name	Source
		Display in New Window	Scan and uploading

rsbm

From: rsbm <rsbm@lkkauto.com>
Sent: Thursday, 25 October, 2018 5:45 PM
To: 'Theresa Vimala D/O Balagangadharan'
Subject: MT/1015610-001 GY1619U

Hi Theresa the above mention date of accident date should be 12/10/2018 instead of 13/10/2018 type wrongly in the ebao thanks.

Thanks & Best Regards,
ROSLI WAHAB
NACS Bukit Merah
Tel: 6898 0055
Fax: 6271 8802
Email: rsbm@lkkauto.com

ACCIDENT STATEMENT

ACCIDENT DATE: 12 / 10 / 2018 (DD/MM/YYYY), TIME: 19 : 17 (HH:MM)

LOCATION: Along Balestex Road, near Gifford Mansion

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GY1619 U
 b) INSURANCE COMPANY: Nine Income
 c) POLICY NUMBER: 6053322165-06
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: NISSAN URVAN
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: A friend taking home A/F work
 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: Hornikhanz Cherting Khoudy Service PL (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: 5 Jalan Sandana Km

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Ang Yuckwei Richard (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 50548804 CONTACT: 9881 8208
 c) ADDRESS: At 476 Ang Mo Kio Ave 10 # 11-816
51560426

* d) DATE OF BIRTH: 22 / 11 / 1983 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: as above

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 RAINING)
 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: SMA 7852 C MODEL: NISSAN
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: 57028674 J CONTACT: Ken

9. THIRD PARTY VEHICLE

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

EMAIL = rykpong@yahoo.com

VIDEO = NIL

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0154880H



PANG YUK KWEI RICHARD

彭一貴
Place

CHINESE
Date of Birth 22-11-1953
Country of Birth SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S0154880H

Name PANG YUK KWEI RICHARD

Birth Date 22 Nov 1953
Issue Date 12 Apr 2001





AD288264



AD288264



AD288264

15-10-2002

Address
APT BLK 475 ANG MO KIO AVENUE 10
#11-815
SINGAPORE 560475

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS:

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE 22 Jun 1975

Licence No. S0154880H




NO 428A

Hello, NAC_BUKIT_MERAH_800676

[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="12/10/2018 10:16"/>
Vehicle No. (For Motor)	<input type="text" value="GY1619U"/>	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"/>	5053322165-06		HOME CLEANZ CLEANING & LAUNDRY SERVICES PTE. LTD.	201130544H	GCV	Third Party, Fire & Theft	GY1619U	GY1619U	13/01/2018	12/01/2019