

NATIONAL Assessment Centre Services. (1911 2000)

Date In: 19/10/2018 10:55	Job description	Date & Time Completed	Done by
Ref No: NBA/LPC18019007/14	SAS e-liling		
Vel No: SLA 668 B	E-mail (withina shra, AIC shra)		
D.O.A: 19/10/2018 07:45	1-Motor Claim Form		
OD: TP / Reporting Only	1-Motor W/O (withina shra, TP shra)		
	1-Photo Uploaded		
TP Insureh:	Assessment/Survey Report		
	Ass'l Report by Fax/Hand to Owner/VKsp		

Preferred Wksp / INC Assign Wksp / OW: (		Tel: ( )		Fax: ( )	
TP Particulars: (	Yell No: SH9329B	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: 30-100%)				
Year of Registration: (	Warranty: YES ( ) / NO ( )				
Excess: (\$ )	Loading: \$1,000 ( ) / \$2,000 ( )				

General Rem: ( ) Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repeller.  
( ) Total Loss Case: to e-mail Insurer URGENTLY.  
Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

Remarks	DATE	Time	Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )				
2) QC Check / Post Repair Inspection ( )				
3) Upload Repair Photo (Repair Cost > \$3000) ( )				

Injury: \_\_\_\_\_

[illegible]

NA1806710		Invoice Preparation Charge (\$)	
Client's Particulars:	1) AR: Accident Report/ing (\$50):		
Driver/Owner:	2) DA: Damage Assessment (\$100): INC (\$50)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) PT: Follow Through Survey \$150		
	5) XT: Follow-Through Survey (Re-survey) \$50		
	For following services INC Only (wef 10 Jan 2009)		
	6) TR: Re-labouration \$75		
	7) NI: In DA + SMART Survey \$160		
	8) NTUC Additional Services:		
	Q11:		
Checked by (Engr-In-Charge):	*NI: Courtesy Car / Tpl Allowance \$5		
	*NI: Repairs Coordination \$10		
	*NI: Post Repair Inspection \$25		
	*NI: DY / Collect Unassd Coordination \$5		
	TZ (NI) / TP (In INC) against INC \$70		
	9) NI: Idn Mobile \$0		
7/3:	Invoice done	(Not Charged)	
	Insurance paid	Not 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	19/10/2018 10:55
Date Of Accident	19/10/2018 07:45
Exact Location Of Accident	CLEMENCEAU AVE NORTH
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLA668B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHAN WOEI SHYONG
NRIC No	S7018910J
Email Address	CWSHYONG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90121230
Alternative Phone No	OTHERS-90121230
<b>Vehicle Particulars</b>	
Manufacturer	MERCEDES-BENZ
Model	-
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
<b>Insurance Company</b>	
Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VP05018850
Cover Note Number	
<b>Driver</b>	
Name of Driver	CHAN WOEI SHYONG
NRIC No	S7018910J
Date Of Birth	06/06/1970
Occupation	INDOOR
Date Of Driving Pass	25/09/1992
Driving Experience	26 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90121230
Fax Number	
Contact Number	OTHERS-90121230
Email Address	CWSHYONG@GMAIL.COM

Address	71 JALAN CHENGAM
Postcode	578354
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	RAINING
Road Surface	WET

#### 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?	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	SH9329B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	GOH KWEE SENG
NRIC/Passport Number	S0362898A
Contact Number	90056615
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



Reported on 19/10/2018 @ 1015 AM

# ACCIDENT STATEMENT

ACCIDENT DATE: 19/10/2018 (DD/MM/YYYY), TIME: 07.45 AM (HH:MM)

LOCATION: Winstedt Road Clementine Ave North

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLA668B  
b) INSURANCE COMPANY:  
c) POLICY NUMBER:  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL:  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME:  
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: (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: CONTACT: 9012 1230  
c) ADDRESS:

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

### DRIVER

- a) NAME: (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: CONTACT: 9012 1230  
c) ADDRESS:

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

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

## 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) OWNER

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:

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SH9329B MODEL:  
b) DRIVER'S NAME: GOH KWEE SENG  
c) NRIC/FIN/PASSPORT: S0362898A CONTACT: 90056615

## 9. THIRD PARTY VEHICLE

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

No of passengers  
(Including driver)  
(1)

No of passenger  
(Including driver)  
( )

No of passenger  
(Including driver)  
( )

email = cwshyang@gmail.com

fax = cwshyang@gmail.com  
VIDEO

Waiting for LPI Certificate?




## SKETCH PLAN


### IMPORTANT NOTICE


1. Please report **correctly** the details of the accident to speed up the claims process.
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5. **Any false reporting may be referred to the Police for investigation.**
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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:

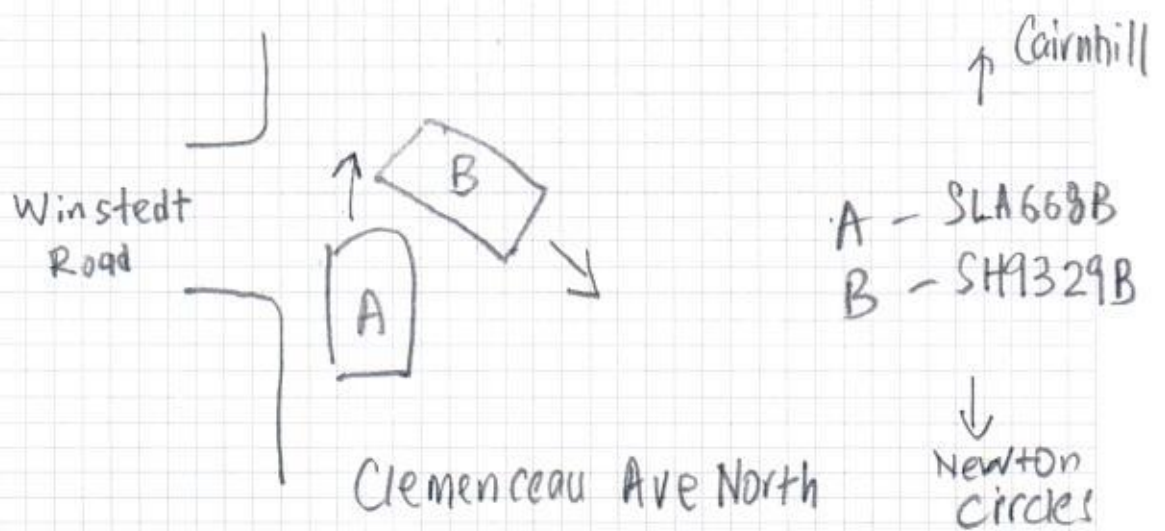
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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.:

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Car A was driving along Clemenceau Ave North towards Cairnhill.  
Car B came out from Winstedt Road.  
Car A did not manage to slow down in time and banged into rear side of car B.  
Car A has damage on front right bumper  
Car B has damage on back-right wheel.

## 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.: \_\_\_\_\_



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7018910J



Name  
CHAN WOEI SHYONG

陈伟雄

Race

CHINESE

Date of Birth

06-06-1970

Sex

M

Country of Birth

SINGAPORE

0385546



NRIC No. S7018910J



Blood Group

B+

Date of issue

16-06-1992

71 JALAN CHENGAM  
SINGAPORE 578354

NRIC No: S7018910J

Date: 05/09/2010

No: 6451493

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S7018910J

Name  
CHAN WOEI SHYONG

Birth Date 06 Jun 1970

Issue Date 09 Apr 2003



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

Class 2B Motorcycles not exceeding 200 cc  
Class 2A Motorcycles between 201 cc and 400 cc  
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

07 Jan 1992  
17 Mar 1993  
25 Sep 1992



NP 428A



**LONPAC INSURANCE BHD** (S98FC5635C)

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 199555.

Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-C

MX1

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE.  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE).  
ROAD TRANSPORT ACT 1987 (MALAYSIA).  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No. : Z18VP05018850

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

MERCEDES-BENZ E200 (R18) 2.0 (A)  
- SLA668B

2. Name of Policy Holder

CHAN WOEE SHYONG

3. Effective Date of the Commencement of Insurance  
for the purpose of the Act

22/06/2018

4. Date of Expiry of the Insurance

21/06/2019

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/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

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

Excess : S\$ 0.00 (SECTION 1) INSURED / NAMED DRIVERS

S\$ 1,000.00 (SECTION 1) UNNAMED DRIVERS

S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS

S\$ 100.00 WINDSCREEN EXCESS

LONPAC'S AUTHORISED WORKSHOPS

Condition : ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS OR DISTRIBUTOR-OWNED MOTOR WORKSHOP

\* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

CHIEF EXECUTIVE  
(Singapore Branch)

User ID: BRYANHIO

Date Issued: 05/06/2018