

NATIONAL Assessment Centre Services: [wef 1 Jan'05] MNA 11F13P251

Date In: 24/10/18 15:13	Job description	Date & Time Completed	Done by
Ref No: WA1 C72 18019348/44	SAS e-filing		
Veh No: SFR 1313 A	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 23/10/18 19:35	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: GBF 811X 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
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

WA1806824

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Invoice Preparation Checklist	Am't (\$)	Am't (\$)
Inc Bill		Add Bill
1) AR: Accident Reporting (\$30);	30.00	
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:-		
QD*		
*N5: Courtesy Car / Tpl Allowance \$5		
*N6: Repair Co-ordination \$10		
*N7: Post Repair Inspection \$25		
*N8: DV / Collect Excess Coordination \$5		
TP (N11): TP (N-on INC) against INC \$20		
9) N12: Idac Mobile 30		
Invoice dated	Fee Charged	
Invoice dated	Fee Charged	

Auditors' Comments:

Sat. 1:

Sat. 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	24/10/2018 15:13
Date Of Accident	23/10/2018 19:35
Exact Location Of Accident	SELETAR WEST LINK TWDS SELETAR NORTH LINK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFR1313A
Insured/Policyholder	
Name Of Registered Owner	MR TAN HONG HUAT
NRIC No	S6901313I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97954707
Alternative Phone No	OFFICE-97954707

Vehicle Particulars

Manufacturer	NISSAN
Model	LATIO
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3041211706
Cover Note Number	-

Driver

Name of Driver	MR TAN HONG HUAT
NRIC No	S6901313I
Date Of Birth	17/01/1969
Occupation	INDOOR
Date Of Driving Pass	16/05/1994
Driving Experience	24 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97954707
Fax Number	
Contact Number	OFFICE-97954707
EMail Address	NOEMAIL

Address	BLK 407 SEMBAWANG DR #08-816
Postcode	750407
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 - CHANGE/CROSS LANE
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)	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 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	GBF811X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
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.:

Sector West link

Vehicle 'A': SR1313A
Vehicle 'B': GBF811X

The diagram shows a road layout with a vertical dashed line labeled 'Sector West link'. To the right of this line, there is a solid line labeled 'A' and a dashed line labeled 'B'. A solid line labeled 'A' is shown moving from the bottom towards the top, and a dashed line labeled 'B' is shown moving from the top towards the bottom. The vehicles are labeled 'A' and 'B' respectively.

On the stated date and time, I vehicle A was travelling straight on the stated venue. Suddany vehicle B swerved and cut into my lane, resulting in a collision.

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

ACCIDENT STATEMENT

ACCIDENT DATE: 23 / 10 / 2018 (DD/MM/YYYY), TIME: 19 : 35 (HH:MM)

LOCATION: Sektor West link towards Sektor North link

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SFR 1313 A
b) INSURANCE COMPANY: China Taiping Insurance (Singapore) PTE LTD
c) POLICY NUMBER: DMPSTN 30412 11706
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY) / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: Nissan Latio
f) TYPE: (SALOON) / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS
g) VEHICLE CATEGORY: (PRIVATE) / COMMERCIAL / MOTORCYCLE
h) PURPOSE OF USING AT ACCIDENT TIME: Private
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: Tan Hong Huat (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S6401313 I CONTACT: 9795 4707
c) ADDRESS: Blk 407 Sembawang Drive #08-816 (S) 750407

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Tan Hong Huat (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S6901313 I CONTACT: 9795 4707
c) ADDRESS: Blk 407 Sembawang Drive #08-816 (S) 750407

* d) DATE OF BIRTH: 17 / 01 / 1969 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR) / OUTDOOR

f) YEARS OF DRIVING EXPERIENCE: 24 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: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBF 811 X MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

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

* No of passenger
(including driver)
()

* No of passenger
(including driver)
()

* No of passenger
(including driver)
()

Email = ric0604440services@gmail.com

Fax = 6286 7060

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S69013131

Name

TAN HONG HUAT

陈 鸿 发

Race

CHINESE

Date of Birth

17-01-1969

Country of Birth

SINGAPORE

Sex

M



1017575



NRIC No: S69013131



Blood Group Date of Issue

O+

10-06-1993

APT BLK 407 SEMBAWANG DRIVE #08-816
SINGAPORE 750407

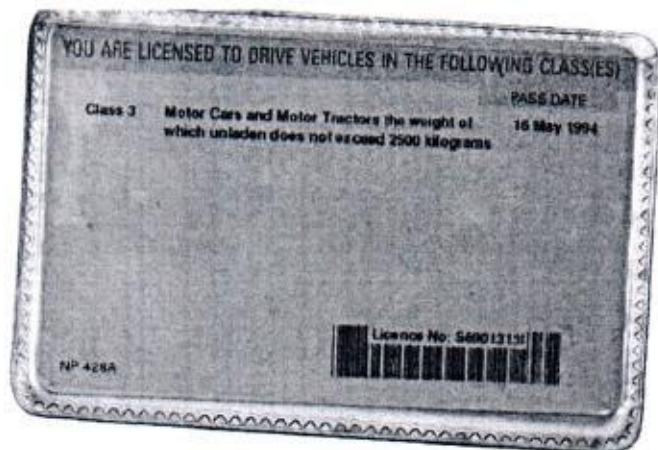
IC No:

S69013131

Date:

11/12/1999 (R)





CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1950
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	CMPCSN3041211706	Engine No :HR15116601B Chassis No:JN1BAAC1120021619
1. Index Mark and Registration Number of Vehicle	SFR1313A	
2. Name of Policy Holder	MR TAN RONG HUAT	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	17 DECEMBER 2017	NAMED DRIVERS EX SECT. I\$5500.00 ADDITIONAL EX OTHER THAN NAMED DRIVERS: EX SECT. I - AGE <= 25.....\$3,000.00 EX SECT. I - AGE >= 26.....\$5500.00 * AGE AS AT DATE OF ACCIDENT EX ON WINDSCREEN\$5100.00
4. Date of Expiry of Insurance	16 DECEMBER 2018	
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: *

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

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS/THEFT) WILL BE DOUBLED.
ONE TIME WAIVER OF EXCESS FOR THE FIRST \$91,000 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

HIRE PURCHASE CO. : HONG LEONG FINANCE LTD AS HP 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

ITRUST PTE LTD

52 FOCH ROAD

#03-02

SINGAPORE 209274

TEL: 6488 0883 FAX: 6286 0295

EMAIL:itrust@singnet.com.sg

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:

Authorised Officer

Authorised Signatory