

NATIONAL Assessment Centre Services (with 1/2/2005)

MNA48735093

Date In: 26/11/2018 11:33	Job description	Date & Time Completed	Done by
Ref No: NBD/407/1801950314	S&S e-illing		
Veh No: SKP 9716U	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 28/10/2018 07.05	e-Motor Claim Form		
OD / TP <u>Reporting Only</u>	e-Motor W/O (within 24 hrs, TP 2hrs)		
	Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW: () Tel: () Fax: ()

TP Particulars: Yeh No: SKP 9716U, 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	Date Time Completed	Done by
1) Apply for Transition Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo (Repair Cost > \$3000) ()		

Injury: _____

Date/Time	Action

MNA06950

Item/Particulars	Invoice Preparation/Checklist	Amount	Amount
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100) INC (\$50)		
Damaged Portion:	3) TP: Towing Fee \$40/\$40		
C. Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$150		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	6) TR: Re-Inspection \$75		
	7) NI: 140 DA + SMRT Survey \$160		
	8) NTUC Additional Services		
	9) NI: 140 DA + SMRT Survey \$160		
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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	26/10/2018 11:33
Date Of Accident	25/10/2018 07:05
Exact Location Of Accident	KPE TOWARDS CITY BEFORE AIRPORT ROAD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP9716U
Insured/Policyholder	
Name Of Registered Owner	TEH KIM JUN, KEVIN
NRIC No	S8852118H
Email Address	KEVINTKJ@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93691339
Alternative Phone No	OTHERS-93691339

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	GOLF
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DHOM110153711601
Cover Note Number	

Driver

Name of Driver	TEH KIM JUN, KEVIN
NRIC No	S8852118H
Date Of Birth	14/12/1988
Occupation	INDOOR
Date Of Driving Pass	23/09/2008
Driving Experience	10 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93691339
Fax Number	
Contact Number	OTHERS-93691339
EMail Address	KEVINTKJ@GMAIL.COM

Address	BLK 293D COMPASSVALE CRESCENT #14-27
Postcode	544293
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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

I WAS DRIVING ALONG KPE TOWARDS CITY JUST AT THE START OF THE TUNNEL BEFORE AIRPORT ROAD EXIT WITHIN THE SPEED LIMIT OF 80KM/HR. THE CAR IN FRONT OF ME BRAKE SUDDENLY, I STEPPED ON THE BRAKE AND DID NOT CONTACT THE CAR INFRONT. I THEN FELT IMPACT ON THE REAR OF MY CAR AND MY CAR MOVED FORWARD FOR APPROXIMATELY 1 METER. I WAS HIT IN THE REAR BY A NISSAN SKT842B, THERE WAS A THIRD CAR BLACK MERCEDES BENZ SLD2244L BEHIND THE CAR THAT HIT MY CAR. THERE WAS NO INJURY SUSTAINED BY ALL PARTIES AND ALL VEHICLES WERE STILL OPERATE AFTER THE ACCIDENT.

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	SKT842B
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YEOH HENG BOON ,COLLIN
NRIC/Passport Number	S8215088I
Contact Number	97848182
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLD2244L

Vehicle Make/Model/Colour

MERCEDES BENZ (BLACK)

Details Of Properties

Vehicle Category

PRIVATE CAR

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.


Teh Kim Jun Kevin

Policyholder's Signature

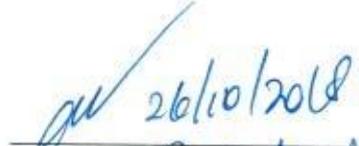
Date & Time:

26/10/18 9:29am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

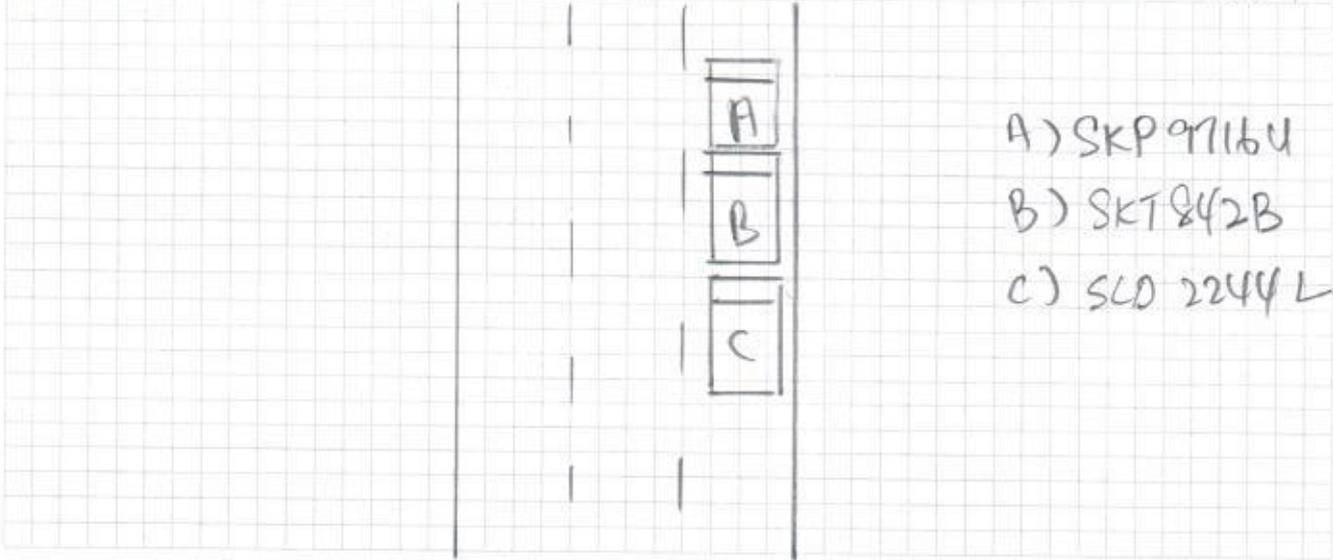

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No. 

SKETCH PLAN

KPE TOWARDS CITY / BEFORE AIRPORT ROAD EXIT



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

(Before airport road)

towards city, just at the start of the tunnel.
 I was driving along the KPE within the speed limit of 80km/h.
 The car in front of me braked suddenly.
 I stepped on the brake and did not contact the car in front.
 I then felt impact on the rear bumper of my car and
 my car moved forward for approximately 1m.
 I was hit in the rear by a Nissan SKT 842B.
 There was a third car behind the car that hit me, further behind,
 which was a black Mercedes SLD 2244L.
 There was no injury sustained by all parties, and
 all vehicles were still operable after the
 accident.

DECLARATION

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

[Signature]
 Ten Kim Sun, Kevin

Policyholder's Signature
 Date & Time: 26/10/18 9:29am

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

[Signature] 26/10/2018
 Reporting Centre Personnel's Signature
 Name: *[Signature]*
 NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: (25 / 10 / 2018) (DD/MM/YYYY), TIME: (07.04) (HH:MM)

LOCATION: KPE TOWARD CITY BRIFOR AIRPORT ROAD EAST.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKP 9716U
- b) INSURANCE COMPANY: UCI
- c) POLICY NUMBER: PHOUM 153711601
- d) POLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE & THEFT
- e) MAKE & MODEL: Volkswagen Golf
- f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
- g) VEHICLE CATEGORY: (PRIVATE) COMMERCIAL / MOTORCYCLE
- h) PURPOSE OF USING AT ACCIDENT TIME: Private usage
- 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: Teh Kim Jun Kevin (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: S8852184 CONTACT: 93691339
- c) ADDRESS: 293D Compassate Circuit #14-27 S844293

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

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

*d) DATE OF BIRTH: (14 / 12 / 1988) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

i) DATE OF DRIVING PASS: 23/9/2008

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: self owner

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: SKT 842B MODEL: Nissan

b) DRIVER'S NAME: Teoh Hong Boon Colin

c) NRIC/FIN/PASSPORT: S82150881 CONTACT: 97848182

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: UNKOWN MODEL: Mercedes Benz

e) DRIVER'S NAME:

f) NRIC/FIN/PASSPORT: CONTACT:

No of passenger (including driver) (1)

No of passenger (including driver) (2)

No of passenger (including driver) ()

email = kevinrkj@gmail.com

fax =

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8852118H



Name
TEH KIM JUN, KEVIN

郑锦骏

Race
CHINESE
Date of birth
14-12-1988
Country of birth
SINGAPORE

Sex
M

S8852118H

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8852118H

Name
TEH KIM JUN, KEVIN

Birth Date: 14 Dec 1988

Issue Date: 23 Sep 2008



3447326

NRIC No. S8852118H



Date of issue
23-12-2003

APT BLK 293D COMPASSVALE CRESCENT #14-27
SINGAPORE 544293
NRIC No: S8852118H
Date: 11/01/2016

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

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg

PASS DATE

23 Sep 2008

31/7/15



NP 428A



MEMBER OF THE UOB GROUP

United Overseas Insurance Limited

3 Anson Road
#28-01 Springleaf Tower
Singapore 079909

Tel (65) 6222 7733
Fax (65) 6327 3869 / 6327 3870
Email: ContactUs@uoi.com.sg
uoi.com.sg

Co. Reg. No. 197100152R

Certificate of Insurance

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE NO.	DHOM110153711601	Excess:	\$500/-NAMED DRIVERS \$1000/-OTHERS
Type of Cover	COMPREHENSIVE		\$3000/-APPL TO <25 YRS & OR <3YRS EXP
Vehicle Number	SKP9716U		\$100/-WINDSCREEN DAMAGE CLAIM
Name of Insured	TEH KIM JUN KEVIN		
Restricted Driver(s)	NOT APPLICABLE		

Period of Insurance 27 October 2017 to 26 October 2018

Engine# CXS099906
Chassis# WWZZZAUZEW394373

PRIVATE CAR - INDIVIDUAL OWNERSHIP [MX 1]
AUTHORISED DRIVER

- (1) The Insured
- (2) Any other person who is driving on the Insured's order or with his permission
- (3) In the event of the death of the Insured
 - (a) any member of the Insured's family or a paid driver who has been driving the car during the lifetime of the Insured and permission to drive had not been withdrawn prior to the death of Insured and
 - (b) any other person who has been given permission to drive the vehicle prior to the death and such permission had not been withdrawn by the Insured

LIMITATIONS AS TO USE

Use only for social domestic and pleasure purposes and for the Insured's business

THE POLICY DOES NOT COVER

Use for hire or reward or racing pace-making reliability trial or speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purposes in connection with the Motor Trade

The carriage of passengers pursuant to car pooling arrangements and payments or any of them made by the passengers thereunder towards the running expenses of any vehicle described in the Schedule shall not be deemed to constitute use for hire or reward

Provided that the person 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.

*Limitation 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).

UNITED OVERSEAS INSURANCE LTD

FCTTS Date : 09/10/2017

For the Company 