

NATIONAL Assessment Centre Services. [wef 1 Jan 05] MHA 1181960V

Date In: 27/10/18 - 14:17	Job description	Date & Time Completed	Done by
Ref No: NA 1 IM 18219577/24	SAS e-filing		
Veh No: 5JL295JA	E-mail (within Shrs, AIC 2hrs)		
D.O.A: 26/10/18 - 19:00	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: 5HA8079X 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 Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

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

Date/Time	Actions

NA 1806959	Invoice Preparation Checklist	Am't (\$) for Bill	Am't (\$) Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	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 (N: in INC) against INC \$20		
	9) N12: Idac Mobile 30		
	Invoice dated	Fee Charged	
	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	27/10/2018 14:13
Date Of Accident	26/10/2018 19:00
Exact Location Of Accident	ADMIRALTY RD WEST TWDS SEMBAWANG RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL2955A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MR TENG BOON LENG
NRIC No	S7316339J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96471661
Alternative Phone No	OFFICE-96471661

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA AXIO 1.5X A
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	17-MV010978-R01
Cover Note Number	

### Driver

Name of Driver	TENG BOON LENG (DENG WENLONG)
NRIC No	S7316339J
Date Of Birth	04/05/1973
Occupation	INDOOR
Date Of Driving Pass	15/12/1992
Driving Experience	25 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96471661
Fax Number	
Contact Number	OFFICE-96471661
EEmail Address	NOEMAIL

Address	BLK 272D PUNGGOL WALK #04-595
Postcode	824272
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	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?	
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)	2
Passenger 1	NAME: ; - GENDER: ; FEMALE

#### 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

REFER TO STATEMENT.

#### Attachment(s)

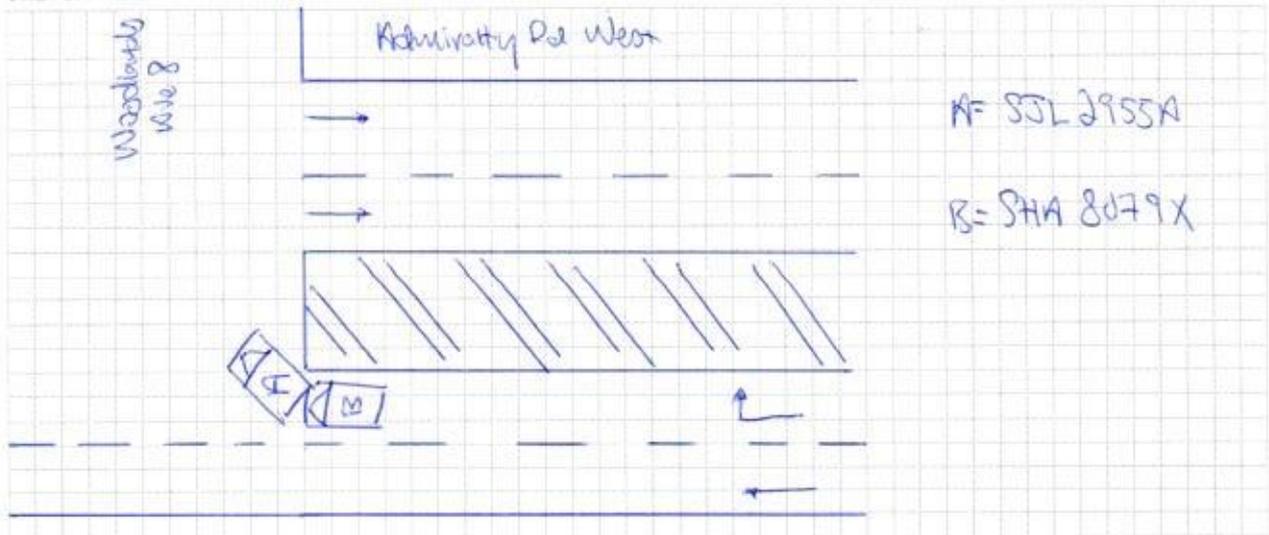
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA8079X
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	AHMAD JAMAI BIN ATRAWI
NRIC/Passport Number	
Contact Number	97812941
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



**SKETCH PLAN**



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

I was travelling along Administrative Rd West, towards the direction of Sembawang Rd. As I was slowly down to make a U-turn at the junction of Woodlands Ave 8, a taxi (SHH8079X) hit the rear of my car. My car jerked forward as a result of the impact.

**DECLARATION**

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

Gangth.  
 Policyholder's Signature  
 Date & Time:

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

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

Date of Accident : 26.10.2018 Accident Time: 1900hrs (24-HR-Format)  
Accident Place : Admiralty Rd West towards Sembawang Rd  
Vehicle No. (Car Plate No.) : SJL 2955A Make/Model: Toyota Axio  
Insurance Company : \_\_\_\_\_ Policy No: \_\_\_\_\_  
Owner or Company Name /IC No. : TENG BOON LENG 5731639J  
Owner or Company Contact No. : 96471661 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : his OWNER  
DRIVER'S Date Of Birth : 04.05.1973 DRIVER'S License Pass Date 15.12.1992  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
DRIVER'S Address : 8127D Punggol Walk #04-595 824272  
DRIVER'S Contact No./ Alt No. : 1) \_\_\_\_\_ 2) \_\_\_\_\_  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address : GTBL168@YAHOO.COM  
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
Number of Passengers (Including Driver): 2 (1 female)  
Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose  
Any Injury (If YES, Pls state): No.

**Other Party Driver's Particular (if any)**

Vehicle No:	<u>SHA 8079X</u>	Vehicle No:	_____
Vehicle Make/Model:	<u>Hyundai</u>	Vehicle Make/Model:	_____
Name Driver:	<u>Ahmad Samai Bin Atrawi</u>	Name Driver:	_____
IC No. Driver/Contact:	<u>97812941</u>	IC No. Driver/Contact:	_____

\* **NEW - Passenger's name & gender:**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7316339J



TENG BOON LENG  
(DENG WENLONG)

邓文龙

Race

CHINESE

Date of Birth

04-05-1973

Sex

M

Country of Birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7316339J



TENG BOON LENG  
(DENG WENLONG)

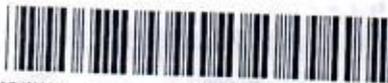
Birth Date: 04 May 1973

Issue Date: 03 Dec 2003



001035256B

2341711



NRIC No: S7316339J

Blood Group

B+

Date of issue

02-09-1994

Address

APT BLK 272D PUNGGOL WALK #04-595

SINGAPORE 824272

NRIC No: S7316339J

Date: 12/01/2013

No: 7252416

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

PASS DATE

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

15 Dec 1992



Licence No: S7316339J

NP 420A

17-MV010978-R01

certificate of insurance

Tokio Marine Insurance Singapore Ltd.

Company Reg. No. 13290014M 007 Reg No. MS-000022-0  
20 McCullough Street #09-01 Tokio Marine Centre Singapore 069048  
T: 65 4221 8111 F: 65 4221 4355 / 65 4224 6896 E: info@tokiomarine.com.sg W: www.tokiomarine.com



TOKIO MARINE  
INSURANCE GROUP  
FORM 35U

A Member of The  
Tokio Marine Group

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)

Policy No.: 17-MV010978-R01 (Private Motor Car)

- 1. Index Mark and Registration Number of Vehicle: SJL2933A Chassis No.: NZE1416097946
- 2. Name of Policyholder: MR TENG BOON LENG
- 3. Effective date of the Commencement of Insurance for the purposes of the Act: 21/11/2017
- 4. Date of Expiry of Insurance: 20/11/2018

5. Persons or Class 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 to that behalf then driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

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 use for any purpose in connection with the Motor Trade.

\* Limitations rendered inoperative by Section 9 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 91 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost/destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION		Account: 2276DDA
Insurance Plan:	Comprehensive Approved Workshop Plan	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Own Damage Claims	SGD 600
	Weathered Excess	SGD 100
Financial Interest:	MALAYAN BANKING BERHAD	

Tokio Marine Insurance Singapore Ltd.

Authorized Signature