

NATIONAL Assessment Centre Services.

(wef 1 Jan 2005)

MA488160501

Date In: 29/10/2008 20:14	Job description	Date & Time Completed	Done by
Ref No: NBA/mc/18019700/y	SAS e-filing		
Veh No: 8Q 1338m	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 29/10/2008 08:15	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: 8LM 7154B	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 repaler.
() Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Reminders:	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

MA1807033	Invoice Preparation Checklist	Fee (\$)	Abn (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30)		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$50)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	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) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	OD:		
	*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: Idao Mobile \$0		
Auditors Comments:	Invoice dated	Fee Charged	
2 of 1:	Invoice dated	Fee Charged	
2 of 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	29/10/2018 20:14
Date Of Accident	29/10/2018 08:15
Exact Location Of Accident	BUONA VISTA MRT STATION PICK UP/DROP OFF EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ1338M
Insured/Policyholder	
Name Of Registered Owner	CHUA YINGLIN (CAI YINGLIN)
NRIC No	S8111614H
Email Address	WINDCHIME009@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98576441
Alternative Phone No	OTHERS-98576441

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SPORTSVAN-1.4 (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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28984378 AVW
Cover Note Number	

Driver

Name of Driver	CHUA YINGLIN (CAI YINGLIN)
NRIC No	S8111614H
Date Of Birth	06/04/1981
Occupation	INDOOR
Date Of Driving Pass	07/07/2003
Driving Experience	15 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98576441
Fax Number	
Contact Number	OTHERS-98576441
EEmail Address	WINDCHIME009@GMAIL.COM

Address	33 TAMPINES CENTRAL #15-47
Postcode	528614
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	DRY

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)	2
Passenger 1	NAME: : SON GENDER: : MALE

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?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM7754B
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG KOK WAH
NRIC/Passport Number	S1305115A
Contact Number	92739824
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

SKETCH PLAN

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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: 29/10/2018
16 56 hrs

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name: *Rashid Hassan*
NRIC/FIN No.:

SKETCH PLAN

Buena Vista MRT PICK UP / DROP OFF Point?

BV A

A) SLQ 1338M

B) SLM 7754B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving to exit the drop off area towards North Buena Vista Rd. Stopped at stop line as there is oncoming traffic. Vehicle SLM 7754B rear ended my vehicle. No injuries.

My 4yo son was with me and he's secured in child seat.

Took some pictures and we exchanged details. Reporting incident to reserve my right to claim insurance if required.

DECLARATION

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

Policyholder's Signature

Date & Time: 29/10/2018
16:56hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: (29/10/2018) (DD/MM/YYYY), TIME: (08:12) (HH:MM)

LOCATION: Bunga Vista MRT Pick up/Drop off Exit (Along North Borneo Vista Rd)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLQ1338M
 b) INSURANCE COMPANY: MSIG
 c) POLICY NUMBER: A 28984378 AWW
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: VOLKSWAGEN SPORTSVAN
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 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: CHUA YINGLIN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8111614H CONTACT: 98576441
 c) ADDRESS: 33 Tampines Central 7 #15-47 The Tampines
Trilliant Singapore 528614

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

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

* d) DATE OF BIRTH: (06/04/1981) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING PASS 2003

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: N.A

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) clear

b) ROAD SURFACE: (DRY / WET / OTHERS) DRY

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: SLM7754B MODEL: Mazda
 b) DRIVER'S NAME: NG KOK WAH
 c) NRIC/FIN/PASSPORT: S1305115A CONTACT: 9273 9824

9. THIRD PARTY VEHICLE

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

(80M)
 * No of passenger
 (Including driver)
 (2)

* No of passenger
 (Including driver)
 (2)

* No of passenger
 (Including driver)
 ()

Email = windchime009@gmail.com
 VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8111614H



Name

CHUA YINGLIN
(CAI YINGLIN)

蔡莹霖

Race

CHINESE

Date of birth

06-04-1981

Sex

F

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8111614H

Name

CHUA YINGLIN
(CAI YINGLIN)

Birth Date: 06 Apr 1981

Issue Date: 09 Jul 2005



4773282

NRIC No. S8111614H



Date of issue

20-09-2011

33 TAMPINES CENTRAL 7 #15-47
SINGAPORE 528614

NRIC No: S8111614H

Date: 28/01/2018

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

PASS DATE

Class 3 Motor cars \leq 3000 kg with \leq 7 passengers,
exclusive of the driver; and motor tractors
/vehicles \leq 2500 kg

07 Jul 2009



NP 428A

VW DRIVEEASY

RENEWAL CERTIFICATE

Policy Number	Period of Insurance	Place of Issue
A 28984378 AVW	28/06/2018 to 27/06/2019	SINGAPORE
Name and Address of Insured		Date of Issue
Chua Yinglin 33 Tampines Central 7 #13-47 Singapore 528614		04/06/2018
		Account Number
		156346
Premium	GST	Total Due
SGD1,521.16	SGD106.48	SGD1,627.64

RISK NUMBER 1

VW DRIVEEASY

OCCUPATION

SD Consultant

FINANCIAL INTEREST

DBS Bank Ltd
 as Hire Purchase Owners

SCOPE OF COVER Comprehensive

INTEREST INSURED

REGISTRATION NO. SLQ1338M
 MAKE/MODEL Volkswagen Sportsvan 1.4 AT
 ENGINE NUMBER CZC086160
 CHASSIS NUMBER WVVZZZAUZGW563923
 YEAR OF MFG 2015
 CAPACITY 1395 C.C.
 SEATING CAPACITY 5 (INCL. DRIVER)
 WINDSCREEN UNLIMITED

SUM INSURED
 INCL. COE/PARF YES
 OFF-PEAK CAR NO
 NO CLAIM DISCOUNT 10.00% (or F/D)
 NCD PROTECTOR NOT COVERED
 EXCESS SGD500
 ANNUAL PREMIUM SGD1,521.16

ACCESSORIES Aircon, radio/cassette/compact disc player, in-vehicle unit,
 rust-proofing and other accessories that are factory fitted.

AUTHORISED DRIVERS

Chua Yinglin