

# NATIONAL Assessment Centre Services

Date In: 07/11/2018 11:14	Job description	Date & Time Completed	Done by
Ref No: NA/MSG18020106/K4	SAS e-filing		
Veh No: FBA 908C	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 05/11/2018 19:30	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: SKP1092M	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: (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

NA1807209	Invoice Preparation Checklist	Amc (\$) 1st Bill	Amc (\$) 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:-		
	OT*		
	*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 \$0		
	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	07/11/2018 11:14
Date Of Accident	05/11/2018 17:30
Exact Location Of Accident	BRADDELL ROAD TWDS LORNIE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBA908C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN NGUANG HUAT
NRIC No	S1258075D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84128149
Alternative Phone No	OTHERS-84128149

### Vehicle Particulars

Manufacturer	HONDA
Model	CB400
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	MOTORCYCLE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	
Cover Note Number	72061520

### Driver

Name of Driver	TAN NGUANG HUAT
NRIC No	S1258075D
Date Of Birth	17/10/1957
Occupation	OUTDOOR
Date Of Driving Pass	10/05/1976
Driving Experience	42 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84128149
Fax Number	
Contact Number	OTHERS-84128149
EMail Address	NOEMAIL

Address	BLK 838 YISHUN STREET 81 #12-308
Postcode	760838
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	
Was any body injured in the Accident?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20181107/2020

#### 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	SKP1092M
Vehicle Make/Model/Colour	
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)

**DETAILS OF INJURED PERSON 1**

Name	TAN NGUANG HUAT
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	FBA908C
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	



## 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.:

A - FBA908C  
B - SKP1092M

pls Refer to the Police Report -  
T/20181107/2020

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

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*[Signature]*

7/11/2018





# SINGAPORE POLICE FORCE



T/20181107/2020

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20181107/2020

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 07/11/2018 10:03	Vide Report No.: F/20181105/0218	Station Diary No.:
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**Informant's Particulars**

Name of Informant: TAN NGUANG HUAT			Address: 838 YISHUN STREET 81 #12-308 SINGAPORE 760838		
ID Type / ID No.: NRIC NO / S1258075D			Contact No.: Home/Office: Mobile: 84128149		
Nationality:			Email:		
Sex: Male	Age: 61	Date of Birth: 17/10/1957	Type of Informant: Rider		
Race:			Language:		Institution / School Name:
Occupation: OTHERS			Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 05/11/2018 17:30	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 BRADDELL ROAD LORNIE ROAD				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Two Way	Traffic Control:	Traffic Volume: Moderate		
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBA908C	Motorcycle	HONDA	CB400	Yellow		0
SKP1092M	Car					0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBA908C	MSIG INSURANCE (SINGAPORE) PTE. LTD.	72061520	25/01/2018	24/01/2019



**SINGAPORE  
POLICE FORCE**



T/20181107/2020

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20181107/2020

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	TAN NGUANG HUAT	ID No.	S1258075D
Related Vehicle	FBA908C (Motorcycle)	Contact No.	84128149
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

ON THE ABOVE MENTIONED TIME,DATE AND LOCATION.

I WAS RIDING ALONG LANE 1 AND 2. THERE WAS A TRAILER ON LANE 2. THE ROAD HAD A TOTAL OF 3 LANES. AS I WAS RIDING, THE VEHICLE ON THE FIRST LANE MADE A STOP . I DID NOT HAVE ENOUGH TIME TO REACT AND I COLLIDED INTO THE LEFT SIDE OF THE VEHICLE. I FELL OFF MY MOTORBIKE. AMBULANCE ATTENDED THE SCENE BUT I WAS NOT TOO BADLY INJURED SO I WAS NOT CONVEYED.





**SINGAPORE  
POLICE FORCE**



T/20181107/2020

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20181107/2020

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:  
TP /  
KHALED AMR HASSAN MOHSEN

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
SI NORASHIKIN BINTE DAUD  
Contact No.: 65476439

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
07/11/2018 10:03


Classification Of Case:



**SINGAPORE  
POLICE FORCE**

Signature:

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1258075D




Name  
**TAN NGUANG HUAT**

Race  
**CHINESE**

Date of Birth  
**17-10-1957**

Sex  
**M**

Country of Birth  
**SINGAPORE**



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1258075D**

Name  
**TAN NGUANG HUAT**

Birth Date: **17 Oct 1957**

Issue Date: **19 Feb 2004**




2394832



NEIC No: **S1258075D**



Blood Group: **A+** Date of issue: **17-09-1994**


Address  
**APT BLK 83B YISHUN STREET 81  
#12-308  
SINGAPORE 2776**

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

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	10 May 1976
Class 2A Motorcycles between 201 cc and 400 cc	10 May 1976
Class 2 Motorcycles exceeding 400 cc	10 May 1976
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	15 Aug 1977
Class 4 Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	23 Oct 1979

NP 426A

Licence No: **S1258075D**





**MSIG**

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)  
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 msig.com.sg

For any enquiries, please call the Underwriting agent : Commercial Agency Pte Ltd  
 23 Kelantan Lane #02-01/02 Kim Hoe Centre Singapore 208642 Tel : 63373133

## MOTOR CYCLE COVER NOTE

(Strictly for Motor Cycle Insurance)

Policy No : 72061520

Policy No : A0074-001-10238

Date : 08 Jan 2018

Policyholder : TAN NGUANG HUAT

The proposed for insurance in respect of the Motor Cycle described in the Schedule below the risks is hereby HELD COVERED  
 on the terms of the Company's usual form of Third Party Policy applicable thereto for the  
 period from 00:01AM on 25 Jan 2018 to midnight on 24 Jan 2019 unless the  
 policy is terminated by the Company by notice in writing in which case insurance will thereupon cease and a proportionate part of  
 the premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

### SCHEDULE

Registration No.	FBA908C	Insured Value	Third Party Liability (TPL)
Engine No.	NC23E3000111	C.C.	399
Chassis No.	JH2NC39945M100111		
Year Manufactured	2005	Year of Registration	2006
Make & Model	HONDA [CB400]		
Policy Type	Policyholder		

Policy for the following purpose : social domestic and pleasure purposes and in connection with policyholder's business or  
 profession.

### CERTIFICATE OF INSURANCE

I 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 the Road Transport Act, 1997 (Malaysia).

### IMPORTANT

Be informed that this cover note is issued for temporary use only and that you must exchange the cover note for the  
 certificate of insurance from the respective agents within 14 days hereof.

**SOON HIN MOTORS PTE. LTD.**  
 Block 1018, Yishun Industrial Estate  
 #01-342 Singapore  
 Tel: 6762 4893 Fax: 6762 4894  
 Co Reg. No. 201312620W  
 GST No. 201312620W

Not valid unless countersigned by Authorized Person

For MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurer

MTD/MT/17-359016

64700

(Please read important information on the reverse page.)