

NATIONAL Assessment Centre Services [wef 1 Jan 2005] **MMA 118148368**

Date In: 16/11/18 10:31	Job description	Date & Time Completed	Done by
Ref No: NA/INC18020750164	SAS e-filing		
Veh No: PC 7900B	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 15/11/18 18:55	I-Motor Claim Form	MT/1020101-001	16/11/18 16:48
OD: AD Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SLT 1478B	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

NA1807506

Claimant's Particulars:	Invoice Preparation Checklist	Am (\$)	Am (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	30.00	
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TP: 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: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QD:		
	*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 (Inc in INC) against INC \$20		
	N12: Idao Mobile 30		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
Auditors' Comments:	Invoice dated	Fee Charged	
Ref: 1:			
Ref: 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	16/11/2018 10:31
Date Of Accident	15/11/2018 18:55
Exact Location Of Accident	ECP TWDS CHANGI B4 TANJONG KATONG EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC7900B
Insured/Policyholder	
Name Of Registered Owner	TING TRANSPORT
Co Reg No	53212887K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67410500

Vehicle Particulars

Manufacturer	HINO
Model	RK1JSLL
Exact Purpose for which vehicle was being used at time of accident	AFTER WORK
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	BUS

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5101274921
Cover Note Number	-

Driver

Name of Driver	TING SOON HENG(CHEN SHUNXING)
NRIC No	S7811160G
Date Of Birth	20/04/1978
Occupation	OUTDOOR
Date Of Driving Pass	07/02/2013
Driving Experience	5 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91901884
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 210 NEW UPPER CHANGI RD #03-699
Postcode	460210
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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

I WAS TRAVELLING ALONG ECP TWDS CHANGI B4 TANJONG KATONG EXIT ON THE THIRD LANE, ALL OF A SUDDEN, VEH B (BEARING NO SLT1478B) FROM THE EXTREME LEFT LANE CUT INTO MY LANE, AS THE RESULT MY BUS HIT ONTO THE VEH B RIGHT HAND SIDE AND THE IMPACT PUSH THE VEH B HIT ONTO ANOTHER VEH C WHICH WAS STATIONARY ON THE EXTREME LEFT LANE.

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	SLT1478B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN HONG BOON
NRIC/Passport Number	S6841869J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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)	

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.:

SKETCH PLAN

A = PC 7900 B
B = SLT 1478 B
C = Unknown

ECP towards Changi B4 Tanjong
Katong Exit

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to statement

DECLARATION

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

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.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7811160G



TING SOON HENG
(CHEN SHUNXING)

陈 顺 兴

Race
CHINESE

Date of Birth
20-04-1978 M

Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
S7811160G

TING SOON HENG
(CHEN SHUNXING)

Birth Date 20 Apr 1978

Issue Date 27 Jun 2003



Land Transport Authority



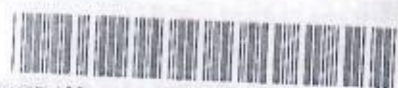
VOCATIONAL LICENCE

Licence No: S7811160G

Name: TING SOON HENG

Issue Date 7/2/2013

Please visit www.lta.gov.sg to check
the status of this vocational licence



3100269

NRIC No: S7811160G



Blood Group Date of issue
O+ 24-09-1999

APT BLK 210 NEW UPPER CHANGI ROAD #03-699
SINGAPORE 460210

NRIC No: S7811160G

Date: 25/01/2013

No: 7248222

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

Class 3 Motor cars <= 2000 kg with <= 7 passengers, exclusive of the
driver; and motor tractors/vehicles <= 2500 kg

PASS DATE

11 Aug 1999

Class 4 Heavy motor cars and motor tractors > 2500 kg

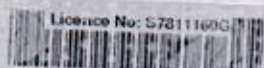
29 Mar 2012

MAYFAIR MOTORING
TEL : 6479 2220

S7811160G

S / No. 9000156603

NP 426A



This card is not transferable and is the property of the Land Transport
Authority (LTA). It must be surrendered to the LTA on request. If found,
please return to LTA, 10, Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	07/02/2013
04	BUS ATTENDANT	07/02/2013



Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="15/11/2018 10:30"/>							
Vehicle No.(For Motor)	<input type="text" value="PC7900B"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5101274921		TING TRANSPORT	53212887K	GFT	Third Party, Fire & Theft	PC7900B	PC7900B	22/06/2018	
<input type="button" value="Continue"/>										

Policy Information

Policy No.	5101274921	Policyholder Name	TING TRANSPORT	Policyholder NRIC	53212887K
Certificate No.					
Address	95 KAKI BUKIT AVENUE 1 #03-00 SHUN LI INDUSTRIAL PARK SINGAPORE 415982				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	07/06/2018	Effective Date	22/06/2018 00:00	Expiry Date	20/06/2019 23:59
Third Party Excess	1500	Own damage Excess	0	Windscreen Excess	0
Additional Excess		OS Premium	1319.06		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	NLE INSURANCE AGENCIES PTE	Agent Tel.	65673612	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	95 KAKI BUKIT AVENUE 1	Address 2	#03-00 SHUN LI INDUSTRIAL P	Address 3	SINGAPORE 415982
Address 4		Address Type	Singapore address	Post Code	415982
Unit No.	08-201	Related Policy Number	5101274921		

Insured Object: PC7900B

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	03/09/2018 00:00	Basic Information Endorsement	000001286894376	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. PA658H 30-09-2018 \$1,516.22 In view of this amendment, an additional premium of \$1,516.22 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.
2	20/09/2018 00:00	Basic Information Endorsement	000001286906151	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. PC5056B 14-10-2018 \$1,708.62 In view of this amendment, an additional premium of \$1,708.62 (inclusive of GST) is payable

Claim Handling

The premium on this policy has not been collected.

Accident MT/1020101

Policy No.	5101274921	Vehicle No.	PC7900B	GST Registration No.	
Certificate No.					
Policyholder Name	TING TRANSPORT			Policyholder NRIC	532121
Product Code	FLEET INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No.(Mobile)	67410500	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFC	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No
Accident Details					
Report Date	16/11/2018 16:34	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	15/11/2018	Time of Accident hh:mm	18:55	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	ECP TWDS CHANGI B4 TANJONG KATONG EXIT				
Excess					
Own damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	1,500.00	Outside Singapore TP Excess			
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified		No	
Modification History					
Policyholder Mailing Address					
Address 1	95 KAKI BUKIT AVENUE 1	Address 2	#03-00 SHUN LI INDUSTRIAL P	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	41598
Unit No.	08-201	Related Policy Number	5101274921		
O1 Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TING SOON HENG(CHEN SHUN)	Driver NRIC	57811160G	Driver DOB	20/04/
Register Date of Driver License	07/02/2013	Driver Age	40	Driving Experience	5
Contact No.(Mobile)	91901884	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 210 #03-699	Address 2	NEW UPPER CHANGI ROAD	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	46021
Unit No.	03-699				
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No		

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	TING TRANSPORT
Contact No.(Mobile)	91018406	Contact No. (Home)	
Email Address		O1 Vehicle Number	PC7900B
Claim Description	PC7900B / SLT1478B ON 15 Nov 2018		
Preferred Workshop	0	Insured Liability	Not at Fault
CHARGE No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By			
Print AK letter			
		Claim Close Date	16/11/2018 16:46
			LIEW SHAN HUI

Save Submit

Attachment

Accident No. Claim No.

<https://gicclaim.income.com.sg/gcs/icm/eclaim/registrationSave.do>

MT/1020101

001

Last Doc. Received

* Yes ☐ No ☐

Upload Date

16/11/2018 16:48

Path *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Clear

Category *

Confidential

Urgency *

Please Select ▼

NO ▼

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Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:48	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:48	SAS	Normal	SAS 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:48	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:47	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:47	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:47	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:47	Photos	Normal	Photos 2018-11-16
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:47	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:46	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:46	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:46	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:46	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:46	Photos	Normal	Photos 2018-11-16
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Nov 2018 16:46	Photos	Normal	Photos 2018-11-16

Video List

Uploaded By/Date	Folder Date	File Name	Source
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