

NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

Date In: 16/11/2018 15:55	Job description	Date & Time Completed	Done by
Ref No: NA/INC18020815/K4	SAS e-filing		
Veh NO: SLB1979S	E-mail (within 8hrs, AIC 2hrs)		
DOA: 16/11/2018 10:20	i-Motor Claim Form	MT/1020139+001	17/11/18 09:40
TP: Reporting Only	i-Motor W/O (Within: O/D 2hrs, TP 4hrs)		
TP Insurer	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: () Tol: () Fax: ()

TP Particulars: Yeh No: SMD 4512 M INC () / Non-INC () Tel: ()

Owner / Driver: ()

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: (INC hotline: 6788 6616)

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

NA1807512

Main Particulars:-	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			1st Bill	Add Bill
Owner/Owner:	1) AR: Accident Reporting (\$30);			
Contract No:	2) DA: Damage Assessment (\$100); INC (\$30)			
Insured Portion:	3) TF: Towing Fee \$40/\$45			
Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120			
Insurer's Comments:-	5) FT: Follow-Through Survey (Resurvey) \$30			
	For claiming against JNC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection \$75			
	7) N1: Idao DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	ON*			
	*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 (Non INC) against INC \$20			
	9) N12: Idao 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	16/11/2018 15:55
Date Of Accident	16/11/2018 10:20
Exact Location Of Accident	HOUGANG ST 61 (CARPARK)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB1979S
Insured/Policyholder	
Name Of Registered Owner	LIM TECK GUAN
NRIC No	S7720512H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97698088
Alternative Phone No	OTHERS-97698088

Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA AERAS 2.4 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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099847270
Cover Note Number	

Driver

Name of Driver	AUDREY WEE LI-WEN (HUANG LIWEN)
NRIC No	S7900730G
Date Of Birth	03/01/1979
Occupation	INDOOR
Date Of Driving Pass	08/01/2003
Driving Experience	15 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97698088
Fax Number	
Contact Number	OTHERS-97698088
Email Address	NOEMAIL

Address	5 FERNVALE CLOSE #05-09
Postcode	797487
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	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

PLS REFER TO THE ATTACHED 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	SMD4512M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DON CHNG
NRIC/Passport Number	E5888372E
Contact Number	90677172
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN


IMPORTANT NOTICE

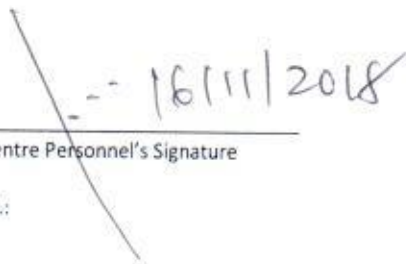
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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:

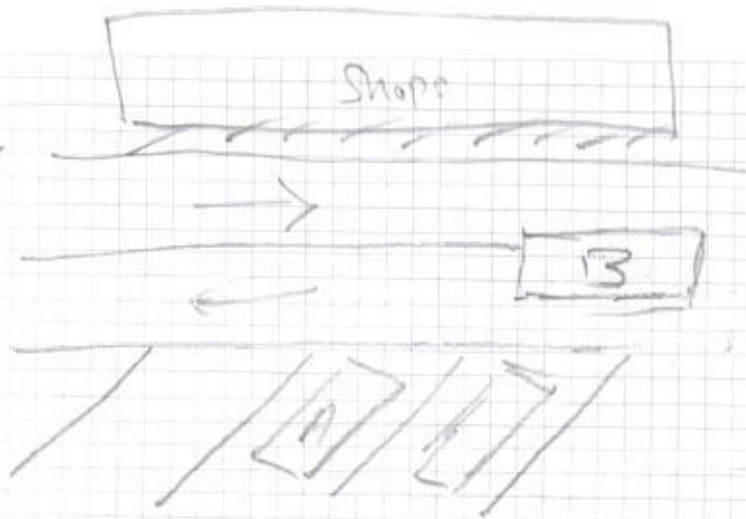

Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

SKETCH PLAN

PIC 1

Gantry



PG 1/2

A - SLB1979S
B - SMD4512M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/11/2018 @ 16:20am in Hougang St 61 carpark, vehicle A was at parking position. I checked ~~left~~ both direction - left and right with no traffic then I decided to move off. Vehicle B came out of no where at a very fast speed, trying to avoid me, veered to his right while he was driving on the centre lane. After ~~the~~ the impact, vehicle B have to move his vehicle as he is in the ~~middle lane~~ blocking the traffic behind. lane divider

This showed that he was not driving on his lane and trying to speed ~~up~~ when he ~~has~~ saw me driving out of the parking lot, ~~instead~~ of stopping seeing ~~the~~ the front part of my vehicle.

Instead of stopping when my vehicle was out of the ~~parking~~ carpark lot, he chose to overtake me thinking he might be able to cut me through.

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:

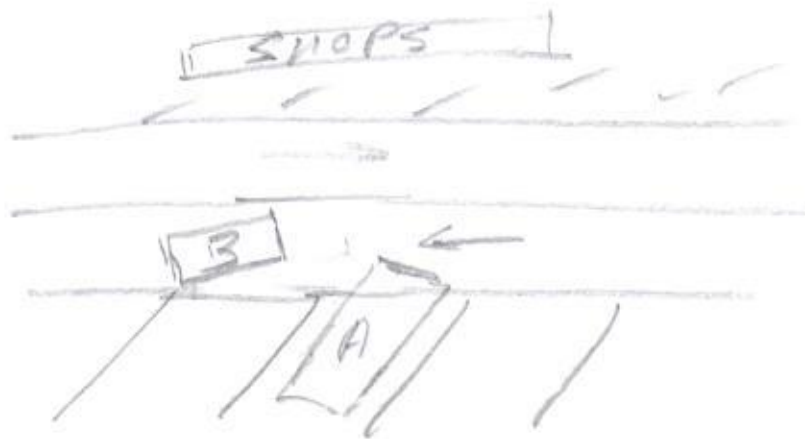
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

16/11/2018

PIC 2



PIC 3



Vehicle B have to move back to own lane as he was at the ~~divider~~ divider blocking the traffic behind,

Please refer to ^{2nd} last pic.

Last pic also indicate that vehicle B was ~~to~~ travelling at a ~~high~~ high speed in the carpark area, thus ~~un~~ unable to stop in time, resulting in damage that ~~steeches~~ ~~stree~~ ~~stree~~ stretches across his car body while vehicle A was a point impact

Jy Teams Media

精義娛樂制作

(Affiliate of CID Production)

庄清游

Don Chng

Hp : 90677172

Email : don.jyteamsproduction@gmail.com

35 Jalan Mulia 5368639

Car Rental
~~Insurance Co.~~

90074493

SMD 4512M

TP

Don Chng

~~Third~~ 3rd party — Don Chng (~~te no~~ : Passport no : E5888372E)
HP: 90677172

Vehicle : Car rental (90074493)

(SMD 4512M) ✕ Pinnacle Car Rental

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7900730G



Name

AUDREY WEE LI-WEN
(HUANG LIWEN)

黄利雯

Race

CHINESE

Date of birth

03-01-1979

Sex

F

Country of birth

SINGAPORE

S7900730G

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7900730G

Name

AUDREY WEE LI-WEN
(AUDREY HUANG LIWEN)

Birth Date 03 Jan 1979

Issue Date 11 Jan 2003



403349633522

Address No. S7900730G



date of issue

31-01-2009

5 FERNVALE CLOSE #05-09
SINGAPORE 797487

NRIC No. S7900730G

Date: 05/04/2018

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

Class 3 Motor Cars and Motor Tractors the weight of which (including) does not exceed 2500 kilograms

PASS DATE
08 Jan 2003

NP 428A



5 Fernvale Close

#05-09 S797487

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="16/11/2018 10:20"/>
Vehicle No.(For Motor)	<input type="text" value="SLB1979S"/>	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"/>	5099847270		LIM TECK GUAN	S7720512h	GPC	drivo CLASSIC	SLB1979S	SLB1979S	13/04/2018	12/04/2019

Policy Information

Policy No.	5099847270	Policyholder Name	Lim Teck guan	Policyholder NRIC	S7720512h
Certificate No.					
Address	5 FERNVALE CLOSE #05-09 LUSH ACRES SINGAPORE 797487				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	12/04/2018	Effective Date	13/04/2018 00:00	Expiry Date	12/04/2019 23:59
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0		
Agent	DIRECT BUSINESS DEPT	Agent Tel.	NIL	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	5 FERNVALE CLOSE	Address 2	#05-09 LUSH ACRES	Address 3	SINGAPORE 797487
Address 4		Address Type	Singapore address	Post Code	797487
Unit No.	#05-09	Related Policy Number	5099847270		

Insured Object: SLB1979S

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	13/04/2018 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 13 Apr 2018, the following policy details are amended as follows: HIRE PURCHASE COMPANY: GV CREDIT PTE LTD CHASSIS NUMBER: ACR500067126 ENGINE NUMBER: ACR500067126 VEHICLE REGISTRATION NUMBER: SLB1979S ORIGINAL REGISTRATION DATE: 01 Jan 2008

Continue

Cancel

Claim Handling

Accident MT/1020139

Policy No.	5099847270	Vehicle No.	SLB1979S	GST Registration No.
Certificate No.				
Policyholder Name	Lim Teck guan			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	97698088	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	50	Private Hire

➤ Accident Details

Report Date	17/11/2018 09:30	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	16/11/2018	Time of Accident hh:mm	10:20	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	HOUGANG ST 61 (CARPARK)			

➤ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00	
Third Party Excess	0.00	Outside Singapore TP Excess	0.00	

➤ Benefits

➤ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

➤ Policyholder Mailing Address

Address 1	5 FERNVALE CLOSE	Address 2	#05-09 LUSH ACRES	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#05-09	Related Policy Number	5099847270	

➤ OI Driver Info

Driver Name	Audrey Wee Li-Wen	Driver Type	Named Driver	
Unnamed driver Name		Driver NRIC	S7900730G	Driver DOB
Register Date of Driver License	01/01/2016	Driver Age	39	Driving Experience
Contact No.(Mobile)	97698088	Contact No.(Office)	0	Contact No.(Home)
Address 1	5 FERNVALE CLOSE	Address 2	# LUSH ACRES	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Com

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001 OD-MX

New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop	<input type="text"/>	Insured Liability	Partially at Fault	GIA report	Received
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown		
Date Registered					

Report Taken By

Print AK letter

OD-MX	Insured Name	Lim Tec
97698808	Contact No. (Home)	
ronsonlim3@hotmail.com	OI Vehicle Number	SLB197
SLB1979S / SMD4512M ON 16 Nov 2018		
17/11/2018 09:37	Claim Close Date	
	Workshop Repairer	

Save Submit

Submit

Attachment



Accident No.	MT/1020139	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	17/11/2018 09:40

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

Please Select ▼

ND

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NO

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Please Select ▼

NO

Clear

Please Select ▼

NO

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NO

Clear

Please Select ▼

NO 1

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:37	NRIC/ Driving License	Normal	NRIC/ Driving License
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:35	SAS	Normal	SAS 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:35	Photos	Normal	Photos 2018
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:35	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:34	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:34	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:34	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:34	Photos	Normal	Photos 2018
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:34	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:34	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Nov 2018 09:34	Photos	Normal	Photos 2018