NATIONAL Assessment Centre	Der rices		MNA 118148 990				
Date In: 17 1 11/18 16:41	Jeb descript	tion	Date &Time Complete	ed D	one by		
Ref No: NA / INC 180 20 831/44.	SAS c-filin	ng					
Veh No SLA 77705	E-mail (wi	thin Shis, AIC 2hrs)					
D.O.A . 17 11118 12:30.	i-Motor C	laim Form	N47/1020202	13/11/	18 1710		
OD P Reporting Only	l-Motor W	I-Motor W/O (Widdn: OD 2hts, TP 4hrs)					
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TP Insurer:	Assessment	Survey Report					
Tr. maura	Ass't Repor	t by Fax / Hand to	Owner/Wksp		+		
Preferred Wksp / INC Assign Wksp / QW: (Charles managed and the	***************************************	Tel:	Fax:			
TP Particulars: Veh No: 52	S 8798 L	INC()/Non-INC()				
Owner / Driver: (Tel:)			
Policy No: () Pcrio	od: ()	Cover Type: ()			
Confirmed by : (Date:	Time:)			
Insured/Driver Liability: (%) [No	te-Est. Status	(WO): N: 0-20	%; P: 21-79%. P: 80)-100%]			
Year of Registration: () Wa	arranty: YES ()				
Excess: (\$) Loading: \$1,000	()/\$2,00	00()					
General Remarks	CHE THE SERVE	CHARLES NO. SAN	PERSONAL PROPERTY AND	7797	-		
() Walk-In Customer's Information	atles steleth C	Confidential P. Ct-l	Cust Station series (STATE A)	2.5 8 5 0 77 . 6 1 7			
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Apply for Transport Allowance () / Court QC Check / Post Repair Inspection	rtesy Car (No. No.		P37 CND61	iejby		
Apply for Transport Allowance () / Court QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > \$3000]	rtesy Car ()		Z. Z. Albon	ve,by		
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 1, Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to
- 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

AND ASSESSMENT OF THE PARTY OF	ACCIDENT STATEMENT
Date Of Report	17/11/2018 16:41
Date Of Accident	17/11/2018 12:30
Exact Location Of Accident	INTERSECTION OF FLOWER RD AND KOVAN RD
Country/State of Loss	SINGAPORE
表现的证据的	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLA7770S
Insured/Policyholder	
Name Of Registered Owner	WILLIAM WEE KEK HENG
NRIC No	S7246544Z
Email Address	AESTATIC@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90019033
Alternative Phone No	OFFICE-90019033
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	GOLF CABRIOLET 1.4 TSI AT 5172Q5
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5091102505-01
Cover Note Number	%•
Driver	
Name of Driver	SHARON NEO(SHARON LIANG)
NRIC No	S7203458I
Date Of Birth	28/01/1972
Occupation	INDOOR
Date Of Driving Pass	25/08/1992
Driving Experience	26 YEARS AND 2 MONTHS
Candas	FEMALE
Makila N	(LOCAL) +65-91735050
Fax Number	,,
Contact Number	

NOEMAIL

Address

21 HIGHLAND CLOSE

Postcode

549233

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

COLLISION - MAJOR/MINOR RD

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? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

YES NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: UNKNOWN

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

I WAS TRAVELLING ALONG FLOWER RD, WHILE APPROACHING THE INTERSECTION OF KOVAN RD, SUDDENLY VEH B (BEARING NO SLS8798L) DASHED OUT FROM THE KOVAN RD WITHOUT STOP AT THE STOP LINE AND HIT ONTO MY VEH RIGHT HAND SIDE.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH DRIVER

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLS8798L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

WEE TECK HUAT

NRIC/Passport Number

S1469882E

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)

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)
 - 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:
 - 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

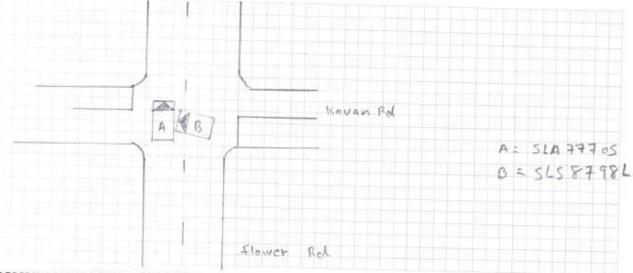
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pleuse	Refer to statement

he foregoing particulars are true in every respect.

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time;

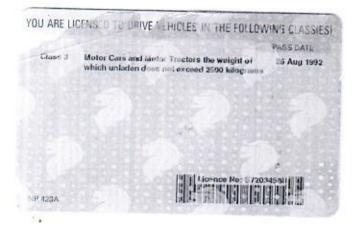
Reporting dentre Personnel's Signature

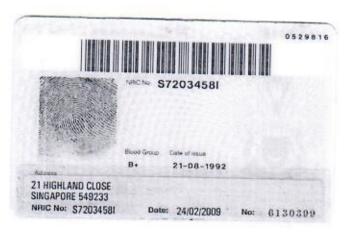
Name:

NRIC/FIN No.:









eBaoTech										Gener	alClaim
Hello, NAC_PAYA_UBI_80 My Desktop		Policy Query						e Languag	The same of the sa		The second second
10000 01 1000	Notice of Loss Policy No. Vehicle No.(For Motor)	SLA77	SLA7770S		Date of Accident Certificate Number			17/11/2018 16:35		3	
	Select	Policy No. 5091102505- 01	Certificate Number	Policyholder Name WILLIAM WEE KEK HENG	Policyholder NRIC S7246544Z	Product	Cover Type drivo CLASSIC	Vehicle No. SLA7770S	Insured Object SLA7770S	Commence Date 28/08/2018	Expiry Date 27/08/2019
					1	Continue	1				

Claim Handling

Accident	MT/1020202

Policy No. Certificate No.	5091102505-01	Vehicle No.	SLA7770S			GST Registration No.	
Policyholder Name	MITTO TAKE INCHES					we regulation No.	
Product Code	WILLIAM WEE KEK HENG					Policyholder NRIC	
Contact No.(Mobile)	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC			Loading	S72
Email Address	90019033	Contact No.(Office)				Contact No.(Home)	0
KFK	- No Yes	Special Remark				eCode	Tau-
NCD Protection	Yes	TCA	+ No Yes			eCode Reason	No
Accident Details	103	NCD Entitlement(%)	50			Private Hire	No
Report Date	17/11/2018 17:00	Table American Activities and the					1,79
Date of Accident	17/11/2018	Accident Report Within 24 hrs	Yes		- 8	Accident Type	Coll
Reporting Centre	4774464444	Time of Accident hh;mm	12:30			Country of Accident	Sing
Accident Location	INTERSECTION OF FLOWER RD AND KOVAN RD	Orange Force				ICM No.	Sing
P Excess	THE CASE THE OF PLOWER RD AND KOVAN RD						
Own damage Excess	600.00	3834860 - 28 B 33000					
Unnamed Oriver Excess	0.00	Additional Excess	0		. V	Windscreen Excess	100.
Third Party Excess	0.00	Outside Singapore OD Excess		600.00			
→ Benefits		Outside Singapore TP Excess		0.00			
 GST Registered Information 	ation						
GST Registered	No		1222	_			
GST Registration No.				istration Date			
Modification History			051 50	tus Verified		Yes	
Policyholder Mailing Ade	*****						
Address 1							
Address 4	21 HIGHLAND CLOSE	Address 2	SINGAPORE 5492	233	A	ddress 3	
Unit No.		Address Type	Singapore addres	s		ost Code	
OI Driver Info		Related Policy Number	5091324109-01		100	ar code	5492
Driver Name	SHARON NEO						
Unnamed driver Name	The state of the s	Driver Type	Named Driver				
Ingister Date of Driver License	22/08/1992	Driver NRIC	\$7203458[Dr	iver DOB	28/01
Contact No.(Mobile)	91735050	Driver Age	46		Dr	iving Experience	26
Address 1	21 # HIGHLAND CLOSE	Contact No.(Office)			Co	ntact No.(Home)	
Address 4		Address 2	SINGAPORE 5492		Ad	dress 3	
Init No.		Address Type	Singapore address	5	Por	st Code	54923
ocs he own a Singapore ogistered car?	Yes - No	Driver Vehicle No.					
		Driver vericle No.			Dri	ver Insurer Company	
eclaration							
reachalyser or Blood Test cading?	0 mg	Any injury?	Yes + No				
			ies a No				
odification History							
Claim 001 New							
laim Type *							
ontact No.(Mobile)				OD-MX	No.	sured WILLIAM WEE KEN	HENG
				90019033	No		
nail Address					OI	ome)	
				aestatic@gmail.com	Ve	hicle SLA7770S	
aim Description				SLA7770S / SLS8798L 0			
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AND DESCRIPTION OF THE PARTY OF	MT/1020202	Claim No.	go	1			

Video List

Uploaded By/Date

11/1//2018	Claim	Handling(accident re	eporting (Claim Task)		
Last Doc. Received	* Yes: No	Upload Date	i d	17/11/2018-17:03		
	Path •					
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Choose File N	o file chosen		Clear	Please Select	Y NO Y	Normal *
Choose File N	o file chosen		Clear	Please Select	v NO v	Normal *
Choose File N	o file chosen		Clear	Please Select	NO +	Normal *
Message Read			Clear	Please Select	NO Y	Normal *
✓ Attachment	List					
Attachment	Uploaded By/Date	Category	9	Urgency	Pared	
241	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov 2018 17:03	NRIC/ Driving License		Normal	Descri	
(3)	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov 2018 17:03	SAS		Normal	SAS 2018	-11-17
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	NAC_PAYA_URI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov 2018 17:02	Photos		Normal	Photos 201	8-11-17
	NAC_PAYA_UBI_800501(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov 2018 17:02	Photos		Normal	Photos 201	8-11-17
300	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov. 2018 17:02	Photos		Normal	Photos 201	3-11-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov 2018 17:02	Photos		Normal	Photos 2018	8-11-17
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	NAC_PAYA_UBI_BO0601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov 2018 17:02	Photos		Normal	Photos 2018-	11-17

Photos

File Name Display in New Window Scan and uploading

Normal

NAC_PAYA_UBI_800601[NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov 2018 17:02

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Nov 2018 17:02

Folder Date

Photos 2018-11-17

Photos 2018-11-17

Source

9