

# NATIONAL Assessment Centre Services

Date In: 20/11/2018 14:29	Job description	Date & Time Completed	Done by
Ref No: NA/CTI18020972/K4	SAS e-filing		
Veh No: SKP657R	E-mail (within 8hrs, AIC 2hrs)		
DOA: 19/11/2018 14:00	i-Motor Claim Form		
OD / TP: Reporting Only	i-Motor W/O (Within: OD 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: ( ) Tel: ( ) Fax: ( )

TP Particulars: Veh No: PJR9405 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)

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



## 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	20/11/2018 14:29
Date Of Accident	19/11/2018 14:00
Exact Location Of Accident	WOODLANDS RD TWDS WOODLANDS CHECKPOINT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKP657R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MR CHUA KHIN KUANG, LOUIS
NRIC No	S8308393Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98797269
Alternative Phone No	OTHERS-98797269
<b>Vehicle Particulars</b>	
Manufacturer	VOLKSWAGEN
Model	JETTA 1.4 TSI AT 1K23Q5 MX
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
<b>Insurance Company</b>	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3095501700
Cover Note Number	
<b>Driver</b>	
Name of Driver	MR CHUA KHIN KUANG, LOUIS
NRIC No	S8308393Z
Date Of Birth	11/03/1983
Occupation	INDOOR
Date Of Driving Pass	13/11/2003
Driving Experience	15 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98797269
Fax Number	
Contact Number	OTHERS-98797269
Email Address	NOEMAIL

Address	BLK 663 YISHUN AVENUE 4 #02-211
Postcode	760663
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	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?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8522999 - FAX NO: 68522239
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20181119/2116

#### 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	PJR9405
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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

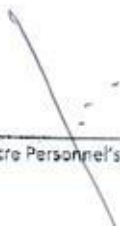
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may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

20/11/2018

please refer to police report no. T/2018/119/2116.

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

20/11/2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





# SINGAPORE POLICE FORCE



T/20181119/2116

1 of 3

Report No. T/20181119/2116

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/11/2018 16:35	Vide Report No.: J/20181119/0131	Station Diary No.: 80
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**Informant's Particulars**

Name of Informant: CHUA KHIN KUANG, LOUIS			Address: APT BLK 663 YISHUN AVENUE 4 #02-211 SINGAPORE 760663		
ID Type / ID No.: NRIC NO / S8308393Z			Contact No.: Home/Office: Mobile: 98797269		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 35	Date of Birth: 11/03/1983	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Unemployed			Driving Licence Information: Class: 3,4,5 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/11/2018 14:00	Type of Location:
Location: Along Road 1 WOODLANDS ROAD  Woodlands Road towards Woodlands Checkpoint				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PJR9405	Prime Mover	VOLVO		White	Totally Damaged	2
SKP657R	Car	VOLKSWAGO N		Silver	Totally Damaged	0

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin:

Yishun South N.P.C

32 Yishun Street 81 SINGAPORE 768456

Tel No: 1800-8522999

Report No. T/20181119/2116

**CONTINUATION OF REPORT**

Vehicle Owner			
Name	CHUA KHIN KUANG, LOUIS	ID No.	S8308393Z
Related Vehicle	SKP657R (Car)	Contact No.	98797269
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 19/11/18 at about 1400hrs, I was driving my car (Silver, Volkswagon, vehicle registration plate number, SKP657R) along Woodlands Road towards Woodlands checkpoint. There is no other passenger inside my vehicle and my vehicle does not have any in car camera. As the traffic volume was quite heavy and jammed at that point of time, I decided to make a U turn back towards Kranji MRT station. I then showed signal that I want to change lane to the right lane so I can proceed to the U turn lane. When my vehicle is half way into the right lane, one white prime mover (White, Volvo, vehicle registration plate number, PJR9405) also move forward and eventually the left bumper of the prime mover hit onto my right passenger door however the other driver did not stop the vehicle and continue to move forward and eventually the left bumper of the prime mover also hit onto the right driver door of my vehicle. As the prime mover is unable to move forward, it stopped. I then came down from my vehicle from the other side and had exchanged particulars with the other driver namely, Ahmad Barizi Bin Azmudin, Malaysia IC: 881128-26-5351, residing at No 235 Lorong Markisa 18 Taman Markisa 86900 Endau, Johor. I also called for Police and Traffic Police subsequently came to scene as well, report reference, J/20181119/0131. I was advised to make a Traffic Police to lodge a report with regards to the said incident.





**SINGAPORE  
POLICE FORCE**



T/20181119/2116

3 of 3

Report No. T/20181119/2116

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

**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:

F /

Sgt 2 OOI JIA JUN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

19/11/2018 16:35

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MOHAMED HUSNUL TAUFIQ BIN MD  
YUSOF

Contact No.: 65476358

Classification Of Case:

SN 085

Authentication Stamp

NP168



Signature:

Singapore Police Force

VEHICLE NO:	SKP657R	MAKE & MODEL:	VW Jetta
DATE OF ACCIDENT	19 / 11 / 2018		
TIME OF ACCIDENT	1405	AM/PM	
LOCATION OF ACCIDENT	Woodlands Road towards Woodlands checkpoint		
EXACT PURPOSE USE DURING ACCIDENT			
NAME OF OWNER	Chua Khin Kuang, Wuv		
TEL NO	98797269		
NRIC	S0300393E		
CLAIM TYPE	OD / THIRD PARTY / <u>REPORTING ONLY</u>		
INSURANCE CO	China Taiping		
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft		
POLICY NO.	DMPCA 309550171		
NAME OF DRIVER	As Above / If No:		
NRIC	Any Passengers: NIL		
DATE OF BIRTH	11 / 03 / 1983		
OCCUPATION	Outdoor / <u>Indoor</u>		
DATE OF DRIVING PASS			
GENDER	<u>Male</u> / Female		
CONTACT NO.	Office: Home:		
ADDRESS	Blk 663 Yishun Ave 4 #02-211 65760663		
DRIVER HAVE ANY OWN VEHICLE	NO / If yes: Reg No:		
RELATIONSHIP	Employee / If No:		
WEATHER CONDITION	<u>Clear</u> / Raining / Other:		
ROAD SURFACE	<u>Dry</u> / Wet / Other:		
ANY INJURIES	<u>No</u> / If yes: Who?		
CONTACT NO.			
POLICE REPORT	No / If yes: Where? T/2018/11/9/2116 (Yishun station p.c.)		
VEHICLE B NO.	PJR9405 Any Passenger: 02		
NAME			
CONTACT NO.			
VEHICLE C NO.	Any Passenger:		
VEHICLE D NO.	Any Passenger:		
VEHICLE E NO.	Any Passenger:		
VEHICLE F NO.	Any Passenger:		
ANY WITNESS			
WITNESS CONTACT NO.			
OWNER/DRIVER EMAIL			
PARTICULAR WORKSHOP	NEW HOCK TECK MOTOR PTE. LTD.		
	1 Kaki Bukit Ave 5, Blk C #01-43		
	Autobay@Kaki Bukit Singapore 417883		
TEL NO	TEL: 6747 9241		
CONTACT PERSON	Reena / Sukyi		
FAX NO.	FAX: 6741 7276		
EMAIL	reena@nhtmotor.com		
	admin@nhtmotor.com		



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8308393Z



Name

CHUA KHIN KUANG, LOUIS

蔡 錦 燿

Race

CHINESE

Date of birth

11-03-1983

Sex

M

Country/Place of birth

SINGAPORE



5282743



NRIC No. S8308393Z



Date of issue

20-03-2014

Address

APT BLK 663 YISHUN AVENUE 4  
#02-211  
SINGAPORE 760663



Licence Number: **S8308393Z**

Name:

**CHUA KHIN KUANG, LOUIS**

Birth Date: **11 Mar 1983**

Issue Date: **13 Nov 2003**



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

- Class 3 Motor cars  $\leq$  3000 kg with  $\leq$  7 passengers, exclusive of the driver; and motor tractors/vehicle:  $\leq$  2500 kg
- Class 4 Heavy motor cars and motor tractors  $>$  2500 kg
- Class 5 Motor vehicles  $>$  7250 kg not constructed to carry any load

**DATE**  
13 Nov 2003

27 Apr 2009  
19 Sep 2005

S8308393Z

S / No. 9000109035

NP 428A





## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

\$1024.69

CERTIFICATE No.	DMPCSN3095501700	Engine No : CAV154915 Chassis No: WVVZZZ1KZAM097522
Index Mark and Registration Number of Vehicle	SKP657R	
Name of Policy Holder	MR CHUA KHIN KUANG, LOUIS	
Effective date of the Commencement of Insurance for all purposes of the Regulations, Ordinance or Enactment	16 DECEMBER 2017	NAMED DRIVERS EX SECT. I.....S\$500.00 IN ADDITION TO NAMED DRIVERS EX: EX SECT. I - AGE <= 25.....S\$3,000.00 EX SECT. I - AGE >= 26.....S\$500.00 * AGE AS AT DATE OF ACCIDENT EX ON WINDSCREEN.....S\$100.00
Date of Expiry of Insurance	15 DECEMBER 2018	
Persons or Classes of Persons entitled to drive *		

- (A) THE POLICYHOLDER.  
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.

PROVIDED THAT THE PERSON DRIVING IS PERMITTED IN ACCORDANCE WITH THE LICENSING OR OTHER LAWS OR REGULATIONS TO DRIVE THE MOTOR VEHICLE OR HAS BEEN SO PERMITTED AND IS NOT DISQUALIFIED BY ORDER OF A COURT OF LAW OR BY REASON OF ANY ENACTMENT OR REGULATION IN THAT BEHALF FROM DRIVING THE MOTOR VEHICLE.

### 3. Limitations as to use: \*

USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS.  
THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS / THEFT) WILL BE DOUBLED.

ONE TIME WAIVER OF EXCESS FOR THE FIRST S\$1,000 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

HIRE PURCHASE CO. : UNITED OVERSEAS BANK LIMITED AS HP OWNER

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

**I/We 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 Part IV of the Road Transport Act, 1987 (Malaysia). Please see reverse For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



德威信貨私人有限公司  
TECK WEI CREDIT PTE LTD  
Co. Reg. No. 200512300K  
210 Turf Club Road, The Grandstand  
Lot A8 Singapore 287995  
Tel: 6465 0020 Fax: 6465 0017  
Email: info@teckwei.com.sg

undersigned By:

Authorised Officer

Authorised Signatory