

# NATIONAL Assessment Centre Services.

(ref 1 Jan05) **NA418954360**

Date In: <b>28/11/2018</b> <b>18:15</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NBA/20180021521/1</b>	SAS e-filing		
Veh No: <b>SC4 30625</b>	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: <b>27/11/2018</b> <b>14:25</b>	I-Motor Claim Form	<b>MT/1021809-001</b>	<b>28/11/2018</b>
OD: TP <u>Reporting Only</u>	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		<b>18:49</b>
	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: <b>SDT 8591 E</b>	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: ( )

Repairer: **105/100/100/0789/001/001**

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo [Repair Cost > \$3000] ( )

Injury: \_\_\_\_\_

Date/Time:	Assign:

<b>NA1007216</b>	Invoice Preparation Checklist
Client's Particulars:	1) AR: Accident Reporting (\$30)
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$40)
Contact No:	3) TP: Towing Fee \$40/145
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) NI: Idao DA + SMRT Survey \$160
	8) NTUC Additional Services:
	ON:
	*NS: Courtesy Car / Tpl Allowance \$5
	*NG: Repair Co-ordination \$10
	*NZ: Post Repair Inspection \$25
	*ND: DV / Collect Excess Coordination \$5
	TP (N1): TP (N-in INC) against INC \$20
	9) NI2: Idao Mobile \$0
	Invoice dated _____ Fee Charged _____
	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	28/11/2018 18:10
Date Of Accident	27/11/2018 14:25
Exact Location Of Accident	MAPLETREE BUSINESS CITY (MBC) CARPARK LEVEL 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH3062S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHIN LI NAH
NRIC No.	S7643540E
Email Address	HIJEFFTAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92705238
Alternative Phone No	OTHERS-98800489

### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	5085419759-02
Cover Note Number	

### Driver

Name of Driver	TAN JOO KEONG JEFFREY
NRIC No.	S7710756H
Date Of Birth	20/04/1977
Occupation	INDOOR
Date Of Driving Pass	23/01/2002
Driving Experience	16 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98800489
Fax Number	
Contact Number	OTHERS-92705238
Email Address	HIJEFFTAN@GMAIL.COM

Address	20 OXFORD ROAD #02-10
Postcode	218815
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	2
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

PLEASE REFER TO SKETCH PLAN (TYPE OF COLLISION IS HEAD TO SIDE)

#### 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	SDT8591E
Vehicle Make/Model/Colour	BMW
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ARUL
NRIC/Passport Number	
Contact Number	97866908
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:

28/11/2018  
4:00 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

28/11/2018  
4:00 pm

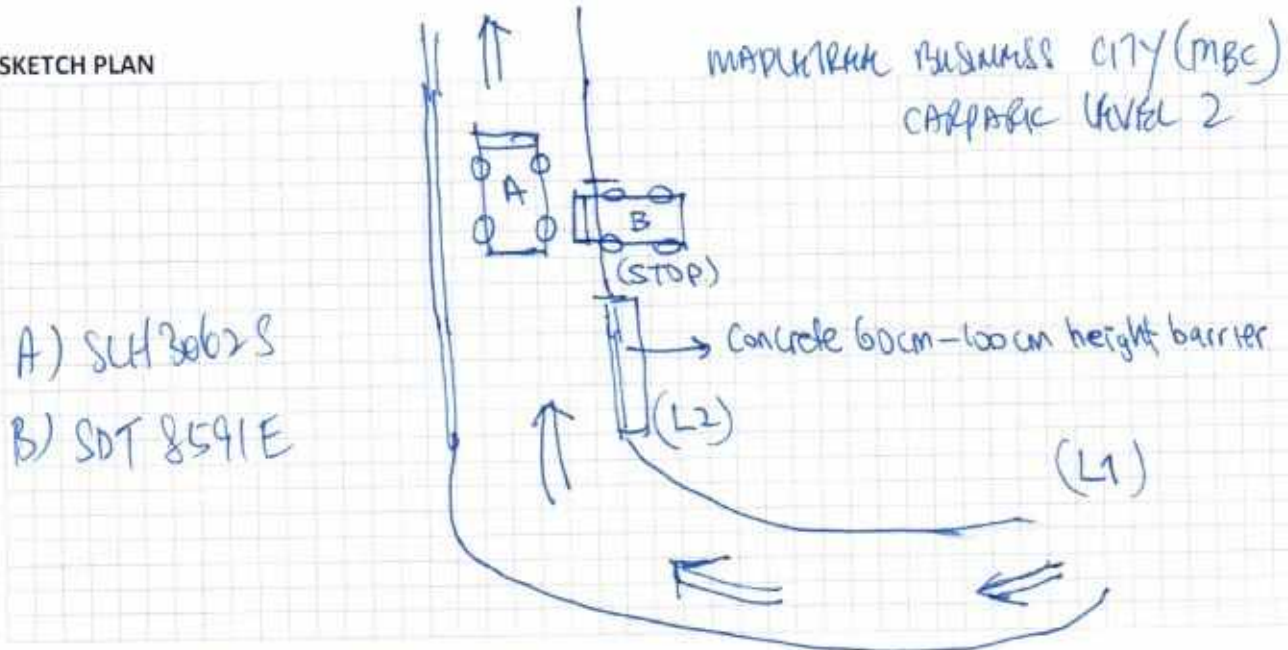
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

28/11/2018  
Keshi [Signature]

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving up (A) Mapletree Business City (MBC) Carpark ramp from Level 1 to 2. I have the right of way to go straight up after the ramp. There was no car in front of me.

The other party (B) cut into my lane suddenly, perpendicularly 90° from my right side, without stopping at all on the stopping line, and hit me directly on my rear back (right) passenger door. I can't see the car behind a 60cm-100cm concrete barrier.

The other party had scratches on his front left bumper. I had damages & scratches and dent on my rear right passenger door.

## DECLARATION

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

Policyholder's Signature  
Date & Time:

Driver's Signature JOSEPH TAN  
(If driver is not the policyholder)  
Date & Time: 28/11/2018 4pm

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



## Claim Handling

Accident MT/1021809

Policy No.	5085419759-02	Vehicle No.	SLH30625	GST Registration No.	
Certificate No.				Policyholder NRIC	S7643540E
Policyholder Name	CHEN LI NAH	Cover Type	drive CLASSIC	Loading	0
Product Code	PRIVATE CAR INSURANCE	Contact No. (Office)		Contact No. (Home)	
Contact No. (Mobile)	92705238	Special Remark		eCode	No
Email Address		TCA	Yes	eCode Reason	
KPK	Yes	NCD Entitlement(%)	50	Private Hire	No
NCD Protection	Yes				

## Accident Details

Report Date	28/11/2018 18:48	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	27/11/2018	Time of Accident hh:mm	14:25	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	MAPLETREE BUSINESS CITY (MBC) CARPAK LEVEL 3				

## Excess

Own Damage Excess	500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

## Benefits

GST Registered Information	No	GST Registration Data	Yes
GST Registered		GST Status Verified	
GST Registration No.			
Modification History			

## Policyholder Mailing Address

Address 1	20 OXFORD ROAD	Address 2	# 02-10 KENTISH GREEN	Address 3	SINGAPORE 219815
Address 4		Address Type	Singapore address	Post Code	219815
Unit No.		Related Policy Number	5085419759-02		

## Q1 Driver Info

Driver Name	TAN JOO KEONG JEFFREY	Driver Type	Named Driver	Driver DOB	20/04/1977
Unnamed driver Name		Driver NRIC	S7710756H	Driving Experience	16
Register Date of Driver License	23/01/2002	Driver Age	41	Contact No. (Home)	
Contact No. (Mobile)	98800489	Contact No. (Office)		Address 3	
Address 3		Address 2	Foreign address	Post Code	
Address 4		Address Type			
Unit No.		Driver Vehicle No.	SLH30625	Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	Yes & No				

Declaration		Any Injury?	Yes & No
Breathalyzer or Blood Test Reading?	0 mg		

## Modification History

Claims 003

New

## Claim Type \*

Contact No. (Mobile)

Email Address

Claim Description

Preferred Workshop	Insured Liability	Not at Fault	GIA report	Received	28/11/2018 18:48	Claim Close Date	28/11/2018
Revised No. Finalisation	Revised Option	Preferred Workshop, Name unknown					
Date Registered							

Report Taken By

Print AX letter

Save Submit

## Attachment

Accident No.	MT/1021809	Claim No.	003
Last Doc. Received	Yes No	Upload Date	28/11/2018 18:48
Path *		Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
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			

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 28 Nov 2018 18:48		Photo	Normal	Photos 2018-11-28



NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 28 Nov 2018 18:49	Photos	Normal	Photos 2018-11-28
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 28 Nov 2018 18:49	Photos	Normal	Photos 2018-11-28
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 28 Nov 2018 18:49	Photos	Normal	Photos 2018-11-28
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NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 28 Nov 2018 18:49	Photos	Normal	Photos 2018-11-28
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 28 Nov 2018 18:49	Photos	Normal	Photos 2018-11-28
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 28 Nov 2018 18:49	SAS	Normal	SAS 2018-11-28
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 28 Nov 2018 18:49	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-11-28

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Display in New Window

Scan and uploading

# ACCIDENT STATEMENT

ACCIDENT DATE: (27 / 11 / 2018) (DD/MM/YYYY). TIME: (14 : 27) (HH:MM)

LOCATION: Magnetree Business City (MBC) carpark L2

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLH 3062 S  
 b) INSURANCE COMPANY: NTUC Income  
 c) POLICY NUMBER: 50854 19759-02  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: Honda Vezel  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: Private / parking  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: CHIN LI MAH (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S7543540E CONTACT: 92705238  
 c) ADDRESS: 20 OXFORD RD #02-10 S (218815)

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: JEFFREY TAN (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 98800489  
 c) ADDRESS: 20 OXFORD RD #02-10 S (218815)

\* d) DATE OF BIRTH: (20 / 04 / 1977) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 23/01/2002

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) NO  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: SPOUSE

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO) NO

7. a) REPORTED TO POLICE (YES / NO) NO

IF YES, PLEASE STATE WHICH POLICE STATION: N.A

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SDT 8591E MODEL: BMW 5 Black  
 b) DRIVER'S NAME: ARI  
 c) NRIC/FIN/PASSPORT: - CONTACT: 97866908

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: - MODEL: -  
 e) DRIVER'S NAME: -  
 f) NRIC/FIN/PASSPORT: - CONTACT: -

\* No of passengers  
 (Including driver)  
(1)

\* No of passengers  
 (Including driver)  
(1)

\* No of passengers  
 (Including driver)  
( )

Email = hijefftan@gmail.com

VIDEO = Yes



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7710756H



Name  
TAN JOO KEONG JEFFREY

陈裕强

Race  
CHINESE

Date of birth  
20-04-1977

Country of birth  
SINGAPORE

Sex  
M

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7710756H

Name  
TAN JOO KEONG JEFFREY

Birth Date: 20 Apr 1977

Issue Date: 17 Jun 2010




001867069G

4039467



NRIC No. S7710756H

Date of issue  
08-08-2007

20 OXFORD ROAD #02-10  
SINGAPORE 218815

NRIC No. S7710756H Date: 25/11/2009 (R) No. 6289467


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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 23 Jan 2002

NP 428A

Licence No: S7710756H



## 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)

**Certificate Number:** 5085419759-02

**Cover :** drivo CLASSIC

- |   |                   |
|---|-------------------|
| 1. Index mark and Registration Number of Vehicle  | : <b>SLH3062S</b> |
| Chassis Number  | : RU31212967      |
| 2. Name of Policyholder   | : CHIN LI NAH     |
| 3. Effective Date of Insurance  | : 28 Oct 2018     |
| 4. Expiry Date of Insurance   | : 27 Oct 2019     |
| 5. 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/her 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. |                   |
| 6. Limitations as to Use#   |                   |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.   |                   |

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: CHIN LI NAH(CHEN LINA)
NAMED DRIVER (1)	: TAN JOO KEONG JEFFREY
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: TOKYO CENTURY LEASING (SINGAPORE) PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : VV INSURANCE AGENCY PTE. LTD. (00000614878)

Date of Issue : 17 Sep 2018 21:18 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

\_\_\_\_\_  
Authorised Officer



\_\_\_\_\_  
Chief Executive