

NATIONAL Assessment Centre Services (with 11/1/00) **MAVA 48156910**

Date In: 04/12/2018 15:20	Job description	Date & Time Completed	Done by
Ref No: NBA/DAI/002814/4	SAS e-illing		
Veh No: SPG 8914	E-mail (within 3hrs, AIC 3hrs)		
P.O.A: 04/12/2018 12:35	e-Motor Claim Form		
OD TP Reporting Only	e-Motor W/O (within 30 mins, TP 3hrs)		
	e-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/WKSO		

Preferred Wksp / INC Assign Wksp / OW: () Tel: () Fax: ()

TP Particulars: Yeh No: **FL 147R** 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 repair.

() 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

Human's Particulars	Invoice/Reparation Charge (USD)	SWISS (S)	WARRANTY (S)
NAB07924	1) AR: Accident Reporting (\$30)		
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$30)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damage Portion:	4) FT: Follow-Through Survey \$150		
C. Checked by (Engr-In-Charge):	5) XT: Follow-Through Survey (Resurvey) \$20		
	6) TR: Re-inspection \$75		
	7) NI: Ideal DA + SMRT Survey \$150		
	8) NTUC Additional Services		
	9) NI: Ideal Mobile		
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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	04/12/2018 15:20
Date Of Accident	04/12/2018 12:35
Exact Location Of Accident	AYE TURNING INTO CLEMENTI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDG8191U
Insured/Policyholder	
Name Of Registered Owner	THAM BOK MUN
NRIC No	S1734983Z
Email Address	KMBTHAM@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-94240992
Alternative Phone No	OTHERS-94240992

Vehicle Particulars

Manufacturer	VOLVO
Model	S90 T5
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00418372/01
Cover Note Number	

Driver

Name of Driver	THAM BOK MUN
NRIC No	S1734983Z
Date Of Birth	23/04/1966
Occupation	INDOOR
Date Of Driving Pass	09/03/1985
Driving Experience	33 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94240992
Fax Number	
Contact Number	OTHERS-94240992
Email Address	KMBTHAM@HOTMAIL.COM

Address	3 MOUNT SINAI RISE #18-09 THE MARBELLA
Postcode	276954
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	COLLISION - HEAD TO REAR
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

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	FS1473R
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	CHIANG WEI KEAT
NRIC/Passport Number	S9630143Z
Contact Number	84844167
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

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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.

Kemelanthan

Policyholder's Signature
Date & Time:

04/12/2018 / 1500 hrs

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

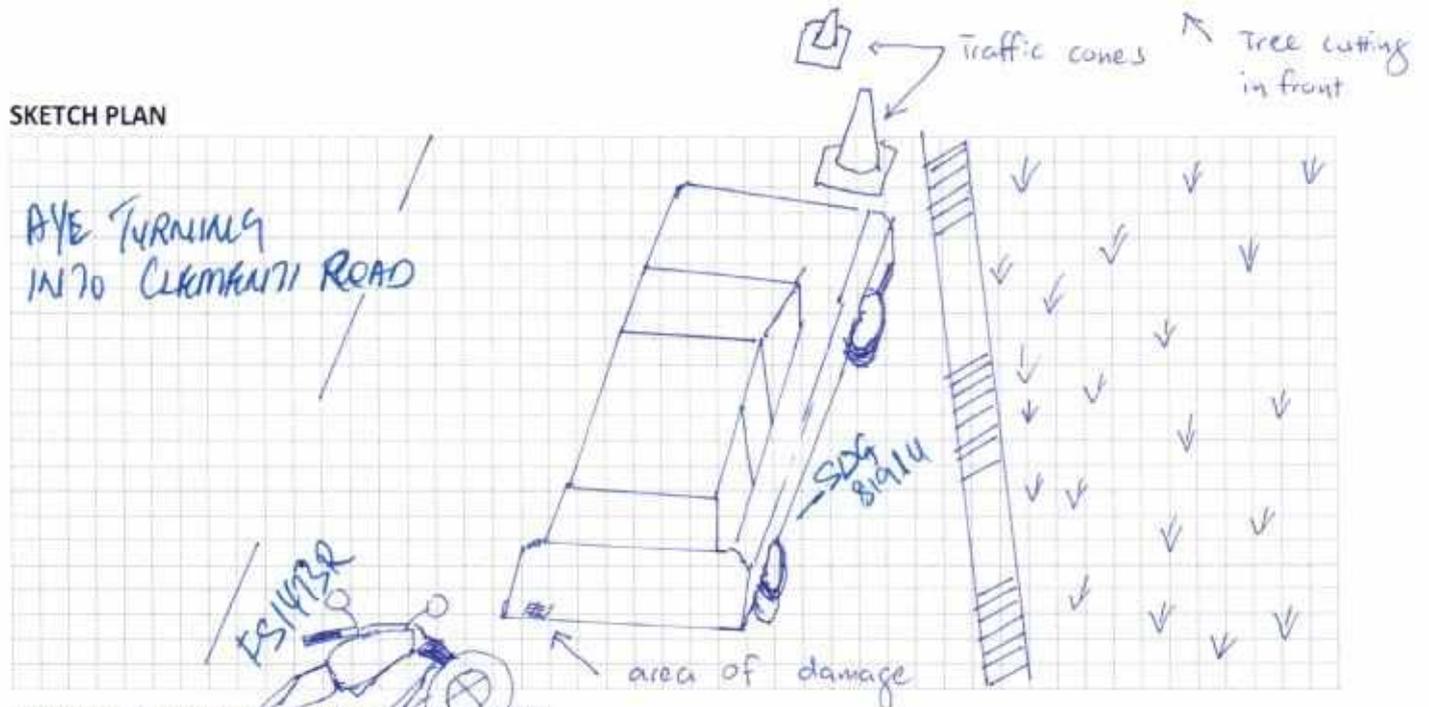
04/12/2018
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Karl, Notary

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving my car (SGG 81914) along AYE and exiting at Exit 9 to Clement Road on 04/12/2018 at approximately 12:36pm. Upon entering the exit side road, suddenly I noticed that the road in front of my car was blocked by several traffic cones along the side of the right kerb (apparently, there was some tree cutting exercise ahead). Consequently, I have no choice but to bring my car to an eventual stop. Upon complete stop, suddenly I heard a low "thump" sound and realised that a motorbike knocked into the back of my car. Immediately, I alighted from the car and approached the motorbike rider. Based on my observation and upon his confirmation, he was not injured. However, upon closer observation, it was noted that the collision has caused some scratch marks on the left side of the back bumper. Both the rider and myself exchanged personal particulars for further follow-up. There being nothing further to report.

DECLARATION

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

Renaldh Zulfar
 Policyholder's Signature
 Date & Time:
 04/12/2018 @ 3:20pm

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

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

ACCIDENT STATEMENT

ACCIDENT DATE: (04/12/2018) (DD/MM/YYYY). TIME: (12:36) (HH:MM)

LOCATION: AYER RAJAH EXPRESSWAY (TURNING INTO CLEMENTI ROAD)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SDC 81914
b) INSURANCE COMPANY: DIRECT ASIA INSURANCE
c) POLICY NUMBER: MT/00418372/01
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: VOLVO S90 T6
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: THAM BOH MUN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S1734983Z CONTACT: 94240992
c) ADDRESS: 33 MOUNT SINAI RISE #18-09
S 27 6954

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

*d) DATE OF BIRTH: (23/04/1966) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 09/03/1985

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

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

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

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: FS 1473R MODEL: HONDA MOTORCYCLE
b) DRIVER'S NAME: CHIANG WEI KEAT
c) NRIC/FIN/PASSPORT: S9630143Z CONTACT: 8484 4167

9. THIRD PARTY VEHICLE

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

* No of passenger
(including driver)
(1)

* No of passenger
(including driver)
(1)

* No of passenger
(including driver)
()

email = kbmtham@hotmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1734983Z



Name
THAM BOK MUN



Race
CHINESE

Date of Birth **23-04-1966** Sex **M**

Country of Birth
SINGAPORE

S1734983Z

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number **S1734983Z**

Name
THAM BOK MUN

Birth Date **23 Apr 1966**

Issue Date **27 Feb 2003**




00623800SD

0741818



S1734983Z



Blood Group **B+** Date of issue **20-01-1993**

33 MOUNT SINAI RISE #10-09
THE MARBELLA SINGAPORE 278854

NRIC No: S1734983Z Date: 03/07/2014

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

CLASS DATE

Class 3 **09 Mar 1965**

NP 428A

License No: S1734983Z





Contact us at
Hotline: (65) 6532 2888
E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

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

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	: MT/00418372/01
Type of Coverage / Driver Plan	: Car Comprehensive (Value Plus Plan)
1) Vehicle Registration No.	: SDG8191U
Chassis No.	: WBAFP32010C257572/-
2) Name of Policy Holder	: Tham, Bok Mun
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 08/11/2018 00:00
4) Date/Time of Expiry of Insurance	: 07/11/2019 23:59
5) Persons or Classes of Persons Entitled to Drive	
(a)	Any named person under the policy who is driving on the Policyholder's permission.
(b)	Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
6) Limitations as to use*	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
Sum Insured	: Market Value
Own Damage Excess	: S\$ 800.00 (before any applicable GST)
Windscreen Excess	: S\$ 100.00 (before any applicable GST)
Choice of workshop	: My Workshop/ My Authorised Distributor Workshop
Finance company / Hire Purchase	: OCBC Bank
Main driver	: Tham, Bok Mun
Ref	Named Driver
Named driver (1)	Chng, Bee Leng
Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.	