

NATIONAL Assessment Centre Services

(with Invoicing)

NA/157157

Date In: 06/12/2018 12:52	Job description	Date & Time Completed	Done by
Ref No: NA/157157	SAS e-Milling		
Veh No: 2851	E-mail (within 3hrs, AIC 3hrs)		
D.O.A: 05/12/2018 19:10	1-Motor Claim Form	MT/1022811-001	06/12/2018 19:27
OD / TP / Reporting Only	1-Motor W/O (within 3hrs, AIC 3hrs)		
	1-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel: (Fax: (
TP Particulars: Yeh No: SLG 428E	INC () / Non-INC ()	
Owner / Driver: (Tel: (
Policy No: (Period: (Cover Type: (
Confirmed by: (Date: (Time: (
Insured/Driver Liability: (%)	(Note: BSL 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	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	Action

NA/1807992

Customer's Particulars	Invoice / Reproduction Charge	Billable	Added Bill
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100)	INC (\$30)	
Damaged Portion:	3) TP: Towing Fee	\$40/\$45	
	4) FT: Follow-Through Survey	\$150	
	5) RT: Follow-Through Survey (Resurvey)	\$30	
	For claimant against INC Only (over 10 Jan 2003)		
	6) TR: Re-inspection	\$75	
	7) NI: New DA + SMRT Survey	\$160	
	8) NTUC Additional Services		
	Q11		
C. Checked by (Engr-In-Charge):	9) NI: Courtesy Car / Tpl Allowance	\$5	
	10) NI: Repair Coordination	\$10	
	11) NI: Post Repair Inspection	\$15	
	12) NI: DY / Collision Excess Coordination	\$5	
	TP (NI) / TP (Non INC) against INC	\$20	
	P) NI: Idle Mobile	\$0	
	Invoice dated	Not Charged	
	Invoice dated	Not 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	06/12/2018 12:52
Date Of Accident	05/12/2018 14:10
Exact Location Of Accident	ALONG BATTERY ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG2851L
Insured/Policyholder	
Name Of Registered Owner	NG BENG KIAT (HUANG MINGJI)
NRIC No	S7638412F
Email Address	DRAGONSPARK135@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96156332
Alternative Phone No	OTHERS-96156332

Vehicle Particulars

Manufacturer	YAMAHA
Model	SPARK-135CC
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5059659929-05
Cover Note Number	

Driver

Name of Driver	NG BENG KIAT (HUANG MINGJI)
NRIC No	S7638412F
Date Of Birth	15/11/1976
Occupation	OUTDOOR
Date Of Driving Pass	12/11/2007
Driving Experience	11 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96156332
Fax Number	
Contact Number	OTHERS-96156332
Email Address	DRAGONSPARK135@GMAIL.COM

Address	BLK 43 TEBAN GAEDENS ROAD #07-389
Postcode	600043
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	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	SLG4228E
Vehicle Make/Model/Colour	MAZDA 3
Details Of Properties	
Vehicle Category	PRIVATE CAR
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.
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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.

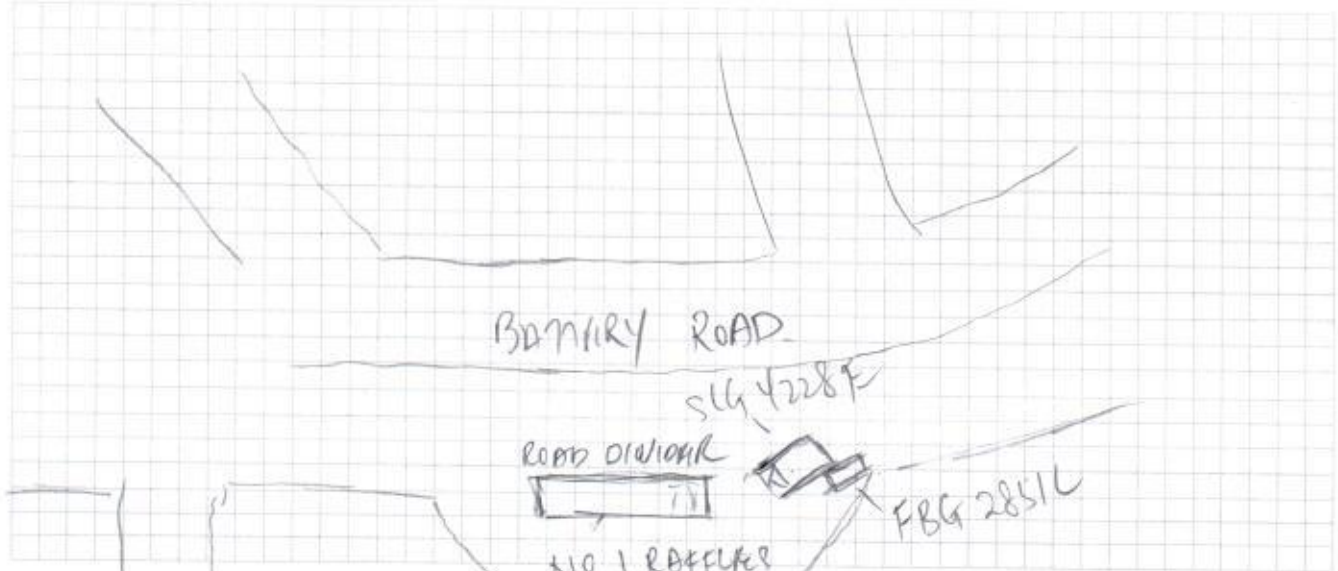
 06/12/18

Policyholder's Signature
Date & Time:

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

 06/12/2018
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 05/12/2018 AT ABOUT 14:12 I WAS RIDING MY BIKE FBG 2851L DOWN BATHURST JUST IN FRONT OF NO. 1 RAFFLES PLACE I WAS BESIDE A CAR SLG 4228F & SUDDENLY HE MAKE ABRUPTLY LANE CHANGE BECAUSE HE WANTED TO GO IN TO THE PICK UP POINT. MY BIKE HADN'T THE REAR LEFT PASSENGER DOOR. WE DID NOT EXCHANGE PARTICULAR BECAUSE HE WAS IN THE URGENT MATTERS ONLY WORK SOME PHOTOS THAT ALL

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.:

Claim Handling

Accident MT/1022811

Policy No.	5059659929-05	Vehicle No.	FBG2851L	GST Registration No.	
Certificate No.					
Policyholder Name	NG BENG KIAT (HUANG MINGJI)	Cover Type	Third Party, Fire & Theft	Policyholder NRIC	S7638412F
Product Code	MOTORCYCLE INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	96156332	Special Remark		Contact No.(Home)	
Email Address		TCA	= No Yes	eCode	No
KFK	= No Yes	NCD Entitlement(%)	20	eCode Reason	
NCD Protection	No			Private Hire	No
Accident Details					
Report Date	06/12/2018 14:23	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	05/12/2018	Time of Accident h:mm	14:10	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG BATTERY ROAD				
Excess					
Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
Policyholder Mailing Address					
Address 1	BLK 43 #07-389	Address 2	TEBAN GARDENS ROAD	Address 3	SINGAPORE 600043
Address 4		Address Type	Singapore address	Post Code	600043
Unit No.		Related Policy Number	5059659929-05		
OI Driver Info					
Driver Name	NG BENG KIAT	Driver Type	Main Driver	Driver DOB	15/11/1976
Unnamed driver Name		Driver NRIC	S7638412F	Driving Experience	18
Register Date of Driver License	02/02/2000	Driver Age	42	Contact No.(Home)	
Contact No.(Mobile)	96156332	Contact No.(Office)		Address 3	SINGAPORE 600043
Address 1	BLK 43 #07-389	Address 2	TEBAN GARDENS ROAD	Post Code	600043
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.	FBG2851L	Driver Insurer Company	NTUC
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any Injury?	Yes = No		

Modification History

Claim 001

New

Claim Type *	DD-MX	Insured Name	NG BENG KIAT (HUANG MINGJI)	Insured NRIC	S7638412F
Contact No.(Mobile)	96156332	Contact No.(Home)	65666345	Contact No.(Office)	
Email Address	DRAGONSPARK135@GMAIL.COM	OI Vehicle Number	FBG2851L	TP Vehicle Number	SLG42
Claim Description	FBG2851L / SLG4228E ON 5 Dec 2018				
Preferred Workshop		Insured Liability	Not at Fault		
Selected No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	05/12/2018 14:26	Claim Close Date		Date Received	06/12/2018
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/1022811	Claim No.	001
Last Doc. Received	* Yes No	Upload Date	06/12/2018 14:27
Path *			
Choose File	No file chosen	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		
Message Read			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Mi
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:27		Photos	Normal	Photos 2018-12-6	



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:27	Photos	Normal	Photos 2018-12-6
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:27	Photos	Normal	Photos 2018-12-6
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:27	Photos	Normal	Photos 2018-12-6
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:27	Photos	Normal	Photos 2018-12-6
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NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:26	Photos	Normal	Photos 2018-12-6
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:26	Photos	Normal	Photos 2018-12-6
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:26	Photos	Normal	Photos 2018-12-6
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:26	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-12-6
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Dec 2018 14:26	SAS	Normal	SAS 2018-12-6

Video List

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

ACCIDENT STATEMENT

ACCIDENT DATE: 05/12/2018 (DD/MM/YYYY). TIME: 14:12 (HH:MM)

LOCATION: Battery Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FDG 2851L
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: 5059659929-05
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Yamaha Spark 135
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: despatch
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: NG JING KEAT (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 37638412F CONTACT: 9656332
c) ADDRESS: Blk 43 Taman Gardens Road H07-389

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

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

*d) DATE OF BIRTH: 15/11/1976 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 12 Nov 2007

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 No)

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: SLG 4228F MODEL: MAZDA3
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

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

Email = dragonspark135@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7638412F



Name

NG BENG KIAT
(HUANG MINGJI)

Race

CHINESE

Date of birth

15-11-1976

Sex

M

Country/Place of birth

SINGAPORE



5709577

NRIC No. S7638412F

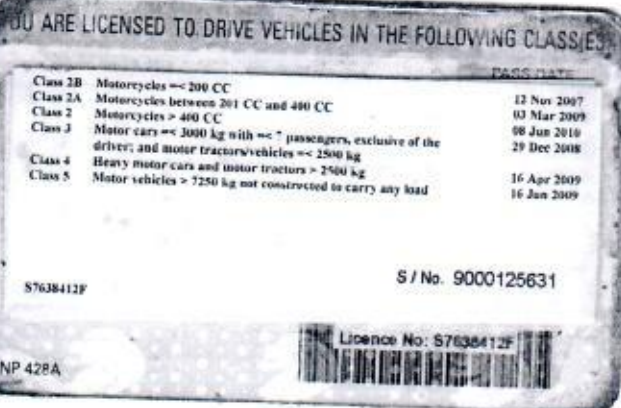


Date of issue

15-02-2017

Address

APT BLK 43 TEBAN GARDENS ROAD
#07-389
SINGAPORE 600043



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 : 5059659929-05

Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle

: FBG2851L

Chassis Number

: SYP303614

2. Name of Policyholder

: NG BENG KIAT (HUANG MINGJI)

3. Effective Date of Insurance

: 26 May 2018

4. Expiry Date of Insurance

: 25 May 2019

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

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)

: N/A

EXCESS (SECTION 2)

: N/A

EXCESS (THEFT OUTSIDE SINGAPORE)

: PLEASE REFER OVERLEAF

INSURE WITH COE

: YES

NAMED DRIVER (1)

: NG BENG KIAT

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: YEW HENG CREDIT ENTERPRISE 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 : TELESales-DIRECT MARKETING (00000601661)

Date of Issue : 10 May 2018 11:34 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive