

NATIONAL Assessment Centre Services [ver 1 Jan'05]

Ref No	Job description	Date & Time Completed	Done by
10/10/18	SAS e-filing		
NA/DA518022153/13	E-mail (Within 3hrs, AIC 2hrs)		
595638A	I-Motor Claim Form		
08/10/18 2155	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
IP Reporting Only	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner / WKSP		

Reported Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()
 Particulars: Vch No: **SFV36505** 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 repaier.
 Total Loss Case: to e-mail Insurer URGENTLY.

Type-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()
 Links: (INC hotline: 6788 6616)
 Apply for Transport Allowance () / Courtesy Car ()
 P/C Check / Post Repair Inspection ()
 Upload Resurvey Photo [Repair Cost > \$3000] ()

Time	Action

Client's Particulars	Invoice Description	Amount (\$)	Adm (\$)	Adm (\$)
NA1808107	1) AR: Accident Reporting (\$30);			
	2) DA: Damage Assessment (\$100);	INC (580)		
	3) TP: Towing Fee	\$40/\$45		
	4) FT: Follow-Through Survey	\$120		
	5) FT: Follow-Through Survey (Resurvey)	\$30		
	For claim against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection	\$75		
	7) N1: Idao DA + SMRT Survey	\$160		
	8) NTUC Additional Services:-			
	ON:			
	*N5: Courtesy Car / Tpt Allowance	\$5		
	*N6: Repair Co-ordination	\$10		
	*N7: Post Repair Inspection	\$25		
	*N8: DV / Collect Excess Coordination	\$5		
	TP (N11): TP (Non INC) against INC	\$20		
	9) N12: 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	10/12/2018 15:39
Date Of Accident	08/12/2018 21:55
Exact Location Of Accident	TAMPINES AVE 10 TWDS PASIR RIS DR 12 DIRECTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ638A
Insured/Policyholder	
Name Of Registered Owner	SHAMSUDIN BIN AZIZ
NRIC No	S0103105H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98346880
Alternative Phone No	OTHERS-66560350

Vehicle Particulars

Manufacturer	AUDI
Model	Q5
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/00271029/03
Cover Note Number	

Driver

Name of Driver	SHAMSUDIN BIN AZIZ
NRIC No	S0103105H
Date Of Birth	06/08/1953
Occupation	OUTDOOR
Date Of Driving Pass	19/11/1980
Driving Experience	38 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98346880
Fax Number	
Contact Number	OTHERS-66560350
EMail Address	NOEMAIL

Address	BLK 720 PASIR RIS ST 72 #04-101
Postcode	510720
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)	6
Passenger 1	NAME: : NORMADIAH GENDER: : FEMALE
Passenger 2	NAME: : NUR ALIA(CHILD) GENDER: : FEMALE
Passenger 3	NAME: : MUHAMMAD ARYAN HAQIM(CHILD) GENDER: : MALE
Passenger 4	NAME: : ROSNI BINTE SARIP GENDER: : FEMALE
Passenger 5	NAME: : SITI RASHIQAH GENDER: : FEMALE

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

PLS REFER TO THE ATTACHED STATEMENT.

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	SFV3650S
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Vehicle Make/Model/Colour	TOYOTA HARRIER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG CHIN KIONG
NRIC/Passport Number	S7127894H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

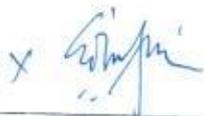
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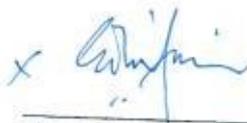
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

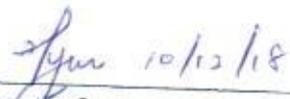
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

x 

Policyholder's Signature
Date & Time:

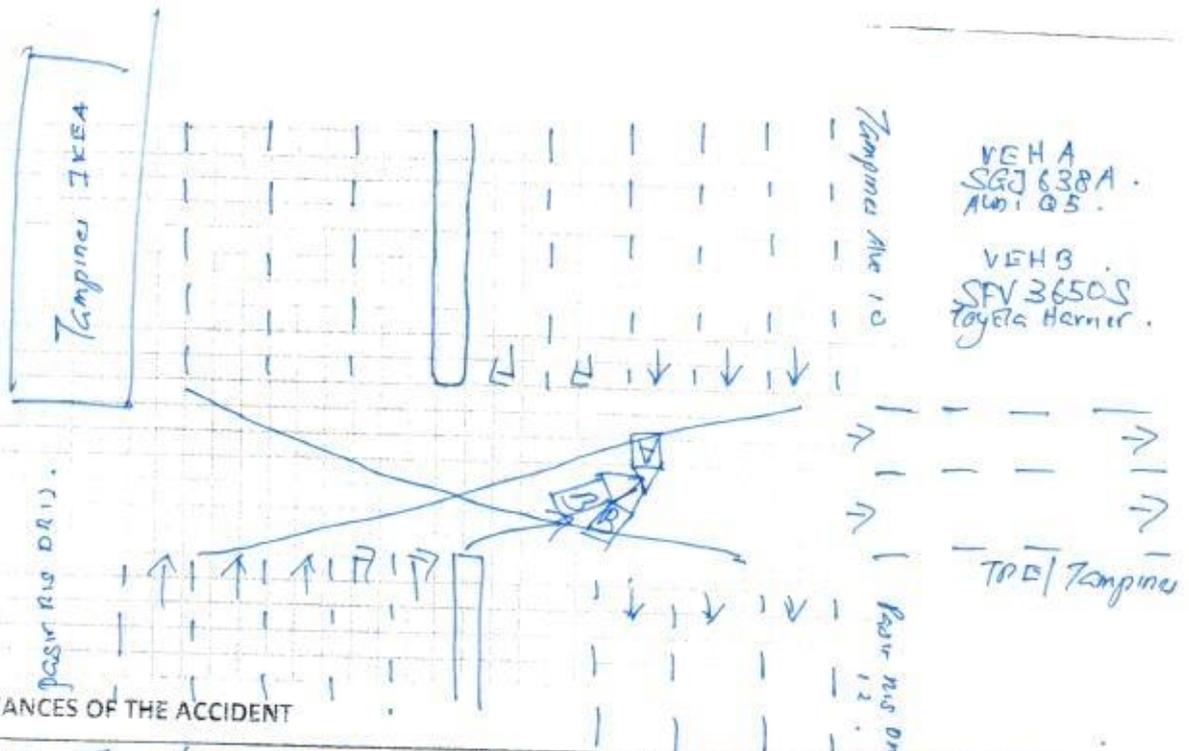
x 

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

 10/12/18

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

SKETCH PLAN



VEH A
SGJ 638A
Albi Q5

VEH B
SFV 3650S
Toyota Harrier

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 08/12/2018 at about 2155HRS I was travelling along Tampines Ave 10 on the 2nd lane towards Pasir Ris DR 12 direction. Traffic light was green and was in my favour. While I was approaching the Junction, Out of sudden vehicle B which was on the other side of rd turn right into the Junction to enter TPE Tampines expressway and hit onto the right front portion of my vehicle A.

DECLARATION

(We declare the foregoing particulars are true in every respect.

[Signature]

Policyholder's Signature
Date & Time:

[Signature]

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

[Signature] 10/12/18

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

Date of Accident: 08/12/2018 · Accident Time: 2155HRS (24-HR-Format)

Accident Place: Tampines Ave 10 towards Pasir Ris DR 12 Direction under flyover.

Vehicle No. (Car Plate No.): SGJ 638A · Make/Model: Audi Q5

Insurance Company: DIRECT ASIA · Policy No: MT/00271029/03

Owner or Company Name / IC No.: SHAM SUDIN BIN A212 S0103105H

Owner or Company Contact No.: 66560350 · Owner's Hp: 98346880 · Company Tel: _____

DRIVER'S Name / IC No.: SHAM SUDIN BIN A212 S0103105H

DRIVER'S Date Of Birth: 06/08/1953 · DRIVER'S License Pass Date: 19/nov 1980

Relationship of Owner & Driver: Spouse \ Parents \ Children \ Sibling \ Employee \ Others:

DRIVER'S Address: Blk 720 PASIR RIS ST 72 #04-101 S 510720

DRIVER'S Contact No./ Alt No.: (1) 98346880 (2) _____

DRIVER'S Occupation: INDOOR \ OUTDOOR (e.g. working inside or outside office)

Email Address: _____

Weather & Road Surface: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET

Reporting Type: Reporting Only \ Claim THIRD PARTY \ Claim Own Insurance

Number of Passengers (Including Driver): 6

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Any Injury (If YES, Pls state): _____

Other Party Driver's Particular (if any)

Vehicle No: <u>SFV 3650S</u>	Vehicle No: _____
Vehicle Make/Model: <u>Toyota Harrier</u>	Vehicle Make/Model: _____
Name Driver: <u>Ng Chin Kiang</u>	Name Driver: _____
IC No. Driver/Contact: <u>S7127894H</u>	IC No. Driver/Contact: _____

*** NEW - Passenger's name & gender:**

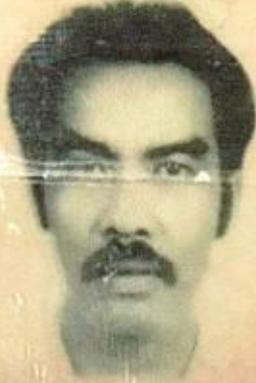
Normadich Ste Hanon S81315839H ·
 Nur ALIA Ste Herman (Child) 70930836E
 Muhammad Aryan Hagim Bin mohd uza (Child) 71401185S
 Rosni Binte Sarip S1259295G ·
 Siti Nashiqah Binte Jaffer S8307545G ·

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S0103105H



Name



SHAMSUDIN BIN AZIZ

شمسودين بن عزيز

Race

MALAY

Date of Birth

Sex

06-08-1953

M

Country of Birth

SINGAPORE



REPUBLIC OF SINGAPORE

DRIVING LICENCE

Driver Number

S0103105H

Name

SHAMSUDIN BIN AZIZ



Birth Date: 06 Aug 1953

Issue Date: 10 Mar 2003



000276591F

2215035



NRIC No: S0103105H

Blood Group Date of issue

B+ 11-07-1994

APT BLK 720 PASIR RIS STREET 72 #04-101
SINGAPORE 510720

NRIC No: S0103105H Date: 15-07-2004 No: 4967426

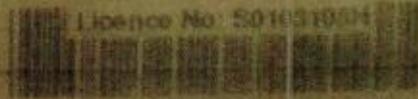
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

5.3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

19 Nov 1980



Licence No: S0103105H



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/00271029/03
Type of Coverage / Driver Plan	: Car Comprehensive (Value Plus Plan)
1) Vehicle Registration No.	: SGJ638A
Chassis No.	: WAUZZZ8R5CA089869
2) Name of Policy Holder	: Shamsudin Bin Aziz
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 25/10/2018 00:00
4) Date/Time of Expiry of Insurance	: 24/10/2019 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\$ 400.00 (before any applicable GST)
Windscreen Excess	: S\$ 100.00 (before any applicable GST)
Choice of workshop	: DirectAsia approved workshops
Finance company / Hire Purchase	:
Main driver	: Shamsudin Bin Aziz
Named driver	: None

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.

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 the Road Transport Act, 1987 (Malaysia).

Issued on: 26/09/2018

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur
Chief Underwriting Officer