

# NATIONAL Assessment Centre Services (wef 1 Jan 2015)

Date In: 10/12/2018 14:04	Job description	Date & Time Completed	Done by
Ref No: NA/INC18022169/K4	SAS e-filing		
Veh No: SLX8565R	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 08/12/2018 :18:25	i-Motor Claim Form	MT/1023243-002	11/12/18 11:15
OD: TP: Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	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: GBD 7526J	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)	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

NA1808091	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2015)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*N5: Courtesy Car / Tpf 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: Idac Mobile 30		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	
Auditors' Comments:-			
Cal 1:			
Cal 2 / 3:			



## 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 14:04
Date Of Accident	08/12/2018 18:25
Exact Location Of Accident	OUTRAM ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX8565R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PRESTIGE LEASING PTE. LTD
Co Reg No	201723326H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98236596
Alternative Phone No	OFFICE-98236596

### Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS HYBRID 1.8E CVT
Exact Purpose for which vehicle was being used at time of accident	WORK
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 HIRE

### 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	5094838100-01
Cover Note Number	

### Driver

Name of Driver	CHUA BENG POH
NRIC No	S1546470D
Date Of Birth	29/11/1962
Occupation	OUTDOOR
Date Of Driving Pass	18/08/1983
Driving Experience	35 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98236596
Fax Number	
Contact Number	OTHERS-98236596
Email Address	NOEMAIL

Address	BLK 524 BEDOK NORTH STREET 3 #07-372
Postcode	460524
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	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	GBD7526J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	IBRAHIM BIN AB WAHAB
NRIC/Passport Number	S8116713C
Contact Number	81215421
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.:





REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1546470D

Name  
CHUA BENG POH

蔡民寶

Race  
CHINESE

Date of Birth  
29-11-1962

Country of Birth  
SINGAPORE

Sex  
M





REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S1546470D

Name  
CHUA BENG POH

Birth Date 29 Nov 1962

Issue Date 10 Sep 2003




1461794



NRIC No. S1546470D



Blood Group B+ Date of issue 24-11-1993

APT BLK 524 BEDOK NORTH STREET 3 #07-372  
SINGAPORE 460524


NRIC No. S1546470D Date 10-03-2007(R) No. 5622276

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

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	09 Jun 1990
Class 2A	Motorcycles between 201 cc and 400 cc	09 Jun 1990
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	18 Aug 1983

NP 428A

Licence No: S1546470D



## 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:** 5094838100-01

**Cover :** Third Party, Fire & Theft

- |   |                             |
|---|-----------------------------|
| 1. Index mark and Registration Number of Vehicle  | : SLX8565R                  |
| Chassis Number  | : ZVW518042631              |
| 2. Name of Policyholder   | : PRESTIGE LEASING PTE. LTD |
| 3. Effective Date of Insurance  | : 05 Oct 2018               |
| 4. Expiry Date of Insurance   | : 04 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 or Hirer's business.  |                             |

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) 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)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: TECK WEI CREDIT 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 : ANIKA INS BROKERS & CONSULTANTS P/L (00000690423)  
Date of Issue : 05 Oct 2018 11:04 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.  Date of Accident   
Vehicle No. (For Motor)  Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5094838100-01		PRESTIGE LEASING PTE. LTD	201723326H	GFT	Third Party, Fire & Theft	SLX8565R	SLX8565R	05/10/2018	



### Policy Information

Policy No.	5094838100-01	Policyholder Name	PRESTIGE LEASING PTE. LTD	Policyholder NRIC	201723326H
Certificate No.					
Address	25 KAKI BUKIT ROAD 4 #01-62 SYNERGY @ KB SINGAPORE 417800				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	05/10/2018	Effective Date	05/10/2018 00:00	Expiry Date	04/10/2019 23:59
Third Party Excess	1500.00	Own damage Excess	0.00	Windscreen Excess	0.00
Additional Excess	0	OS Premium	55262.15		
Outside Singapore OD Excess	0.00	Outside Singapore TP Excess	1500.00		
Agent	ANIKA INS BROKERS & CONSUL	Agent Tel.	66729988	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

### Policyholder Mailing Address

Address 1	25 KAKI BUKIT ROAD 4	Address 2	#01-62 SYNERGY @ KB	Address 3	SINGAPORE 417800
Address 4		Address Type	Singapore address	Post Code	417800
Unit No.	01-62	Related Policy Number	5094838100-01		

### Insured Object: SLX8565R

### Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	05/10/2018 00:00	Basic Information Endorsement	000001286917206	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SFT970Z 05-10-2018 \$2,061.02 In view of this amendment, an additional premium of \$2,061.02 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.

## Claim Handling

The premium on this policy has not been collected.

Accident MT/1023243

Policy No.	5094838100-01	Vehicle No.	SLX856SR	GST Registration No.
Certificate No.				
Policyholder Name	PRESTIGE LEASING PTE. LTD	Cover Type	Third Party, Fire & Theft	Policyholder NRIC
Product Code	FLEET INSURANCE	Contact No.(Office)		Loading
Contact No.(Mobile)	98236596	Special Remark		Contact No.(Home)
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason
IVCD Protection	No			Private Hire

## ➤ Accident Details

Report Date	10/12/2018 17:00	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	08/12/2018	Time of Accident hh:mm	18:25	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	OUTRAM ROAD			

## ➤ Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess	0.00	
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00	

## ➤ Benefits

## ➤ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## ➤ Policyholder Mailing Address

Address 1	25 KAKI BUKIT ROAD 4	Address 2	#01-62 SYNERGY @ KB	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	01-62	Related Policy Number	5094838100-01	

## ➤ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	CHUA BENG POH	Driver NRIC	S15464700	Driving Experience
Register Date of Driver License	18/08/1983	Driver Age	56	Contact No.(Home)
Contact No.(Mobile)	98236596	Contact No.(Office)		Address 3
Address 1	BLK 524 #07-372	Address 2	BEDOK NORTH STREET 3	Post Code
Address 4		Address Type	Singapore address	
Unit No.	07-372			
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Com

## Declaration:

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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## Modification History

Claim 002 OD-MX

New

Claim Type *	OD-MX	Insured Name	PRESTI
Contact No.(Mobile)		Contact No.(Home)	
Email Address		Vehicle Number	SLX856
Claim Description	SLX856SR / GBD7526J ON 8 Dec 2018		
Preferred Workshop	Insured Liability	Partially at Fault	
Finalisation	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered		Received	
Report Taken By		Claim Close Date	11/12/2018 11:16
		Workshop Repairer	



Print AX letter

Save Submit

## Attachment

Accident No. MT/1023243 Claim No. 002  
 Last Doc. Received ☒ Yes ☐ No Upload Date 11/12/2018 11:15

Choose File	No file chosen	Path *	Category *	Confidential
Choose File	No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
Choose File	No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
Choose File	No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
Choose File	No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
Choose File	No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
Choose File	No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
Choose File	No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
Message Read				

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:16	NRIC/ Driving License	Normal	NRIC/ Driving L
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:14	SAS	Normal	SAS 2(
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:14	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:14	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:14	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:14	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:12	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:12	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:12	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:12	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:12	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:12	Photos	Normal	Photos ;
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:12	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Dec 2018 11:12	Photos	Normal	Photos ;