

NATIONAL Assessment Centre Services.

[ver 1 Jan'05]

12/12/18	Job description	Date & Time Completed	Done by
NA/CTI18002419/13	SAS e-filing		
GBA72560	E-mail (Within 8hrs, AIC 2hrs)		
12/12/18 1700	1-Motor Claim Form		
10 Reporting Only	1-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Wksp / INC Assign Wksp / QW: (MOTOR INTEL) Tel: Fax:

Particulars: Vch No: G49255H INC () / Non-INC ()

Driver / 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 repaler.

Total Loss Case: to e-mail Insurer URGENTLY.

Re-insured: () / Towed-In: () ; Invoice: YES () / NO () ; Towing Co: ()

1. Checklist: (INC Routine 6788 6016)	Date & Time Completed	Done by
2. Apply for Transport Allowance () / Courtesy Car ()		
3. C Check / Post Repair Inspection ()		
4. Upload Resurvey Photo [Repair Cost > \$3000] ()		

Time	Actions

NA1808206	Invoice Preparation Checklist	Am (\$)	Am (\$)
1) AR: Accident Reporting (\$30);			
2) DA: Damage Assessment (\$100); INC (\$80)			
3) TP: Towing Fee \$40/\$45			
4) FT: Follow-Through Survey \$120			
5) PT: Follow-Through Survey (Resurvey) \$30			
For claimant against INC Only (wef 10 Jan 2005)			
6) TR: Re-inspection \$75			
7) N1: Idao DA + SMRT Survey \$160			
8) NTUC Additional Services:-			
OD:			
*N5: Courtesy Car / Tpt Allowance \$5			
*N6: Repair Coordination \$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	Fax Charged		
Invoice dated	Fax 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	13/12/2018 14:02
Date Of Accident	12/12/2018 17:00
Exact Location Of Accident	AYE(TUAS) TWDS CLEMENTI RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA7256D
Insured/Policyholder	
Name Of Registered Owner	M/S SG LEASING PTE LTD
Co Reg No	201317520E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62587276

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1810731800
Cover Note Number	

Driver

Name of Driver	VAITHIYANATHAN SENTHIL
Passport No/FIN	G7633771W
Date Of Birth	23/07/1981
Occupation	OUTDOOR
Date Of Driving Pass	21/04/2010
Driving Experience	8 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98992001
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 135 LOR AH SOO #09-472
Postcode	530135
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	RAINING
Road Surface	WET

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	GY9255H
Vehicle Make/Model/Colour	NISSAN CABSTAR
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	APPUSAMY SELVAM
NRIC/Passport Number	0 35492038
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.:

SKETCH PLAN

AYE (TUAS) TOWARDS CLEMENTI RD



(A) GBA7256D

(B) GY9255H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/12/2018 at about 5.00pm, I was driving along Aye Teas Towards Clementi Road it was raining heavy, Suddenly Vehicle (B) GY9255H drive behind me and did not stopped In time and Collided onto my Vehicle (A) GBA7256D

DECLARATION

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.:

[Signature] 13/12/18

Date of Accident : 12/12/2018 Accident Time: 1700 (24-HR-Format)

Accident Place : AYE Tuas Towards Clementi Road

Vehicle No. (Car Plate No.) : GBA7256D Make/Model: Toyota Hiace

Insurance Company : China Taiping Policy No: DMCUSN1810731800

Owner or Company Name /IC No. : SGI Leasing Pte Ltd 201317520E

Owner or Company Contact No. : 62587276 Owner's Hp _____ Company Tel _____

DRIVER'S Name / IC No. : Vaithiyanathan Senthil

DRIVER'S Date Of Birth : 28-07-1973 DRIVER'S License Pass Date 21 April 2010

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

DRIVER'S Address : Blk 135 Lor ah Soo #09-472 Spore 530135

DRIVER'S Contact No./ Alt No. : (1) 98992001 (2) _____

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

Email Address : Sales@mia.com.sg

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

Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (Including Driver): One

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): No Injury

Other Party Driver's Particular (if any)

Vehicle No: <u>GY 9255H</u>	Vehicle No: _____
Vehicle Make/Model: <u>Cabstar</u>	Vehicle Make/Model: _____
Name Driver: <u>Appusamy Selvam</u>	Name Driver: _____
IC No. Driver/Contact: <u>35492038</u>	IC No. Driver/Contact: _____
<u>G6983679N</u>	

* NEW - Passenger's name & gender:



S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
DOKA ENGRG CONSTRUCTION

Sector: **CONSTRUCTION**



Name
VAITHYANATHAN SENTHIL
Occupation
MECHANICAL & ELECTRICAL (M&E) TECHNICIAN

S Pass No.
0 33093020



Date of Application

27-10-2017

Date of Issue

07-12-2017

Date of Expiry

07-12-2019



L8513000

VISIT PASS

Immigration Regulations

Name
VAITHYANATHAN SENTHIL



Date of Birth	Sex	Nationality
23-07-1981	M	INDIAN
FIN	Date of Issue	Date of Expiry
Q7633771W	07-12-2017	07-12-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait Photo

Licence Number: **G7633771W**

Name: **VAITHIYANATHAN SENTHIL**

Birth Date: **23 Jul 1981**

Issue Date: **05 Mar 2015**

Valid Till **20 Apr 2020**

Barcode: **002401958C**

SG 50

Driver

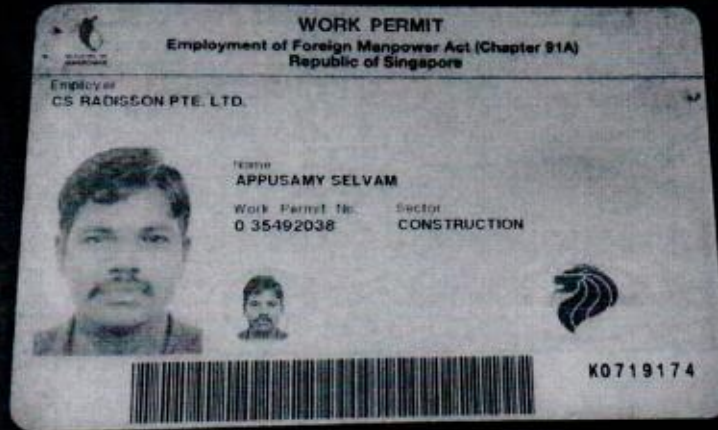
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor Cars= \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	21 Apr 2010

NP 428A

Licence No: **G7633771W**

Barcode



TP



TP



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Co. Reg. No. 200208384E

MZ407/C
E SN
AN0597A
Cov. Type: C

MOTOR COMMERCIAL VEHICLE

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)

ORIGINAL

CERTIFICATE No.	DMCVSN1810731800	Engine No : 1KD1671049 ChaN0: JTFHT02P600004968
1. Index Mark and Registration Number of Vehicle	GBA7256D	AUTOSAFE
2. Name of Policy Holder	M/S SG LEASING PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	27 March 2019	Excess Sect. I \$51,500.00 Excess Sect. II \$51,500.00 EX OW WINDSCREEN \$5100.00
4. Date of Expiry of Insurance	28 May 2019	

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.

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. And provided further that the Motor vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

B. Limitations as to use.*

- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- (3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

HIRE PURCHASE CO. : ABWIN PTE LTD AS HP OWNER

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: CHUA SUAT LAY SALLY
Authorised Officer

Authorised Signatory