

NATIONAL Assessment Centre Services.

[ref: JAR005]

MAA48166923

Date In: 28/12/2018 17:19	Job description	Date & Time Completed	Done by
Ref No: N/A/MAG/0023293/Y	SAS e-filing		
Veh No: 86K 8838 G	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 21/12/2018 12:15	I-Motor Claim Form		
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: 86M 8969 R	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 repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

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

Reminders:

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: _____

Date/Time	Actions

<p>MAA48166923</p> <p>Client's Particulars:</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments:</p> <p>Date: 1:</p> <p>2/3:</p>	<table border="1"> <tr> <th>Item</th> <th>Description</th> <th>Amount</th> </tr> <tr> <td>1) AR: Accident Reporting</td> <td>(330)</td> <td></td> </tr> <tr> <td>2) DA: Damage Assessment</td> <td>(5100); INC (330)</td> <td></td> </tr> <tr> <td>3) TP: Towing Fee</td> <td></td> <td>\$40/\$45</td> </tr> <tr> <td>4) FT: Follow-Through Survey</td> <td></td> <td>\$120</td> </tr> <tr> <td>5) FT: Follow-Through Survey (Resurvey)</td> <td></td> <td>\$30</td> </tr> <tr> <td colspan="2">For claiming against INC Only (over 10 Jan 2009)</td> <td></td> </tr> <tr> <td>6) TR: Re-inspection</td> <td></td> <td>\$75</td> </tr> <tr> <td>7) NI: Idao DA + SMRT Survey</td> <td></td> <td>\$160</td> </tr> <tr> <td>8) NTUC Additional Services:</td> <td></td> <td></td> </tr> <tr> <td>ON:</td> <td></td> <td></td> </tr> <tr> <td>*N5: Courtesy Car / Tpt Allowance</td> <td></td> <td>\$5</td> </tr> <tr> <td>*N6: Repair Co-ordination</td> <td></td> <td>\$10</td> </tr> <tr> <td>*N7: Post Repair Inspection</td> <td></td> <td>\$25</td> </tr> <tr> <td>*N8: DV / Collect Excess Coordination</td> <td></td> <td>\$5</td> </tr> <tr> <td>TP (N11): TP (Non INC) against INC</td> <td></td> <td>\$20</td> </tr> <tr> <td>9) N12: Idao Mobile</td> <td></td> <td>\$0</td> </tr> </table> <p>Invoice dated _____ Fee Charged _____</p> <p>Invoice dated _____ Fee Charged _____</p>	Item	Description	Amount	1) AR: Accident Reporting	(330)		2) DA: Damage Assessment	(5100); INC (330)		3) TP: Towing Fee		\$40/\$45	4) FT: Follow-Through Survey		\$120	5) FT: Follow-Through Survey (Resurvey)		\$30	For claiming against INC Only (over 10 Jan 2009)			6) TR: Re-inspection		\$75	7) NI: 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
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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	28/12/2018 17:19
Date Of Accident	21/12/2018 12:15
Exact Location Of Accident	ALONG MANDALAY ROAD INFRONT NATIONAL SKIN CTR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGK8838G
Insured/Policyholder	
Name Of Registered Owner	NG CHO LEE MRS. TAN CHO LEE
NRIC No	S0136612B
Email Address	CHOLEE@PHILLIP.COM.SG
Mobile Phone No	(LOCAL) +65-96316301
Alternative Phone No	OTHERS-96316301

Vehicle Particulars

Manufacturer	BMW
Model	520i
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 80222419 SMP
Cover Note Number	

Driver

Name of Driver	NG CHO LEE MRS. TAN CHO LEE
NRIC No	S0136612B
Date Of Birth	04/08/1944
Occupation	INDOOR
Date Of Driving Pass	09/06/1971
Driving Experience	47 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96316301
Fax Number	
Contact Number	OTHERS-96316301
Email Address	CHOLEE@PHILLIP.COM.SG

Address	BLK 50 COMMONWEALTH DRIVE #14-506
Postcode	142050
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	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) 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	SJM8969R
Vehicle Make/Model/Colour	MERCEDES BENZ
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

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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.

Policyholder's Signature

Date & Time: 28/12/18
4.40pm

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

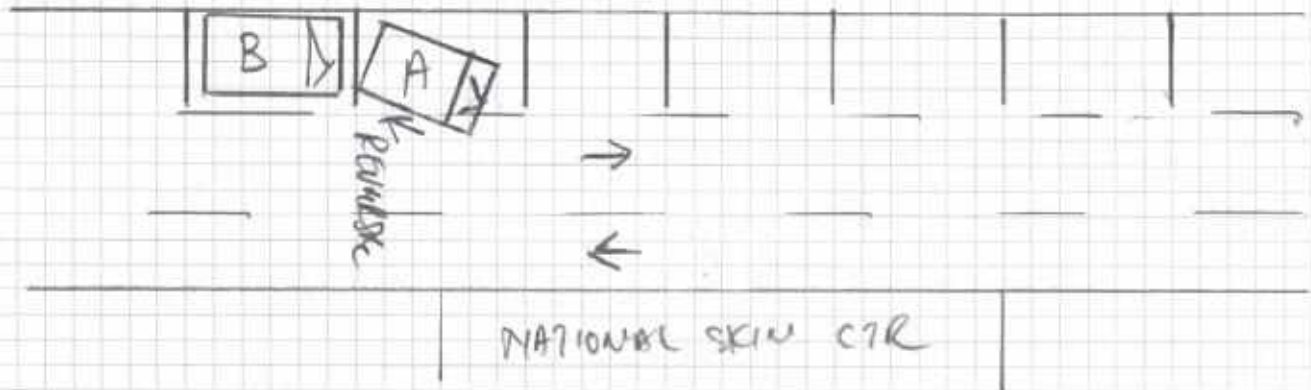
Name:
NRIC/FIN No.:

SKETCH PLAN

ALONG MANDALAY ROAD

A) SGK 8838 G

B) SJM 8969R



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

28/12/2018 12.17 I was at Mandalay Road
wanted to reversed my car, accidentally I bumped the
front bumper of SJM 8969R

DECLARATION

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

Policyholder's Signature

Date & Time: 28/12/2018
4.45pm

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name: Reshmi Lathnas
NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: 28/12/2018 (DD/MM/YYYY), TIME: 12:17 (HH:MM)

LOCATION: Mandelay Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: S4K 8838 G
b) INSURANCE COMPANY: MSIG Insurance Pte Ltd
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: BMW 5.20i
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: NG CHO LEE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S0136612 B CONTACT: 96316301
c) ADDRESS: 50 Commonwealth Drive
#14-506 S (142050)
* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: NG CHO LEE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S0136612 B CONTACT: 96316301
c) ADDRESS: 50 Commonwealth Drive
S (142050)
*d) DATE OF BIRTH: 04/08/1944 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 9 Jun 1971

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: SJM 8969 R MODEL: mercedes benz
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 = cholee@phillip.com.sg
VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0136612B



NG CHO LEE
MRS. TAN CHO LEE
黄楚丽

CHINESE
Date of birth: 04-08-1944
Sex: F
Country of birth: KELANTAN



S0136612B

REPUBLIC OF SINGAPORE — DRIVING LICENCE



License Number: S0136612B
Name: NG CHO LEE
Birth Date: 04 Aug 1944
Issue Date: 22 Sep 2003



000051214J

1136975



NRIC No: S0136612B




Shoulder: O+ Date of issue: 24-07-1993

APT BLK 50 COMMONWEALTH DRIVE #14-508
SINGAPORE 142050
NRIC No: S0136612B Date: 24/02/2014

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

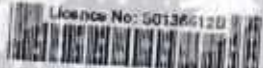
Class 2 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: 09 Jun 1971



NP 428A

License No: S0136612B





MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way #21-01 SGX Centre 2 Singapore 068807
Tel: (65) 6827 7888 Fax: (65) 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G



Certified True Copy

Certificate of Insurance

ORIGINAL

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1
Individual Ownership

SIME MOTOR PRIVATE
Comprehensive

Certificate No. B 80222419 SMP

Excess : SGD750

1. Index Mark and Registration Number of Vehicle
SGK8838G

2. Name of Policyholder
Ng Cho Lee Mrs Tan Cho Lee

3. Effective Date of the Commencement of Insurance for the purposes of the Act
25/06/2018

4. Date of Expiry of Insurance
24/06/2019

5. Persons or Classes of Persons entitled to drive*

Ng Cho Lee Mrs Tan Cho Lee

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* 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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT PERFORMANCE MOTORS LTD OR AT ANY WORKSHOP OF YOUR CHOICE.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.



Signature / Date

Counter-Signatory:

Sime Darby Insurance Brokers (Singapore) Pte. Ltd.

This certificate is not valid unless it is signed for & on behalf of the Company and Counter-Signed by a duly authorised representative of the Counter-Signatory.

XSIBSLC2018122816200521

MSIG Insurance (Singapore) Pte. Ltd.
Approved Insurers

Katherine Yeo
Senior Vice President, Brokers