

NATIONAL Assessment Centre Services

Date In: 29/12/2018 15:43	Job description	Date & Time Completed	Done by
Ref No: NA/TMI18023314/K4	SAS e-filing		
Veh No: SJC 3578X	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 06/12/2018 10:20	i-Motor Claim Form		
OD / TP / Repairing 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: SJJ95434, 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

NA1808591	Invoice Preparation Checklist	Amt (\$) In Bill	Amt (\$) Add Bill
Claimant's Particulars:	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: 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 2005)		
	6) TR: Re-inspection \$75		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*N5: Courtesy Car / Tp 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 30		
	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	29/12/2018 15:43
Date Of Accident	06/12/2018 10:20
Exact Location Of Accident	BLK 811 HOUGANG CENTRAL CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJC3578X
Insured/Policyholder	
Name Of Registered Owner	MS YEO I YOK
NRIC No	S0713483E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97436653
Alternative Phone No	OTHERS-97436653

Vehicle Particulars

Manufacturer	PERODUA
Model	KELISA GX M
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MV007512-R01
Cover Note Number	

Driver

Name of Driver	MS YEO I YOK
NRIC No	S0713483E
Date Of Birth	26/01/1941
Occupation	INDOOR
Date Of Driving Pass	24/06/1959
Driving Experience	59 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97436653
Fax Number	
Contact Number	OTHERS-97436653
Email Address	NOEMAIL

Address	BLK 467 HOUGANG AVE 8 #11-1520
Postcode	530467
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 (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

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	SJJ9543U
Vehicle Make/Model/Colour	
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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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:

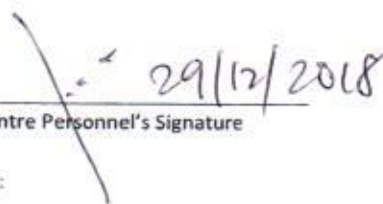
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

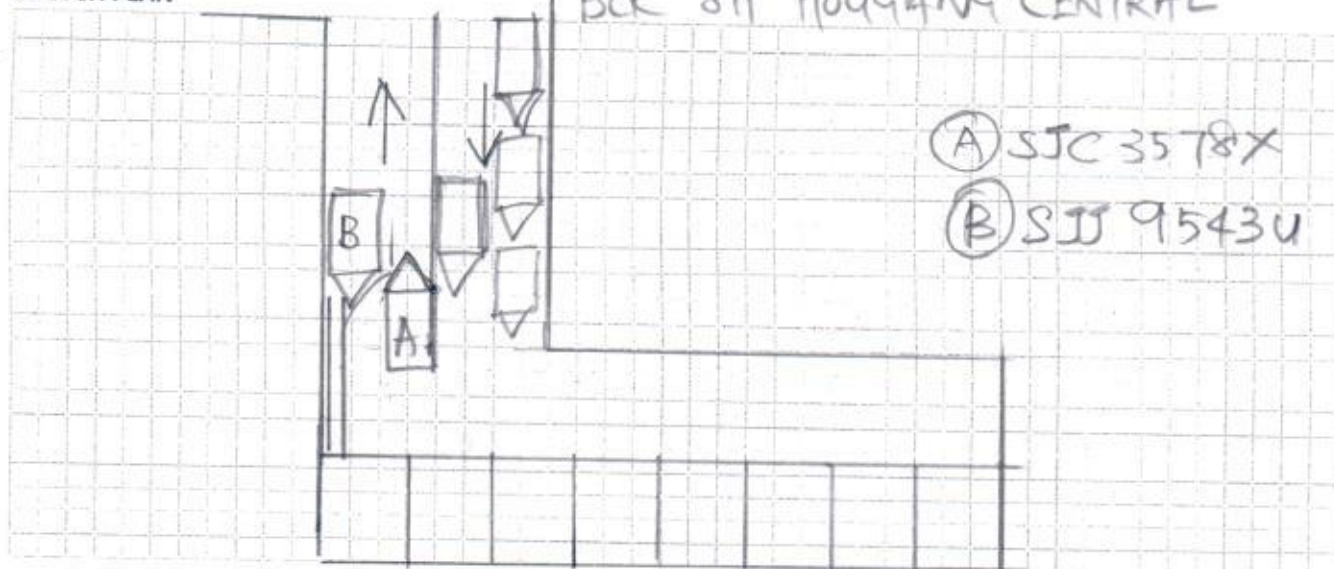


Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

SKETCH PLAN

BCK 811 HOUGANG CENTRAL



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AFTER MY SHOPPING, AS I WAS LEAVING THE CAR PARK AT THE CURVED LANE, THERE WERE SEVERAL CARS PARKED ILLEGAL ON BOTH SIDES OF THE LANES. AS I PROCEEDED TO MOVE STRAIGHT, I HAD TO AVOID INCOMING TRAFFIC WHICH WAS MOVING TOWARDS ME IN BETWEEN THE TWO LANES. IT WAS VERY SUDDEN AND I TRIED TO MOVE SLIGHTLY TO THE LEFT TO AVOID CRASHING WITH THE INCOMING LORRY. I ACCIDENTLY HIT ON THE ^{FRONT PORTION OF} ~~THE~~ VEHICLE B WHICH WAS ^{ILLEGALLY} PARKED ALONG THE YELLOW LINE. IT WAS A MILD SCRATCH WHEN I OFFERED TO SETTLE PRIVATE BUT THE YOUNG CAR OWNER WAS VERY ARROGANT AND RUDE. SO I LEFT THE SCENE WHEN HE DIDN'T WANT TO SETTLE.

DECLARATION

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

楊愛乙

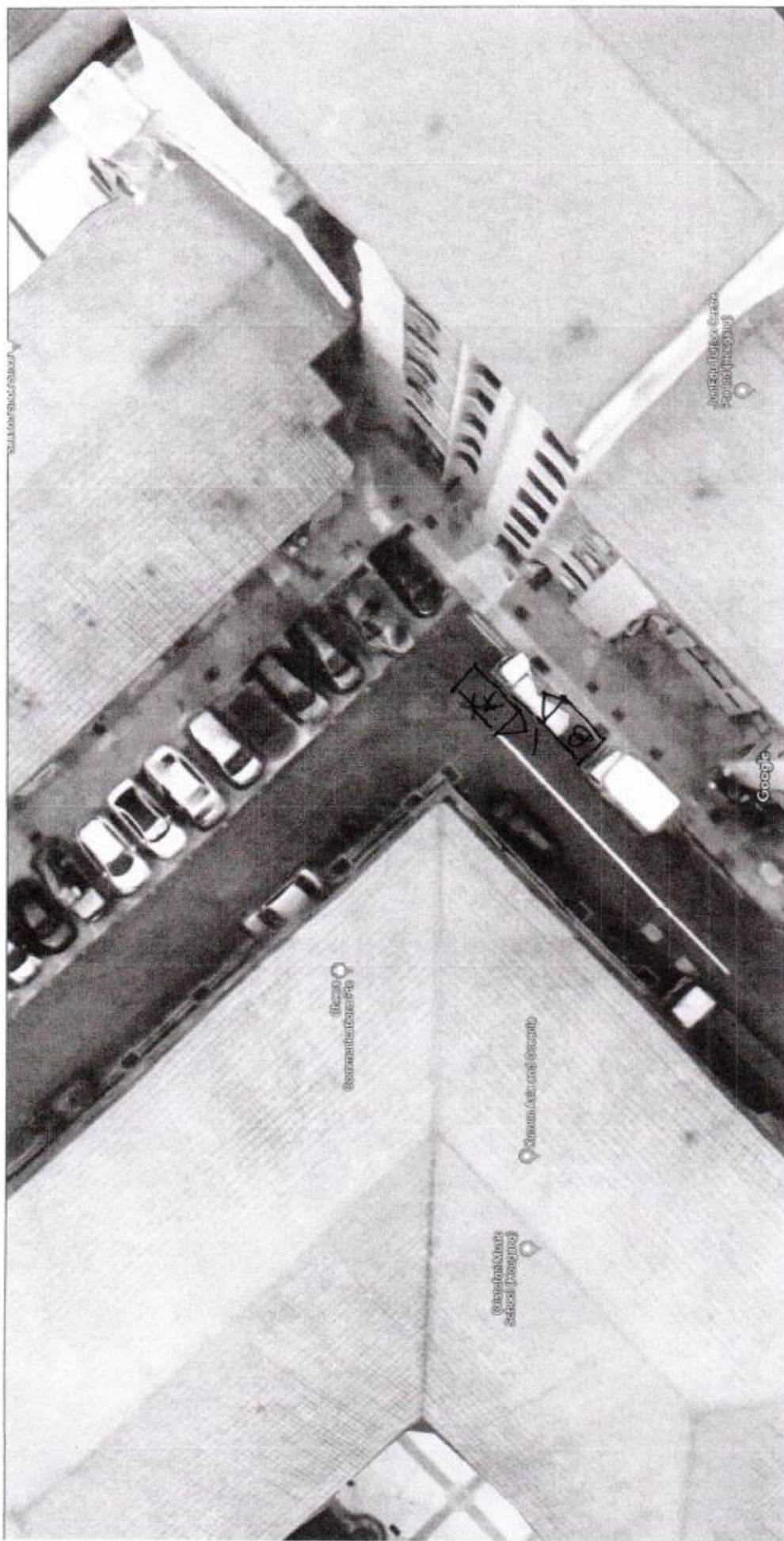
Policyholder's Signature
Date & Time:

楊愛乙

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

29/12/2018

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



CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that **YEO I YOK**, NRIC No.: **S0713483E** has reported to the Police a non-injury traffic accident which occurred at the service road of Blk 811 Hougang Central on 06/12/2018 at 1020hrs, involving the following vehicles:

SJC3578X

SJJ9543U

楊愛兒

2. If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Mohamed Azmi Bin Mohamed Riduan

Date: 06/12/2018

Time: 1245hrs

S/D Ref: 4

Police Post/Unit: Hougang Neighbourhood Police Post



Original – to be issued to informant
Duplicate – to be submitted to Traffic Police

CONFIDENTIAL



HS AUTOMOTIVE SERVICES

Bik 2 KAKI BUKIT AVE 2 @ KAKI BUKIT AUTOHUB #02-25 SINGAPORE 417921.

TEL: 6538 1368 FAX: 6538 1367 Email add: hsautomotives@yahoo.com

VEHICLE NO: SJC 3578x MAKE/MODEL: PERODUA KELISA 1.0L
 DATE OF ACCIDENT 06/12/2018 TIME 10 HR 20 MIN PM
 LOCATION OF ACCIDENT BLK 811 HOUGANGS CENTRAL CAR PARK
 EXACT PURPOSE USE DURING ACCIDENT SHOPPING FOR DAILY GROCERY

CAR OWNER

NAME OF CAR OWNER YEO IYOK
 CONTACT NO 97436653
 NRIC 80713483E
 CLAIM TYPE ☐ OD ☐ THIRD PARTY ☒ REPORTING ONLY
 INSURANCE COMPANY TOKIO MARINE
 TYPE OF COVERAGE ☒ COMPREHENSIVE ☐ THIRD PARTY ☐ THIRD PARTY FIRE & THEFT
 POLICY NO 18-MV007512-R01

ACCIDENT DRIVER

NAME OF DRIVER AS ABOVE ☒ AS ABOVE ☐ IF NOT- KINDLY FILL IN BELOW
 NRIC _____ NO OF PASSENGER/S 0
 DATE OF BIRTH _____
 OCCUPATION RETIREE ☐ OUTDOOR ☒ INDOOR
 DATE OF DRIVING PASS 26/06/18
 GENDER ☐ MALE ☒ FEMALE
 CONTACT NO 97436653
 ADDRESS BLK 467 HOUGANG AVE 8 #11-1920

DRIVER OWN ANY VEHIC NO/ IF YES- REGISTRATION NO _____

RELATIONSHIP EMPLOYEE/ IF NOT: ☒ CLEAR ☐ RAINING ☐ OTHER: _____
 WEATHER CONDITION ☒ DRY ☐ WET ☐ OTHER: _____
 ROAD SURFACE

ANY INJURIES ☒ NO IF YES- NAME: _____

CONTACT NO _____

POLICE REPORT _____ NO/ IF YES- LOCATION: HOUGANGS NEIGHBOURHOOD PP.

VIDEO FOOTAGE _____ NO/ YES

3RD PARTY INFO

VEHICLE B NO 3JJ 9543U NO OF PASSENGER/S 0
 NAME -
 CONTACT NO -
 VEHICLE C NO _____ NO OF PASSENGER/S _____
 VEHICLE D NO _____ NO OF PASSENGER/S _____
 VEHICLE E NO _____ NO OF PASSENGER/S _____
 VEHICLE F NO _____ NO OF PASSENGER/S _____
 ANY WITNESS _____
 WITNESS CONTACT NO _____

① Driver only.

530467

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S0713483E**
 Name: **YEO I YOK**
 Birth Date: **26 Jan 1941**
 Issue Date: **05 Mar 2004**

001151934F

REPUBLIC OF SINGAPORE


IDENTITY CARD NO. S0713483E
 Name: **YEO I YOK**
 Chinese Name: **楊愛玉**
 Race: **CHINESE**
 Date of Birth: **26-01-1941**
 Sex: **F**
 Country of Birth: **SINGAPORE**

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

Class 3 **Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms**

PASS DATE: **24 Jun 1959**
 Licence No: **S0713483E**

NP 428A

Please Come Again


 Name: **S0713483E**


 Blood Group: **O** Date of issue: **13-07-1994**
And Bring A Friend
APT BLK 467 HOUGANG AVENUE 8
SINGAPORE BLOOD TRANSFUSION SERVICE

#11-1520

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmsi@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP
FORM MX1

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)

Policy No.: 18-MV007512-R01 (Private Motor Car)

- | | | |
|---|--------------|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SJC3578X | Chassis No.: PM2L701S002155397 |
| 2. Name of Policyholder | MS YEO I YOK | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 14/02/2018 | |
| 4. Date of Expiry of Insurance | 13/02/2019 | |
| 5. Persons or Class of Persons entitled to drive* | | |
| (a) The Policyholder. | | |
| (b) Any other person who is driving on the Policyholder's order or with his 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. 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.

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 or 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 2382DDA

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 800	
	Windscreen Excess	SGD 100	

Tokio Marine Insurance Singapore Ltd.

Authorised Signature