

NATIONAL Assessment Centre Services

(wef 1 Jan'05) **MAA 119001856**

Date In: 4/1/19 - 18.19	Job description	Date & Time Completed	Done by
Ref No: HA/EC219000263/24	SAS e-filing		
Veh No: 60057825	E-mail (within 5hrs, AIC 2hrs)		
D.O.A: 21/1/19 - 23.14	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: 60057825	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: ()

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

NA 1900174	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
		Int Bill	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) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):	ON*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments:-	TP (N11): TP (Non INC) against INC \$20		
Dat. 1:	9) N12: Idac Mobile \$0		
Dat. 2 / 3:	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	04/01/2019 18:19
Date Of Accident	03/01/2019 23:40
Exact Location Of Accident	BLK 124D RIVERVALE DR MULTISTORY CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB5782J
Insured/Policyholder	
Name Of Registered Owner	ROBINSON CAR RENTAL PTE LTD
Co Reg No	200414041W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	CADDY 1.9 TDI
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-18090572MFCV/27
Cover Note Number	

Driver

Name of Driver	GOH JIN SIA (WU JINSHE)
NRIC No	S9123671J
Date Of Birth	11/07/1991
Occupation	OUTDOOR
Date Of Driving Pass	07/05/2016
Driving Experience	2 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91502360
Fax Number	
Contact Number	OFFICE-91502360
EMail Address	NOEMAIL

Address	BLK 211 PASIR RIS STREET 21 #11-246
Postcode	510211
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 - MAJOR/MINOR RD
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?	
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

REFER TO 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	SLH8222P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE PENG KWANG (LI BINGGUANG)
NRIC/Passport Number	S8932057G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.

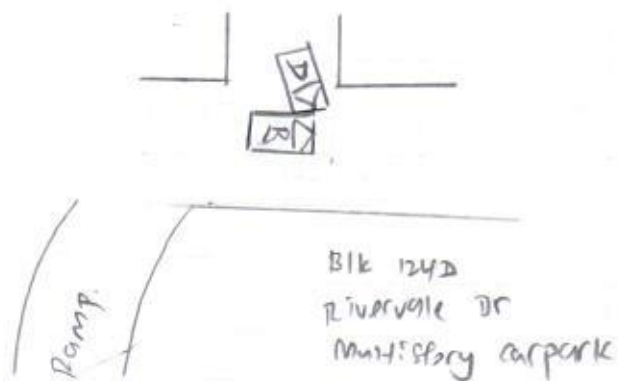


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



A- 9885782J

B- 5485222P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to statement.

DECLARATION

I/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.:

ON STATED DATE AND TIME, I WAS MAKING A LEFT TURN ALONG THE STATED VENUE. I DID NOT NOTICED THAT VEHICLE B WAS TRAVELLING STRAIGHT. AS A RESULT, MY VEHICLE HIT ONTO VEHICLE B LEFT PORTION.

ACCIDENT STATEMENT

ACCIDENT DATE: (03 / 01 / 19) (DD/MM/YYYY), TIME (23 : 40) (HH:MM)

LOCATION: BK road carpark Selegie. Riverside Dr multi-story carpark

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: G8E5782J.
b) INSURANCE COMPANY: ROBINSON CAR RENTAL PTE LTD. MS FIRST CAPITAL
c) POLICY NO: D-18090572MFCV
d) POLICY TYPE: (COMPREHENSIVE/THIRD PARTY/THIRD PARTY FIRE & THEFT)
e) MAKE/MODEL: VOLKSWAGEN CADDY. 1.9TDI.
f) TYPE: (SALOON/COUPE/MPV/VAN/LORRY/MOTORCYCLE/OTHERS)
g) VEHICLE CATEGORY: (PRIVATE/COMMERCIAL/MOTORCYCLE)
h) PURPOSE OF USING AT TIME OF ACCIDENT: after work.
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE: (YES/NO) NO
IF NO, PLEASE STATE (THIRD PARTY CLAIM/REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: ROBINSON CAR RENTAL PTE LTD. (MALE/FEMALE)
B) NRIC/FIN/PASSPORT: 20040414620041401111 CONTACT: 68492002.
C) ADDRESS: _____

*CONTINUE TO 3.D IF DRIVER ALSO POLICY HOLDER

3. DRIVER

- A) NAME: Goh Jin Sian (MALE/FEMALE)
B) NRIC/FIN/PASSPORT: S9123611J CONTACT: 91502560
C) ADDRESS: BK 211 Pasir Ris st 21 #11-246 2510211
D) DATE OF BIRTH: (11 / 07 / 1991) (DD/MM/YYYY)
E) OCCUPATION: (INDOOR/OUTDOOR)
F) YEARS OF DRIVING EXPERIENCE: 2+

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) YES
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

- 5.A) WEATHER CONDITION: (CLEAR/RAINING/OTHERS) clear
B) ROAD SURFACE: (DRY/WET/OTHERS) dry

6. WAS ANYBODY INJURED: (YES/NO) NO
7. REPORTED TO POLICE: (YES/NO) NO
IF YES PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE:

- A) VEHICLE NO: JKH8222P MODEL: _____
B) DRIVER'S NAME: Lee Ping Kwang (Li Bing Kwang)
C) NRIC.FIN PASSPORT NO.: 209320726 CONTACT: _____

9. THIRD PARTY VEHICLE:

- A) VEHICLE NO: _____ MODEL: _____
B) DRIVER'S NAME: _____
C) NRIC.FIN PASSPORT NO.: _____ CONTACT: _____

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9123671J



Name
GOH JIN SIA
(WU JINSHE)
吴进社

Place
CHINESE

Date of birth
11-07-1991

Sex
M

Country of birth
SINGAPORE





REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S9123671J

Name
GOH JIN SIA
(WU JINSHE)

Birth Date: 11 Jul 1991

Issue Date: 07 May 2016



3905844



NRIC No. S9123671J



Date of issue
14-07-2006

Address
APT BLK 211 PASIR RIS STREET 21
#11-246
SINGAPORE 510211


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

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg

EFFECTIVE DATE
07 May 2016

NP 428A

Licence No: S9123671J



CERTIFICATE OF INSURANCE

ORIGINAL

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)

Type of Policy:	COMMERCIAL VEHICLE - FLEET
Type of Cover:	Third Party
Certificate No.	D-18090572MFCV/27
Vehicle No / Chassis No	GBB5782J / WV1ZZZ2KZ9X122812
Name of Insured:	ROBINSON CAR RENTAL PTE LTD
Period Of Insurance:	01.04.2018 To 31.03.2019
Insured Estimated Value:	0.00

EXCESS: AS INDICATED BELOW

Authorised Driver*
ANY AUTHORISED DRIVERS

Persons or classes of persons entitled to drive*

- (1) Whilst the vehicle is being used in connection with the Insured's business:-
 - (a) Any person provided he is in the Insured's employ and is driving on their order or with their permission.
- (2) Whilst the vehicle is being used for social, domestic or pleasure purposes:-
 - (a) Any person who is driving on the Insured's order or with their permission.

For drivers with more than 1 year driving experience and/or not less than 21 years of age

Excess: S\$1,000.00 on All Claims (for Long Term Lease - 1 year or more)
S\$2,500.00 on All Claims (for Short Term Lease - less than 1 year)
S\$1,000.00 on All Claims (for Staff)

For drivers with less than 1 year driving experience and/or less than 21 years of age

Excess: S\$3,000.00 on All Claims (for Long Term Lease - 1 year or more)
S\$4,500.00 on All Claims (for Short Term Lease - less than 1 year)
S\$2,000.00 on All Claims (for Staff)

* 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.

Limitations as to use*

- Use in connection with the Insured's business.
- Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.
- Use for social, domestic and pleasure purposes.
- The Policy does not cover:-
 - (1) Use for racing, pace-making, reliability trial or speed-testing.
 - (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
 - (3) Use for the carriage of passengers for hire or reward.

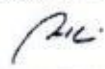
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

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)

MS First Capital Insurance Limited
(Approved Insurers)

SUSAN/A0151/MZ301A10

Issued at Singapore on 31.03.2018



Authorised Signature