

# NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

2

Date In: 07/01/2019 13:03	Job description	Date & Time Completed	Done by
Ref No: NA/TMI19000323/k4	SAS e-filing		
Veh No: GBB 3934A	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 05/01/2019 16:05	i-Motor Claim Form		
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner / Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: GBC6905K	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	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

Claimant's Particulars:	NA1900201	Invoice Preparation Checklist	Am't (\$) In Bill	Am't (\$) Add Bill
Driver/Owner:		1) AR: Accident Reporting (\$30);		
Contact No:		2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:		3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):		4) FT: Follow-Through Survey \$120		
Auditors' Comments:		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 / Tpl 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	07/01/2019 13:03
Date Of Accident	05/01/2019 16:05
Exact Location Of Accident	JLN BOON LAY JUNC OF BOON LAY WAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG3934A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KHONG LIENG TRADING CO PTE LTD
Co Reg No	197201476H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96440207
Alternative Phone No	OFFICE-96440207

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE VAN TURBO 4 DR AUTO
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USED
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT104465
Cover Note Number	

### Driver

Name of Driver	CHAN YAT MENG
NRIC No	S0106621H
Date Of Birth	11/12/1953
Occupation	OUTDOOR
Date Of Driving Pass	26/11/1977
Driving Experience	41 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96440207
Fax Number	
Contact Number	OTHERS-96440207
Email Address	NOEMAIL

## 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:

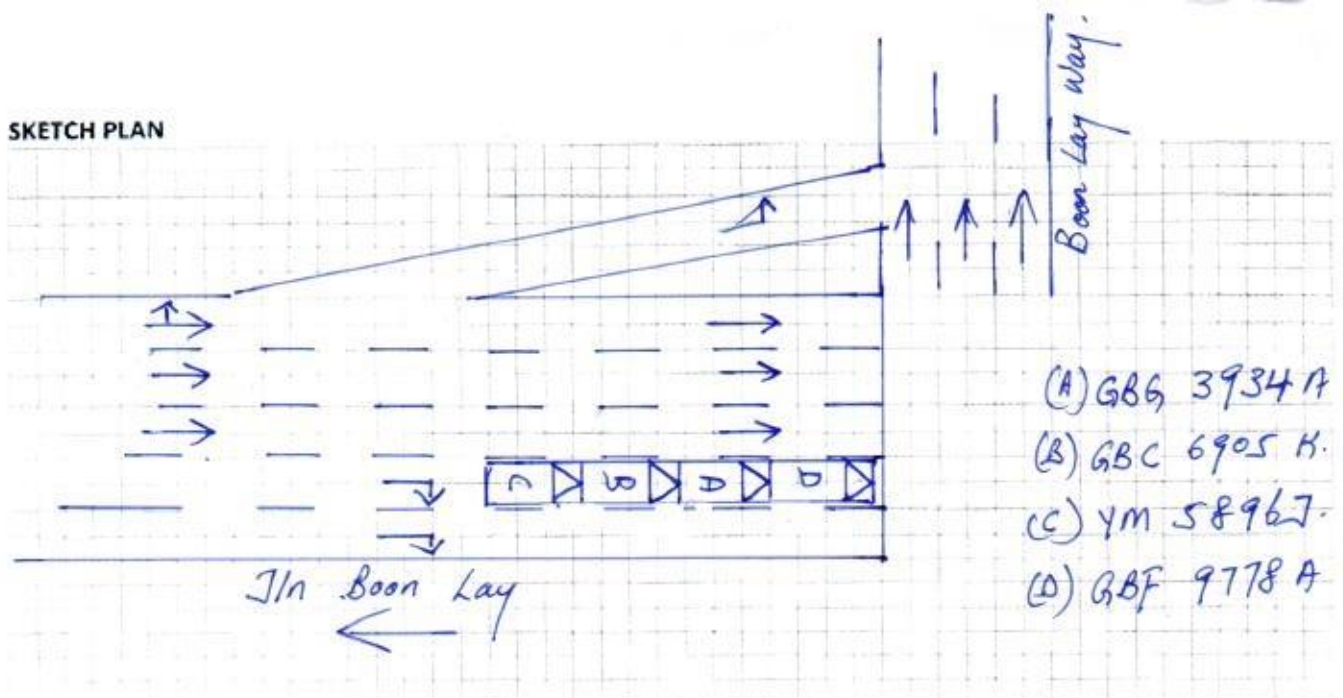
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

7/1/2019



# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 05/01/19 at @ 1605 hrs, I stopped my vehicle (GBG 3934 A) along Jln Boon Lay junction Boon Lay Way waiting at the junction to make a right turn. Suddenly, I felt a great impact from the rear. The impact was so strong that pushed my vehicle forward and caused my vehicle to collide onto the lorry (GBF 9778 A) ahead of me. I got down from my vehicle and found it was a chain collision involving 4 vehicles.

## DECLARATION

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



陳日明

陳日明

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.:

7/1/2019



Vehicle No.	GBG 3934A		Model / Make	Toyota	Place.
Date of Accident	05/01/19				
Time of Accident	1605 HRS				
Location of Accident	Jln Boon Lay Junction Boon Lay road way.				
Exact purpose use during accident	Commercial Used				
Name of Owner	Khong Leng Trading Co. Ate Ltd				
Telephone No.	H/P :	Home :	Office : 6747 8553		
NRIC	197201476 H.				
Address	102 Neythal Road (S) 628590				
Claim type	OD	THIRD PARTY REPORTING ONLY			
Insurance Company	Tokio Marine				
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft		
Policy No.	MT 104465				
Name of Driver	As Above If No, Chan Yat Meng.				
NRIC	S 0106621 H.		Any Passengers : N.A.		
Date of birth	11/12/1953.				
Occupation	Outdoor	/	Indoor		
Driving License Pass Date	26/11/1977.				
Gender	Male	/	Female		
Contact No.	H/P : 9644 0207	Home :	Office :		
Address	BLK 211 Boon Lay Place #15-157 (S) 640211.				
Driver have any own vehicle	No,	If yes, Reg No.			
Relationship	Employee,	If no, state			
Weather condition	Clear	Raining	Other		
Road Surface	Dry	Wet	Other		
Any Injuries	No,	If Yes, Who?			
Name And Contact No.	Chan Yat Meng (H/P: 9644 0207)				
Name And Contact No.					
Police Report	No,	If Yes, Where?			
Vehicle B No.	GBC 6905K		Any Passengers : N.A.		
Name of Driver			Contact No. :		
Vehicle C No.	YM 5896J.		Any Passengers : 01 (m)		
Vehicle D No.	GBF 9778 A		Any Passengers : 01 (m)		
Vehicle E no.			Any Passengers :		
Vehicle F No.			Any Passengers :		
Vehicle G No.			Any Passengers :		
Witness Name	N.A.		Witness Contact : N.A.		
Accident Portion	Front and Rear Portion.				
Camera Recorder	Yes/No				
Email Address					

PARTICULAR WORKSHOP	Twincar.
CONTACT NO.	6842 0051 / 6744 0510
CONTACT PERSON	Hui Xin.
FAX NO	6741 0510
WORKSHOP Email ADDRESS	sales@n51.com.sg

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Member: **S0106621H**

Name: **CHAN YAT MENG**

Birth Date: **11 Dec 1953**  
Issue Date: **27 Sep 2003**

**1000866388B**




**REPUBLIC OF SINGAPORE**

**IDENTITY CARD NO. S0106621H**

Name: **CHAN YAT MENG**

**陳日明**

Race: **CHINESE**

Date of birth: **11-12-1953** Sex: **M**

Country of birth: **SINGAPORE**

**S0106621H**





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

Class	Motor cars ≤ 3800 kg with ≤ 7 passengers, exclusive of the driver; and motor tractors/vehicles ≤ 2500 kg	PASS DATE
Class 3		26 Nov 1977

**S0106621H** **S / No 9000295633**

**Licence No. S0106621H**

**NP 428A**



**4668713**

**S0106621H**

**NRIC No. S0106621H**

**Date of issue: 29-12-2010**

**APT BLK 211 BOON LAY PLACE #15-157**  
**SINGAPORE 840211**

**NRIC No: S0106621H Date: 28/05/2018**






# 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: tmsis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the  
Tokio Marine Group



**TOKIO MARINE**  
INSURANCE GROUP

## Certificate of Insurance

FORM MZ300

**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.: MT104465 (Commercial Vehicle)

- |  |   |                                |
|--|---|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle                               | GBG3934A  | Chassis No.: JTFHT02P900216781 |
| 2. Name of Policyholder  | KHONG LIENG TRADING CO PTE LTD  |                                |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 31/07/2018 (00:00:00)   |                                |
| 4. Date of Expiry of Insurance   | 30/07/2019  |                                |
| 5. Persons or Class of Persons entitled to drive*                              | Any person who is driving on the policyholder's order or with their 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\***

- 1) Use in connection with the policyholder's business.
  - 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.
  - 3) Use for social domestic and pleasure purposes.
- The policy does not cover:-
- 1) Use for hire or reward or 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.

\* 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 No: 2292DDA

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 750.00	(Original Excess : SGD 750.00)
	Additional Excess for Young, Elderly or Inexperience Driver(s)	SGD 3,000.00	(All Claims)
	WindScreen Excess	SGD 100.00	
Financial Interest:	HL BANK		

**TOKIO MARINE INSURANCE SINGAPORE LTD.**

Authorised Signature