

NATIONAL Assessment Centre Services Wef 1 Jan 05 **NA119 00221**

Date In: 2/1/19-10:01	Job description	Date & Time Completed	Done by
Ref No: NA11900039724	SAS e-filing		
Veh No: SK99672L	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 6/1/19-10:30	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: YN1056L 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

NA1900178	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		Inc Bill	Add Bill
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			
QC Checked by (Engr-In-Charge):	5) FT : Follow-Through Survey (Resurvey) \$30			
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)			
Pat. 1:	6) TR : Re-inspection \$75			
Pat. 2 / 3:	7) N1 : Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	QD:			
	*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: Idac 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 10:01
Date Of Accident	06/01/2019 12:30
Exact Location Of Accident	JUNC SIMEI AVE & SIMEI ST 3
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKP9672L
Insured/Policyholder	
Name Of Registered Owner	TONG CHEE WAI
NRIC No	S7432542D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96936375
Alternative Phone No	OFFICE-96936375
Vehicle Particulars	
Manufacturer	TOYOTA
Model	TOYOTA COROLLA ALTIS 1.6L CVT
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A29098388AT2
Cover Note Number	
Driver	
Name of Driver	TONG CHEE WAI (TONG ZHIWEI)
NRIC No	S7432542D
Date Of Birth	01/10/1974
Occupation	INDOOR
Date Of Driving Pass	10/04/1992
Driving Experience	26 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96936375
Fax Number	
Contact Number	OFFICE-96936375
EEmail Address	NOEMAIL

Address	BLK 63 MARINE DRIVE #08-120
Postcode	440063
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	COLLISION - CHANGE/CROSS LANE
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?	YES
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)	5
Passenger 1	NAME: : LOH CHING YEE GENDER: : FEMALE
Passenger 2	NAME: : THADDENS TONG JUNQUAN GENDER: : MALE
Passenger 3	NAME: : XAVIER TONG JUNZHE GENDER: : MALE
Passenger 4	NAME: : SU PO PO AUNG GENDER: : FEMALE

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. I WISH TO STATE THAT AFTER AN IMPACT, VEHICLE B DID NOT STOP DESPITE THAT I ASK HIM TO STOP AT THE ACCIDENT LOCATION, VEHICLE B DRIVE AWAY TO SIMEI ST 5 , SO I FOLLOW VEHICLE B TO SIMEI ST 5, THEN WE EXCHANGE DRIVER PARTICULARS.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN5056L
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YANG GANG
NRIC/Passport Number	G8611850K
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name	LOH CHING YEE
Approximate Age	
Injuries Sustain	NECK
Injured person in which vehicle?	SKP9672L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

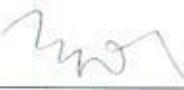
SKETCH PLAN

IMPORTANT NOTICE

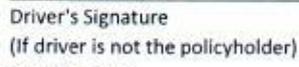
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
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5. **Any false reporting may be referred to the Police for investigation.**
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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:

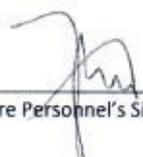
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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



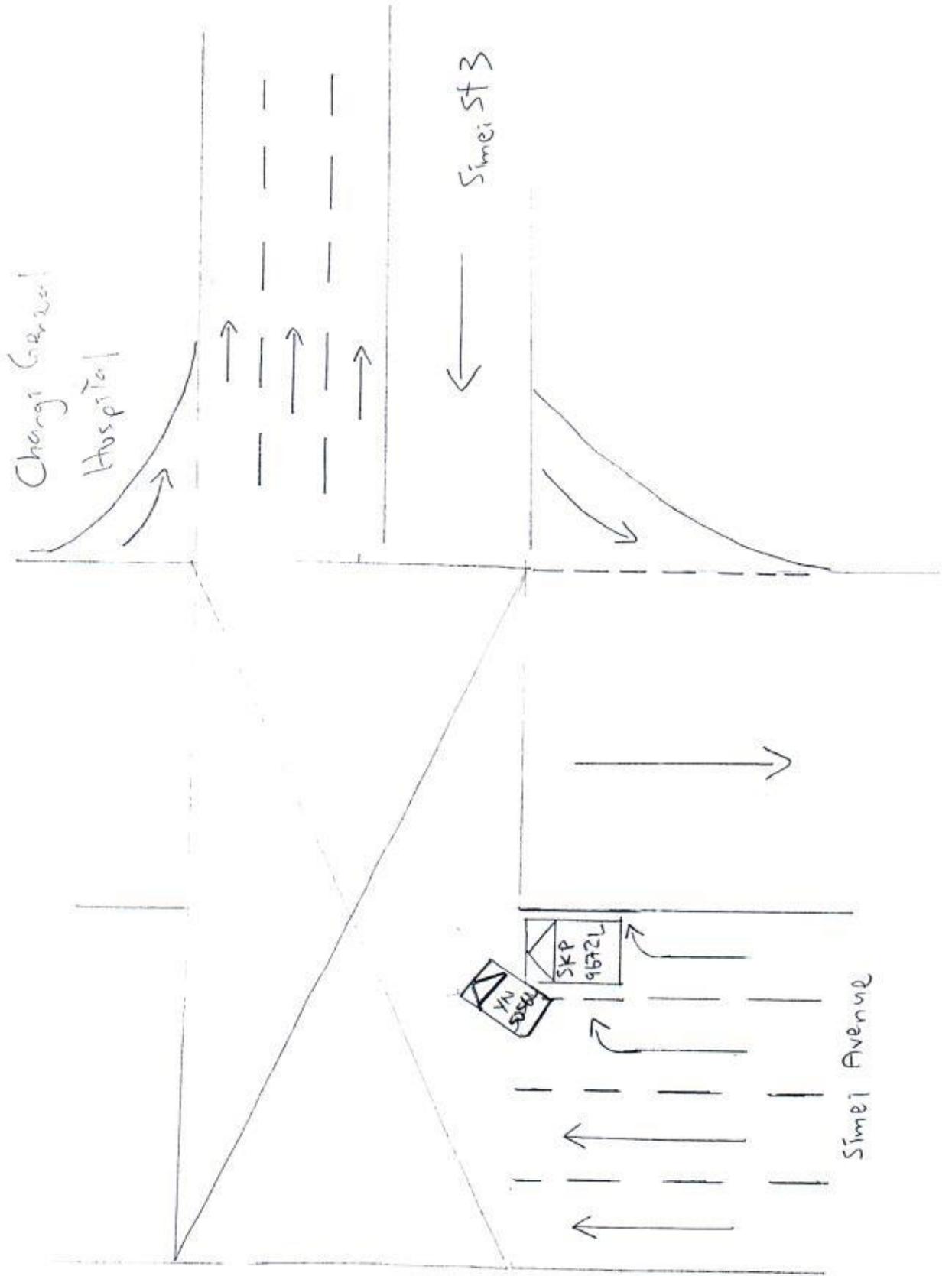
Policyholder's Signature
Date & Time:



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



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



On 6 January 2019, I, S7432542D Tong Chee Wai, driver of SKP9672L was travelling along Simei Avenue at the extreme right lane. When I was turning right into Simei Street, the driver (Yang Gang, Driver Licence G8611850K) of YN5056L, travelling on my left did not observed lane discipline when turning right and cut onto my lane. As a result, the Right Hand Rear of YN5056L collided into the Front Left of my vehicle (SKP9672L).

① TOYOTA ALTIS (SKP9672L)

② LORRY (YN5056L)

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S7432542D**
 Name
**TONG CHEE WAI
 (TONG ZHIWEI)**

Birth Date **01 Oct 1974**
 Issue Date **15 Apr 2003**

1003404128F




**SINGAPORE ARMED FORCES
 IDENTITY CARD**

Name
TONG CHEE WAI

NRIC No.
S7432542D





This card is the property of the Singapore Armed Forces. Any person losing this card is requested to forward it without delay to Central Manpower Base or any Police Station.

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

Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	VALID DATE 10 Apr 1992
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NP 428A

Licence No: S7432542D



NRIC No / Colour S7432542D / PINK	Race CHINESE	Blood Group O+
Date of Birth 01/10/1974	Country of Birth SINGAPORE	Sex M
Service Status REGULAR	Military Rank Status OFFICER	

ADDRESS: APT BLK 63 MARINE DRIVE #08-120
 SINGAPORE 440063 DATE: 26.11.2018 S7432542D



Use governed by Card/Card Terms & Conditions
 111920103547078



MSIG

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

Certificate of Insurance

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

Toyota DriveElite 360
Comprehensive

Certificate No. A 29098388 AT2

Excess : SGD500
Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle
SKP9672L

2. Name of Policyholder
Tong Chee Wai

3. Effective Date of the Commencement of Insurance for the purposes of the Act
28/10/2018

4. Date of Expiry of Insurance
27/10/2019

5. Persons or Classes of Persons entitled to drive*

Tong Chee Wai

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 MUST BE CARRIED OUT AT BORNEO MOTORS (S) PTE LTD OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

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.

MSIG Insurance (Singapore) Pte. Ltd.
Approved Insurers


for Chief Executive Officer