

# NATIONAL Assessment Centre Services

Date In: 14/01/09	Job description	Date & Time Completed	Done by
Ref No: NA/INC19000742/13	SAS e-filing		
Veh No: 5LT8171P	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 11/01/09 1745	i-Motor Claim Form	MT/1007767 - 001	
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: (	RELIABLE	Tel:	Fax:
TP Particulars:	Veh No: 9P2651C	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

NA1900465	<b>Invoice Preparation Checklist</b>	Amt (\$) 1st Bill	Amt (\$) Add Bill
<b>Claimant's Particulars :-</b>	1) AR : Accident Reporting (\$30);		
	2) DA : Damage Assessment (\$100); INC (\$80)		
	3) TF : Towing Fee \$40/\$45		
	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:-		
	OD*		
<b>QC Checked by (Engr-In-Charge):</b>	*N5: Courtesy Car / Tpt Allowance	\$5	
	*N6: Repair Co-ordination	\$10	
	*N7: Post Repair Inspection	\$25	
	*N8: DV / Collect Excess Coordination	\$5	
<b>Auditors' Comments :-</b>	TP (N11) : TP (Non INC) against INC	\$20	
	9) N12: Idac Mobile	30	
Cat. 1:	Invoice dated	Fee Charged	
Cat. 2 / 3:	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	14/01/2019 11:30
Date Of Accident	11/01/2019 17:45
Exact Location Of Accident	CCK AVE 4 LOT 1 SHOPPING MALL EXIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLT8171P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RELIABLE RIDES PTE LTD
Co Reg No	-
Email Address	RELIABLECARZPL@GMAL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-81669797
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	WORK
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 HIRE
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095734969-01
Cover Note Number	
<b>Driver</b>	
Name of Driver	NG CHEE KOON(HUANG ZHIQUN)
NRIC No	S7223072H
Date Of Birth	27/06/1972
Occupation	OUTDOOR
Date Of Driving Pass	21/04/2009
Driving Experience	9 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90301878
Fax Number	
Contact Number	
EMail Address	WILLIAMNG2202@YAHOO.COM

Address	BLK 936 JURONG WEST ST 91 #06-363
Postcode	640936
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 - HEAD TO REAR
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)	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

MY VEH WAS STATIONARY AT CCK AVE 4 LOT 1 SHOPPING MALL EXIT TO GIVE WAY FOR ONCOMING VEH. SUDDENLY VEH(B) INFRT OF MY VEH BEARING REG NO YP2651C REVERSED HIS VEH AND I HORN AT HIM TO WARN BUT HE KEEP REVERSING AND COLLIDED ONTO MY VEH.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH THE RENTAL COMPANY
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP2651C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SUN SHOUWEN
NRIC/Passport Number	G5997387N
Contact Number	94672612
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	NG CHEE KOON(HUANG ZHIQUN)
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SLT8171P
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**.
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: 14/01/19

*[Signature]*

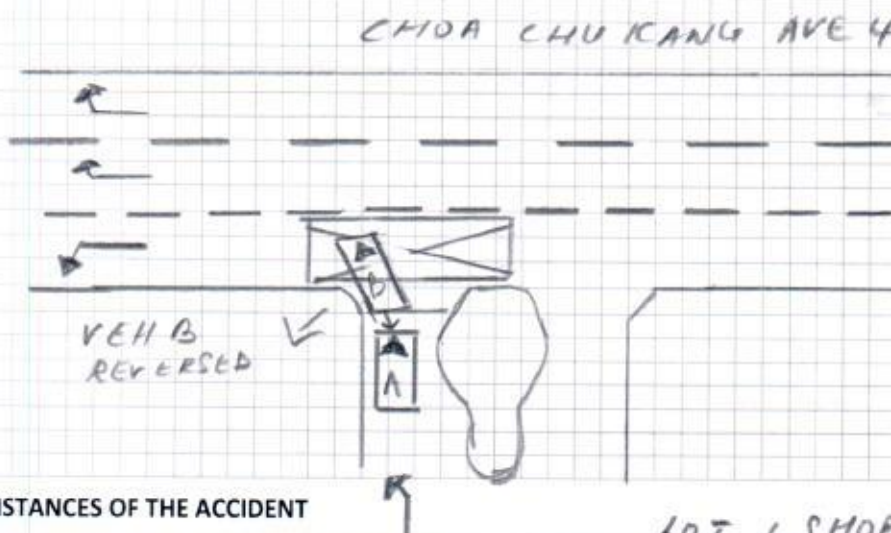
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

*[Signature]* 14/01/19

# SKETCH PLAN

A - SLT 8171P

B - YP2651C



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LOT 1 SHOPPING MALL

P/s refer to the 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: 14/01/19

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

14/01/19

Land Transport & Authority



**VOCATIONAL LICENCE**

Licence No: **S7223072H**

Name: **NG CHEE KOON**

Issue Date: **13/4/2015**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description
02	TAXI VL

Issue Date
28/03/2014



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S7223072H**

Name **NG CHEE KOON**  
(HUANG ZHIQUN)

Birth Date **27 Jun 1972**

Issue Date **24 Nov 2014**

002367457G



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7223072H**

Name **NG CHEE KOON**  
(HUANG ZHIQUN)  
**黄志群**

Race **CHINESE**

Date of birth **27-06-1972**

Country/Place of birth **SINGAPORE**

Sex **M**




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

Class 3 Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg

EFFECTIVE DATE **21 Apr 2009**

NP 428A

Licence No: **S7223072H**

8399368

NRIC No. **S7223072H**

Date of issue **24-11-2014**

APT BLK 938 JURONG WEST STREET 91 #06-383  
SINGAPORE 640936

**S7223072H**

NRIC No: **S7223072H** Date: **01/01/2018**



## 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)

**Certificate Number:** 5095734969-01

**Cover :** drivo CLASSIC

- |  |                          |
|--|--------------------------|
| 1. Index mark and Registration Number of Vehicle | : SLT8171P               |
| Chassis Number                                   | : ZVW518037921           |
| 2. Name of Policyholder                          | : RELIABLE RIDES PTE LTD |
| 3. Effective Date of Insurance                   | : 13 Nov 2018            |
| 4. Expiry Date of Insurance                      | : 12 Nov 2019            |

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her 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.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

**This Policy does not cover**

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)

EXCESS (SECTION 2)

WINDSCREEN EXCESS

ADDITIONAL EXCESS

UNNAMED DRIVER EXCESS

: N/A

REPAIR AT OWNER'S PREFERRED WORKSHOP

: PLEASE REFER OVERLEAF

INSURE WITH COE

: NO

NCD PROTECTION

: YES

TRANSPORT ALLOWANCE

: NO

EXCESS WAIVER

: NO

PRIMARY DRIVER

: NO

NAMED DRIVER (1)

: N/A

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: N/A

SUM INSURED

: KENSO LEASING PTE LTD

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : TAN INSURANCE BROKERS PTE LTD (00000690287)  
Date of Issue : 29 Oct 2018 13:21 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Claim Handling

The premium on this policy has not been collected.

Accident MT/1027767

Policy No.	5095734969-01	Vehicle No.	SLT8171P	GST Registration No.	
Certificate No.					
Policyholder Name	RELIABLE RIDES PTE LTD			Policyholder NRIC	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	
Contact No.(Mobile)	81669797	Contact No.(Office)	0	Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	TCA	<input type="radio"/> No <input checked="" type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	
▼ Accident Details					
Report Date	14/01/2019 19:59	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	11/01/2019	Time of Accident hh:mm	17:45	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	CCK AVE 4 LOT 1 SHOPPING MALL EXIT				
▼ Excess					
Own damage Excess	1,000.00	Additional Excess	0	Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess	3,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	3,000.00		
▼ Benefits					
▼ GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified		Yes	
Modification History					
▼ Policyholder Mailing Address					
Address 1	8 KAKI BUKIT AVENUE 4	Address 2	#05-50 PREMIER @ KAKI BUKIT	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	05-50	Related Policy Number	5106937496		
▼ OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	NG CHEE KOON(HUANG ZHIQUAN)	Driver NRIC	S7223072H	Driver DOB	
Register Date of Driver License	21/04/2009	Driver Age	46	Driving Experience	
Contact No.(Mobile)	90301878	Contact No.(Office)	0	Contact No.(Home)	
Address 1	BLK 936	Address 2	JURONG WEST STREET 91	Address 3	
Address 4	SINGAPORE 640936	Address Type	Singapore address	Post Code	
Unit No.	#06-363				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Com	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Modification History					

Claim 001 OD-MX New

Claim Type *	OD-MX	Insured Name	RELIAB
Contact No.(Mobile)		Contact No. (Home)	
Email Address		OI Vehicle Number	SLT817
Claim Description	SLT8171P / YP2651C ON 11 Jan 2019		
Preferred Workshop Finalisation	Yes	Insured Liability	Not at Fault
Date Registered		Preferred Repair Option	Preferred Workshop (refer below)
Report Taken By		GIA report	Received
		Claim Close Date	14/01/2019 20:03
		Workshop Repairer	ROSLINDA

Print AK letter

Save Submit

Attachment

Accident No. MT/1027767 Claim No. 001  
Last Doc. Received Yes No Upload Date 14/01/2019 00:00

Path *	Category *	Confidential	
<div>Choose File No file chosen</div>	<div>Clear</div>	<div>Please Select</div>	<div>NO</div>
<div>Choose File No file chosen</div>	<div>Clear</div>	<div>Please Select</div>	<div>NO</div>
<div>Choose File No file chosen</div>	<div>Clear</div>	<div>Please Select</div>	<div>NO</div>
<div>Choose File No file chosen</div>	<div>Clear</div>	<div>Please Select</div>	<div>NO</div>
<div>Choose File No file chosen</div>	<div>Clear</div>	<div>Please Select</div>	<div>NO</div>
<div>Choose File No file chosen</div>	<div>Clear</div>	<div>Please Select</div>	<div>NO</div>
<div>Message Read</div>	<div>Clear</div>	<div>Please Select</div>	<div>NO</div>

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:03	NRIC/ Driving License	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:03	NRIC/ Driving License	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:03	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:03	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:03	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:03	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:03	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:02	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:02	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:02	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:02	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:02	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:02	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Jan 2019 20:02	Photos	Normal	Photos

Video List

Uploaded By/Date	Folder Date	File Name
		<div>Display in New Window</div> <div>Scan and uploading</div>