NATIONAL Assessment Centre	Services.	part i Janost .				
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OD Reporting Only	I-Photo Uplo		1			
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TP Insurer:			to Owner/Wksn			
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- was in the same of the same	M503P.	INC (.)/Non-INC()		
Owner / Driver: (113431.		Tcl:)	
Policy No: () Perio	od: ()	Cover Type: (),	
Confirmed by : (Date:	Time:)	
Insured/Driver Liability: (%) [No	te-Est. Status (V	VO): N: 0-2	0%; P: 21-79%. I	2: 80-1009	/6]	
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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 witholding 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 16:26
Date Of Accident	12/01/2019 13:40
Exact Location Of Accident	JALAN SENANG
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGE8055E
Insured/Policyholder	
Name Of Registered Owner	TAN KAI QIN
NRIC No	S8121647I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81833427
Alternative Phone No	OFFICE-81833427
Vehicle Particulars	
Manufacturer	BMW
Model	528I AT D/AB SR LED NAV
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098668364
Cover Note Number	4
Driver	
Name of Driver	TAN CHENG DANIEL (CHEN QING, DANIEL
NRIC No	S8127795H
Date Of Birth	03/09/1981
Occupation	INDOOR
Date Of Driving Pass	06/12/2003
Driving Experience	15 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-94764165
Fax Number	Mountained See Secretary
Contact Number	
EMail Address	NOEMAIL

BLK 339 HOUGANG AVE 7 #03-415 Address

530339 Postcode

Was driver an employee of the Insured's Company NO

SPOUSE If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

Weather Conditions CLEAR DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

NO 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)

0

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

HOUGANG NEIGHBOURHOOD POLICE POST Police Station Name

ROAD: BLK 357 HOUGANG AVENUE 7 #01-805, POSTCODE: 530357, Police Station Address

COUNTRY: SINGAPORE

TEL NO: 1800-2869999 - FAX NO: 63822066 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

BUILDING CCTV NO

DETAILS OF OTHER VEHICLE PROPERTY 1

SGM503P Vehicle Registration Number

Vehicle Make/Model/Colour

Was there any audio recorded?

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 25

Nature Of Damage

No. Of Passenger (Including Driver)

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.
- 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.
- 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.
- 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.
- 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:
 - 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:
 - 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.

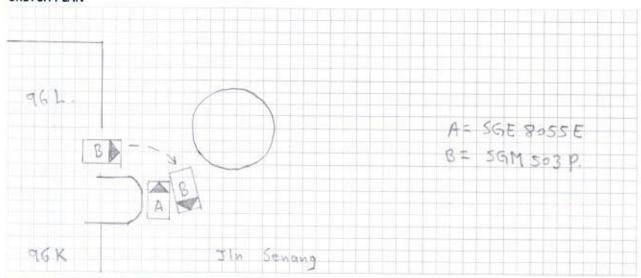
Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please	Refer	40	Police	Report	
		/			

DECLARATION

Date & Time:

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

Policyholder's Signature Driver's Sig

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

NRIC/FIN No.:





Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999

Report No. T/20190113/2083

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/01/2019 17:03		Vide Report No.:	Station Diary No. 29		
Informa	nt's Partic	ulars			
	Informant: ENG, DAN		Address: APT BLK 339 HOUGAN 530339	IG AVENUE ['] 7 #03-415 SINGAPORE	
	D Type / ID No.: NRIC NO / S8127795H		Contact No.: Home/Office: Mobile: 94764165		
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age:	Date of Birth: 03/09/1981	Type of Informant: Vehicle Owner		
Race: Chinese		Language: English	Institution / School Name:		
Occupation: Manager			Driving Licence Information: Class: 2B,3 Date of Expiry:		

Type of Accident:	Lit and Dun		Date/Time of Accident: 12/01/2019 13:44	Type of Location:
Location: Along Road 1 JALAN SENA	NG		867	
Weather: Clear	· · · · · · · · · · · · · · · · · · ·	Road Surface: Dry		Road Speed Limit:
Traffic Flow:	2 1	Traffic Control: Not Controlled		Traffic Volume:
	on:			Anyone conveyed by

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGE8055E	Car				Slightly Damaged	0
SGM503P	Car					0





2 of 3

Report No. T/20190113/2083

Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999

CONTINUATION OF REPORT

Brief Details.

On 12/01/2019 at about 1340hrs, I had parked my vehicle(Registration Number: SGE8055E) along the roadside at 96L Jalan Senang and everything is intact at that point of time. On the same day at about 1340hrs, I saw a vehicle, (Registration Number: SGM503P) that had hit on the front side of my vehicle. I saw that the said vehicle had tried to maneuver out of the said road and while doing so, the said driver had hit on my front side of the vehicle. I tried to gave chase however the driver had drive out of the vicinity quickly. I had only manage to take photo of the said vehicle however did not manage to stopped the car. I then went into my office to retrieved the CCTV footages and affirmed that the said vehicle had hit the front side of my vehicle. I wish to state that I'm willing to pass the investigation officer the CCTV footages if they need it for further investigation.





Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999 3 of 3 Report No. T/20190113/2083

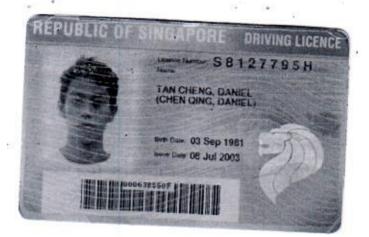
CONTINUATION OF REPORT

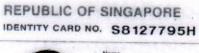
Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Informant:
2
Date/Time:
13/01/2019 17:03
Classification Of Case:
ONE









TAN CHENG, DANIEL (CHEN QING, DANIEL)

陈清 Race CHINESE Date of birth 03-09-1981

Country of birth SINGAPORE Sex M S0 127706H

4878965

YOU ARE LICENSED TO CREAT VCHICLES IN THE FOLLOWING CLASSIES!

PASS DATE

Class 2B Motorcycles not exceeding 200 cc
Class 3 Motor cars and Motor Tractors the weight unladen does not exceed 2500 kg

11 Jul 2002 06 Dec 2003

S8127795H

S / No. 9000002942

NP 438A

- 1411 BUNE

IC No. S8127795H

Date of leasing

01-09-2012

Address

APT BLK 339 HOUGANG AVENUE 7

SINGAPORE 530339

eBaoTech GeneralClaim Hello, NAC_PAYA_UBI_800601 Change Language Change Password · Log Out My Desktop **Policy Query** Notice of Loss Policy No. Date of Accident 12/01/2019 16:26 Vehicle No.(For Motor) SGE8055E Certificate Number Search Certificate Number Policyholder Name Policyholder NRIC Vehicle Insured Object Commence Date Select Policy No. Product Cover Type Expiry Date drivo CLASSIC 5098668364 TAN KAI QIN S8121647I GPC SGE8055E SGE8055E 12/03/2018 18/06/2019 Continue

Claim Handling Accident MT/1027732

Policy No.	5098668364	Vehicle No.	SGE8055E		GST Reg	stration No.	
Certificate No.							
Policyholder Name	TAN KAI QIN				Policyhol	der NRIC	58121
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading		0
Contact No. (Mobile) Email Address	81833427	Contact No.(Office)			Contact (vo.(Home)	
KFK	400	Special Remark			eCode		No *
NCD Protection	- No Yes	TCA	No Yes		eCode Re	ason	
	No	NCD Entitlement(%)	40		Private H	ire	No
→ Accident Details							
Report Date	14/01/2019 18:51	Accident Report Within 24 hrs	Yes		Accident	Type	Damag
Date of Accident	12/01/2019	Time of Accident hh:mm	13:40		Country	of Accident	Singap
Reporting Centre Accident Location	1222222	Orange Force			ICM No.		
♥ Excess	JALAN SENANG						
Own damage Excess	100000	VI-1000 (1000 1000 1000 1000 1000 1000 100					
Unnamed Driver Excess	0.00	Additional Excess Outside Singapore OD Excess	0	222.52	Windscre	en Excess	100,00
Third Party Excess	0.00	Outside Singapore TP Excess		600.00			
▽ Benefits				0.00			
Coverage			Sum Insu	red.			
Transport Allowance			99999999				
	tion		272222				
GST Registered	No		GST Regis	tration Date			
GST Registration No.			GST Statu			Yes	
Modification History							
Policyholder Mailing Add	dress						
Address 1	BLK 339 #03-415	Address 2	HOUGANG AVENUE	7	Address 3	v	erner
Address 4		Address Type	Singapore address	500	Post Code		530331
Unit No.	03-415	Related Policy Number	5098668364		100000000000000000000000000000000000000		33433
♥ OI Driver Info							
Driver Name	TAN CHENG DANIEL	Driver Type	Main Driver				
Unnamed driver Name		Driver NRIC	58127795H		Driver DO	8	03/09/
Register Date of Driver License	08/07/2003	Driver Age	37		Driving E	perience	15
Contact No.(Mobile)	94764165	Contact No.(Office)			Contact N	o.(Home)	
Address 1	BLK 339 #03-415	Address 2	HOUGANG AVENUE	7	Address 3		SINGAL
Address 4		Address Type	Singapore address		Post Code		530335
Unit No. Does he own a Singapore	03-415						
Registered car?	Yes = No	Driver Vehicle No.			Driver Ins	urer Company	
Declaration							
Breathalyser or Blood Test Reading?	0 mg	Any injury?	U Yes ★ No				
Modification History Claim 001 New							
Ten and a second							
Claim Type •				OD-MX	Insured Name	TAN KAI QIN	
Contact No.(Mobile)				f	Contact		
contact (vo.(Ploose)				81833427	No. (Home)	NIL	
Email Address				canf81@hotmail.com	OI Vehicle	SGE8055E	
				S.amo I groot hear.com	Number	pucovasc	
Claim Description				SGE8055E / SGM503P ON 1	12 Jan 2019		
Preferred Workshop ()	Insured Liability Not a	t Fault 🔻					
Contract No. Yes	 Repair Preferred Worksh 	op, Name unknown GIA report Received	*		120		
Date Registered	Option	POLICE STATE		14/01/2019 18:55	Claim		
Report Taken By				TEM CHAN ING	Date		
translate state (S.T.)				LIEW SHAN HUI			
Print AK letter							
			Save Submit				
			- Table - Tabl				

Accident No. MT/1027732 Claim No. Last Doc, Received Yes No Upload Date 14/01/2019 18:56 Path * Category * Confidential Urgency • Choose File No file chosen Clear Y NO Please Select ▼ Normai * Choose File No file chosen Clear ▼ No Please Select ▼ Normal • Choose File No file chosen Clear * NO * Normal Please Select Choose File No file chosen * NO Clear Please Select * Normal • Choose File No file chosen * Normal Clear Please Select * NO Choose File No file chosen Clear * NO * Normal Please Select Message Read

Attachment	List					
Attachment		ploaded By/Date	***	0	1400000000	2000-2000
NORT -y-			Category	9	Urgency	Description
30	NAC_PAYA_UBI_800601{ NA	TIONAL ASSESSMENT CENTRE SERVICES) o 4 Jan 2019 18:56	NRIC/ Driving License		Normal	NRIC/ Driving License 2019-1-14
1	NAC_PAYA_UBI_8006D1(NA:	TIONAL ASSESSMENT CENTRE SERVICES) o 4 Jan 2019 18:56	SAS		Normal	SAS 2019-1-14
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M	NAC_PAYA_UBI_800601(NAT) 14	IONAL ASSESSMENT CENTRE SERVICES) o Jan 2019 18:55	Photos		Normal	Photos 2019-1-14
		IONAL ASSESSMENT CENTRE SERVICES) o Jan 2019 18:55	Photos		Normal	Photos 2019-1-14
	NAC_PAYA_UBI_800601(NAT)	IONAL ASSESSMENT CENTRE SERVICES) o Jan 2019 18:55	Photos		Normal	Photos 2019-1-14
Video List						

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