

| NATIONAL Assessment Centre Services | | | |
|-------------------------------------|--|-----------------------|---------|
| Date In: 16/01/2019 13:46 | Job description | Date & Time Completed | Done by |
| Ref No: NA/LIP19000964/K4 | SAS e-filing | | |
| Veh No: GBC 4655U | E-mail (within 3hrs, A02 2hrs) | | |
| D.O.A: 15/01/2019 19:30 | 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: YL6679Y | 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: | 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: | Invoice Preparation Checklist | Am't (\$) | Am't (\$) |
|---------------------------------|---|-------------|-----------|
| | | Int. Bill | Add Bill |
| Driver/Owner: | 1) AR: Accident Reporting (\$30); | | |
| Contact No: | 2) DA: Damage Assessment (\$100); INC (\$80) | | |
| Damaged Portion: | 3) TP: 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 / Tp 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 | 16/01/2019 13:46 |
| Date Of Accident | 15/01/2019 19:30 |
| Exact Location Of Accident | INFRONT NEAR CORPORATION PLACE 2 CORPORATION BOARD |
| Country/State of Loss | SINGAPORE |
| DETAILS OF OWN VEHICLE | |
| Vehicle Registration Number | GBC4655U |
| Insured/Policyholder | |
| Name Of Registered Owner | PERTAMA MERCHANDISING PTE LTD |
| Co Reg No | 198902241N |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-87491193 |
| Alternative Phone No | OFFICE-87491193 |
| Vehicle Particulars | |
| Manufacturer | NISSAN |
| Model | CABSTAR 3.0 5M/T ABS 2DR 2WD TURBO |
| 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? | YES |
| If No, Please state action to be taken | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Insurance Company | |
| Name of Insurance Company | LIBERTY INSURANCE PTE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | SI18V01548/VCV/R03 |
| Cover Note Number | |
| Driver | |
| Name of Driver | AFFANDI BIN YAHYA |
| NRIC No | S1833004J |
| Date Of Birth | 15/11/1967 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 30/04/2003 |
| Driving Experience | 15 YEARS AND 8 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-87491193 |
| Fax Number | |
| Contact Number | OTHERS-87491193 |
| EMail Address | NOEMAIL |

| | |
|---|--|
| Address | BLK 508 BUKIT BATOK STREET 52 #01-101 |
| Postcode | 650508 |
| Was driver an employee of the Insured's Company | YES |
| 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

| | |
|--------------------|------------|
| Type Of Accident | SIDE SWIPE |
| 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? | 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

PLS REFER TO THE ATTACHED 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 | YL6679Y |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | ALAM MD SHAHIN |
| NRIC/Passport Number | |
| Contact Number | 85810716 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| 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**.
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:

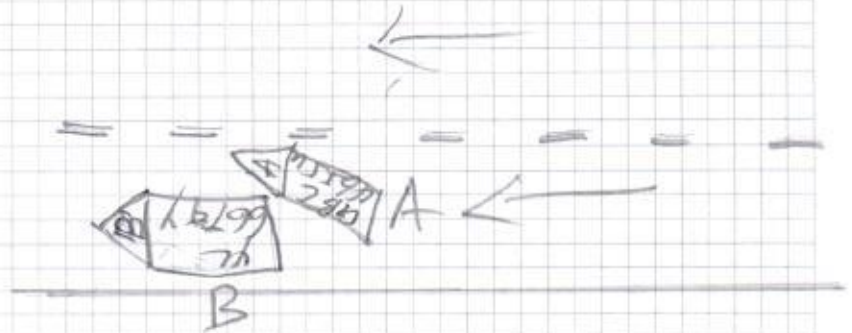
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



CORPORATION PLACE
2 Corporation Board.

A - GBC 4655U
B - YL 6679Y



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle A was near Corporation Place 2 Corporation Board in front when Vehicle B in front suddenly brake and Vehicle A would not stop in time and hit on Vehicle B rear portion.

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.:

GLASAT SketchPlan.com V.3



0% 25% 50% 75% 100%

Transfer Of Vehicle Ownership (Acknowledgement)

Vehicle Details

| | | | |
|--------------------------|---|-----------------------------|------------------------------------|
| Vehicle No. | GBC4655U | Vehicle Scheme: | Normal |
| Vehicle Type: | A50 - Goods (Closed) Van/Van Panel (Delivery) | Vehicle Model: | CABSTAR 3.0 5M/T ABS 2DR 2WD TURBO |
| Vehicle Make: | NISSAN | Engine No.: | ZD30303648K |
| Chassis No.: | JN1SC2F24Z0850443 | Trailer Chassis No.: | - |
| Motor No. | - | Passenger Capacity: | 2 |
| Propellant: | Diesel | Power Rating: | - |
| Engine Capacity: | 2953 cc | Maximum Laden Weight: | 3500 kg |
| Unladen Weight: | 1800 kg | Secondary Colour: | - |
| Primary Colour: | Gold | Maximum Power Output: | - |
| IU Label No.: | 1042477405 | Original Registration Date: | 22 Aug 2012 |
| First Registration Date: | 22 Aug 2012 | Open Market Value: | \$33,509.00 |
| Manufacturing Year: | 2012 | Minimum PARF Benefit: | \$0.00 |
| PARF Eligibility: | No | | |
| No. of Transfer: | 1 | | |

Owner Particulars

| | |
|-----------------------------|--|
| Owner Name: | PERTAMA MERCHANDISING PTE LTD |
| Owner ID Type: | Company |
| Owner ID: | 198902241N |
| Registered Address Type: | Private Residential (Condo Apt or House) / Shopping / Office Complexes |
| Registered Block/House No.: | 315 |
| Registered Street Name: | OUTRAM ROAD |
| Registered Unit No.: | # 01 - 01/02 |
| Registered Building Name: | TAN BOON LIAT BLDG |
| Registered Postal Code: | 169074 |
| COE No./Expiry Date: | 2012070105000150R / 21 Aug 2022 |
| COE Bid Category: | C - Goods Vehicle & Bus |
| QP Paid: | \$54,522.00 |

Transaction Details

| | |
|--------------------------------|----------------------|
| Business Transaction Ref. No.: | 20140926153851942036 |
| Business Transaction Date: | 26 Sep 2014 |
| Business Transaction Time: | 15:38:51 |

Message


Vehicle has been successfully transferred to PERTAMA MERCHANDISING PTE LTD (198902241N).

Please note that \$11.00 will be deducted from your GIRO account.



Please read through the Privacy Statement, Terms of Use and Disclaimer.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1833004J




Name
AFFANDI BIN YAHYA

Race
MALAY

Date of birth
15-11-1967

Sex
M

Country of birth
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

Vehicle Number **S1833004J**

Name
AFFANDI BIN YAHYA

Birth Date **15 Nov 1967**

Issue Date **16 Jul 2007**

4722772




NRIC No. **S1833004J**

Date of issue
20-05-2011

APT BLK 508 BUKIT BATOK STREET 52 #01-101
SINGAPORE 650508

NRIC No. **010220111**

Date: **07/10/2011**

No: **6944143**




YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

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

PASS DATE **30 Apr 2011**

NP 428A

Licence No. **S1833004J**





Liberty Insurance Pte Ltd
Registration no. 199002791D
51 Club Street
#03-00 Liberty House
Singapore 069428
Tel: (65) 6221 8611 Fax: (65) 6225 6890
Website: <http://www.libertyinsurance.com.sg>

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 No | SI18V01548 /VCV /R03 |
| Form | MZ300A |
| Date of Issue: | 01-Feb-2018 |
| 1. Index Mark and Registration No. of Vehicle: | GBC4655U |
| 2. Chassis number of Vehicle: | JN1SC2F24Z0850443 |
| 3. Name of Policyholder: | PERTAMA MERCHANDISING PTE LTD |
| 4. Effective date of Commencement of Insurance for the purposes of the Act: | 22-FEB-2018 00:00 |
| 5. Date of Expiry of Insurance: | 21-FEB-2019 23:59 |
| 6. Persons or Classes of Persons entitled to drive*: | <p>Any person who is driving on the Policyholder's order or with their permission.</p> <p>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.</p> <p>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.</p> |
| 7. Limitations as to use*: | <p>A) Use in connection with the Policyholder's business.</p> <p>B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.</p> <p>C) Use for social, domestic and pleasure purposes.</p> |
| 8. The Policy does not cover: | <p>A) Use for hire or reward or for racing, pace-making, reliability trials or speed-testing.</p> <p>B) Use whilst drawing a trailer except the towing or any one disabled mechanically propelled vehicle.</p> |
| <p>*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.</p> <p>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).</p> | |
| <p>For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers</p> <p> Authorised Signature</p> | |
| For information only: | |
| COVERAGE: | Comprehensive, Unlimited Windscreen, Box - S/ S\$3000/- |
| SUM INSURED (\$\$): | MARKET VALUE AT THE TIME OF LOSS |
| EXCESS (\$\$): | Section I \$600.00, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers \$3,000.00, Windscreen Excess \$100.00 |
| FINANCE COMPANY: | |
| PRODUCER NAME: | NCI BROKERS (ASIA) PTE LTD |