

NATIONAL Assessment Centre Services. [ref: Jan'03] MUA 119012093.

Date In:	Job description	Date & Time Completed	Done by
25/1/19 13:45	SAS e-filing		
Ref No: NA1 EQZ 19021679/64	E-mail (within 3hrs, AIC 2hrs)		
Veh No: 502 7133 U	I-Motor Claim Form		
D.O A: 25/1/19 08:30	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OD <input checked="" type="checkbox"/> Reporting Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wrap		

Preferred Wksp / INC Assign Wksp / QW: (		Tel:	Fax:
TP Particulars:	Veh No: 565 5143 X..	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 repaler.

( ) Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

Remarks: (INC Refine: 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 :* \_\_\_\_\_

[illegible]

Claimant's Particulars :-		Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Driver/Owner:				30.00	
Contact No:					
Damaged Portion:					
C Checked by (Engr-In-Charge):					
Auditors' Comments :-					
L 1:					
L 2/3:					
		1) AR : Accident Reporting (\$30);			
		2) DA : Damage Assessment (\$100);	INC (\$80)		
		3) TP : Towing Fee	\$40/\$45		
		4) FT : Follow-Through Survey	\$120		
		5) RT : Follow-Through Survey (Re-survey)	\$30		
		For claiming against INC Only (wof 10 Jan 2005)			
		6) TR : Re-inspection	\$75		
		7) NI : Idao DA + SMRT Survey	\$160		
		8) NTUC Additional Services:-			
		ON*			
		*N5: Courtesy Car / Tpt Allowance	\$5		
		*N6: Repair Co-ordination	\$10		
		*N7: Post Repair Inspection	\$25		
		*N8: DV / Collect Bxess Coordination	\$5		
		TP (N11) : TP (N11 INC) against INC	\$20		
		9) N12: Idao Mobile	\$0		
		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	25/01/2019 13:45
Date Of Accident	25/01/2019 08:30
Exact Location Of Accident	INSIDE NGEE ANN POLYTECHNIC
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SDZ7133U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAY KOK HWEE
NRIC No	S1812147F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98288347
Alternative Phone No	OFFICE-98288347
<b>Vehicle Particulars</b>	
Manufacturer	NISSAN
Model	QASHQAI-1.2 (A)
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
<b>Insurance Company</b>	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-005868
Cover Note Number	-
<b>Driver</b>	
Name of Driver	TAY KOK HWEE
NRIC No	S1812147F
Date Of Birth	06/01/1967
Occupation	INDOOR
Date Of Driving Pass	12/03/1992
Driving Experience	26 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98288347
Fax Number	
Contact Number	OFFICE-98288347
EMail Address	NOEMAIL

Address	BLK 633 CHOA CHU KANG NORTH 6 #11-311
Postcode	680633
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 - MAJOR/MINOR RD
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?	
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)	2
Passenger 1	NAME: : UNKNOWN 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

I WAS TRAVELLING ALONG THE DRIVE WAY INSIDE THE NGEE ANN POLYTECHNIC, WHILE APPROACHING AN INTERSECTION, SUDDENLY VEH B (BEARING NO SLS5143X) WITHOUT STOPPING AT THE STOP LINE AND DASHED OUT INTO MY PATH AND HIT ONTO MY VEH LEFT HAND SIDE.

#### 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	SLS5143X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ZHUANG WEI
NRIC/Passport Number	S8261150I
Contact Number	97469088
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.



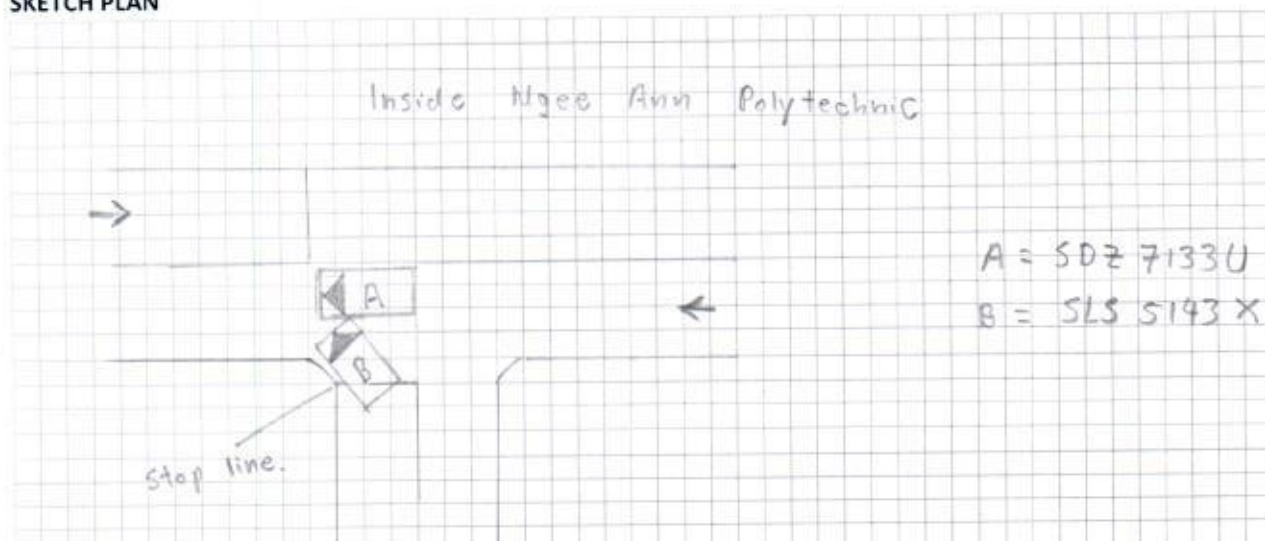
Policyholder's Signature  
Date & Time:

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



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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to 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:



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



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

License Number: **S1812147F**

Name: **TAY KOK HWEE**

Birth Date: **06 Jan 1967**

Issue Date: **03 Mar 2003**

000257230J



**REPUBLIC OF SINGAPORE**

**IDENTITY CARD NO. S1812147F**

Name: **TAY KOK HWEE**


郑国辉


Race: **CHINESE**

Date of birth: **06-01-1967**

Sex: **M**

Country of birth: **SINGAPORE**





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

Class	Description	Valid Until
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	12 Mar 1992
Class 4	Heavy motor cars and motor tractors > 2500 kg	19 Nov 2012

S1812147F

S/No. 9000175744

NP 426A

License No: S1812147F

3657690

NRIC No: **S1812147F**

Date of issue: **03-01-2005**

Address: **APT BLK 633 CHOA CHU KANG NORTH 6 #11-311 SINGAPORE 680633**




**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
tel: 65 6223 9433 | fax: 65 6224 3903 | www.eqinsurance.com.sg  
reg no. 1978-00490-N

**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 RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF**PRIVATE CAR  
Comprehensive Premier****Certificate No. : DMPPHQ18-005868**

Premier Plan - Any Workshop

Form: MX2

Excess:

Insured & Named Driver	S\$500.00 (Section 1 - Own Damage)
Unnamed Driver	S\$1,000.00 (Section 1 - Own Damage)
YEIDR	Additional S\$3,000.00
WindScreen	S\$100.00

**1. Index Mark and Registration Number of Vehicles**

SDZ7133U

**2. Name of Policyholder**

TAY KOK HWEI

**3. Effective Date of the Commencement of Insurance for the purpose of the Act**

29/09/2018

**4. Date of Expiry of Insurance**

28/09/2019

**5. Person 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 permission.

EQ Insurance-MARS Motor  
Accident Help Center**6311 3211**

\* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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 has not been cancelled at the time of accident loss or damage.

**6. Limitation as to use\***

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) 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.

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 and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Oversea Chinese Banking Corporation Limited

A000137/I Insurance Agency  
Date of Issue : 20/08/2018 13:40Authorised Signatory  
EQ Insurance Company Limited**Note**

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.