

NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

MANA 19014177

Date In: 30/01/2019 11:09	Job description	Date & Time Completed	Done by
Ref No: N/A/INC19001952/Y	SAS e-filing		
Veh No: SFE 6717G	E-mail (w/dln 3hrs, AIC 2hrs)		
D.O.A: 29/01/2019 16:40	I-Motor Claim Form	mt/1030128-bol	30/01/2019
OD: TP (Reporting Only)	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		12:31
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:	Veh No: GBH 5236M	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: ()

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: ()

Date/Time: ()	Assigned: ()

NA1900851	Invoice/Assessment/Claim/Repair/Service/Other
Claimant's Particulars:	1) AR: Accident Reporting (\$30); INC (\$50)
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$40/\$45)
Contact No:	3) TP: Towing Fee \$120
Damaged Portion:	4) FT: Follow-Through Survey \$30
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) Forfeiting against INC Only (wef 10 Jan 2005) \$75
Auditors' Comments:	6) TR: Re-inspection \$160
Sal. 1:	7) NI: Idao DA + SMRT Survey
2/3:	8) NTUC Additional Services:-
	ON:
	*N5: Courtesy Car / Tpt Allowance \$35
	*N6: Repair Coordination \$10
	*N7: Post Repair Inspection \$25
	*N8: DV / Collect Excess Coordination \$5
	TP (Nil) / TP (Non INC) against INC \$20
	9) N12: Idao Mobile \$30
	Invoice dated
	Invoice dated
	Fee Charged
	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	30/01/2019 11:09
Date Of Accident	29/01/2019 16:40
Exact Location Of Accident	ALONG VANDA ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJE6717G
Insured/Policyholder	
Name Of Registered Owner	JEANNE ENG CHER FONG
NRIC No	S7170039I
Email Address	JEANNEHSI@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-81387931
Alternative Phone No	OTHERS-81387931

Vehicle Particulars

Manufacturer	HONDA
Model	FIT
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	REPORTING ONLY
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	5104656916
Cover Note Number	

Driver

Name of Driver	JEANNE ENG CHER FONG
NRIC No	S7170039I
Date Of Birth	20/09/1971
Occupation	INDOOR
Date Of Driving Pass	27/07/2007
Driving Experience	11 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81387931
Fax Number	
Contact Number	OTHERS-81387931
EMail Address	JEANNEHSI@HOTMAIL.COM

Address	23 LOTUS AVENUE
Postcode	277606
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?	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

PLEASE REFER TO SKETCH PLAN

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	GBH5236M
Vehicle Make/Model/Colour	NISSAN NV350
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIM CHOONG BENG (LIN JUNMING)
NRIC/Passport Number	S7107595H
Contact Number	85907377
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

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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:

30/1/19 11.25am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

30/01/2019

Roshan

SKETCH PLAN

① HIT MIRROR
② HIT DOOR (DRIVER'S SIDE)

Vanda Drive

Vanda Rd

56 67179

GBH 5036m

HIT

scent

I WAS TRAVELLING STRAIGHT DOWN ALONG VANDA ROAD
WHEN A VEHICLE CAME OUT OF SIDE ROAD VANDA DRIVE AND
(GBH 5236M)
HIT THE ^{DRIVERS} SIDE DOOR OF MY CAR, CAUSING DAMAGE TO
DOOR AND MIRROR.

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

Date & Time: 30/1/19, 11-25am

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Claim Handling

Accident MT/1030128

Policy No.	5104658916	Vehicle No.	S166717G	GST Registration No.	
Certificate No.					
Policyholder Name	JEANNE ENG CHER FONG			Policyholder NRIC	S7170039I
Product Code	PRIVATE CAR INSURANCE	Cover Type	Drive CLASSIC	Leading	0
Contact No.(Mobile)	81387931	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	No *
KPI	<input type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(Nr)	0	Private Hire	No
Accident Details					
Report Date	30/01/2019 11:24	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Major/Minor Road
Date of Accident	25/01/2019	Time of Accident (hr:min)	16:40	Country of Accident	Singapore
Reporting Centre		Orange Force		COM No.	
Accident Location	ALONG VANDA ROAD				
Excess					
Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
Policyholder Mailing Address					
Address 1	23 LOTUS AVENUE	Address 2	LUCKY PARK	Address 3	SINGAPORE 277006
Address 4		Address Type	Singapore address	Post Code	277606
Unit No.		Related Policy Number	5104658916		
01 Driver Info					
Driver Name	JEANNE ENG CHER FONG	Driver Type	Main Driver	Driver DOB	30/09/1971
Unnamed driver Name		Driver NRIC	S7170039I	Driving Experience	11
Register Date of Driver License	21/07/2007	Driver Age	47	Contact No.(Office)	
Contact No.(Mobile)	81387931	Contact No.(Office)		Address 1	SINGAPORE 277606
Address 1	23 LOTUS AVENUE	Address 2	LUCKY PARK	Address 3	SINGAPORE 277606
Address 4		Address Type	Singapore address	Post Code	277606
Unit No.					
Does he own a Singapore Registered car?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Driver Vehicle No.	S166717G	Driver Insurer Company	NTUC
Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Modification History

Claim 001 OD-MX **New**

Claim Type *	OD-MX *	Insured Name	JEANNE ENG CHER FONG	Insured NRIC	S7170039I		
Contact No.(Mobile)	86614238	Contact No. (Home)		Contact No. (Office)			
Email Address		GS	S166717G	Vehicle Number	GBH3236M		
Claim Description	S166717G / GBH3236M ON 29 Jan 2019				Name of Preferred Workshop		
Preferred Workshop		Insured Liability	Not at Fault	GIA report	Received		
Release No.	Yes	Preferred Repair Option	Preferred Workshop, Name unknown				
Date Registered				Claim Close Date		Date Received	30/01/2019 11:35
Report Taken By				Workshop Repairer		Total Loss but Repaired	

Print AK letter

Save Submit

Attachment

Accident No.	MT/1030128	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	30/01/2019 12:31
Path *			
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Message Read			

Send Message

Attachment	Uploaded By/Date	Category	Urgency	Description	Max Size? (GB)
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 30 Jan 2019 12:31	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-30	
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 30 Jan 2019 12:31	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-30	
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 30 Jan 2019 12:31	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-30	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 30 Jan 2019 11:31	SAS	Normal	SAS 2019-1-30
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 30 Jan 2019 11:35	Photos	Normal	Photos 2019-1-30
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 30 Jan 2019 11:35	Photos	Normal	Photos 2019-1-30
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 30 Jan 2019 11:35	Photos	Normal	Photos 2019-1-30
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 30 Jan 2019 11:35	Photos	Normal	Photos 2019-1-30
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 30 Jan 2019 11:35	Photos	Normal	Photos 2019-1-30
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 30 Jan 2019 11:35	Photos	Normal	Photos 2019-1-30
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 30 Jan 2019 11:35	Photos	Normal	Photos 2019-1-30

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: 29 / 01 / 19 (DD/MM/YYYY). TIME: 16:40 (HH:MM)

LOCATION: VANDA RD

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJE 6717G
b) INSURANCE COMPANY: ANUC
c) POLICY NUMBER: 6104656916
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: HONDA FIT
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: RENTAL WORK
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: JEANNE ENG CHER FONG (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: ST1700391 CONTACT: 81387931
c) ADDRESS: 23 LOTUS AVE S(277606)

* d) DATE OF BIRTH: (____/____/____) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBH 5236M MODEL: _____
b) DRIVER'S NAME: LIM CHONG PENG / LIN JUNMING
c) NRIC/FIN/PASSPORT: ST107595H CONTACT: 8590 7377

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email =

VIDEO

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S71700391**



Name

JEANNE ENG CHER FONG



Race

CHINESE

Date of birth

20-09-1971

Sex

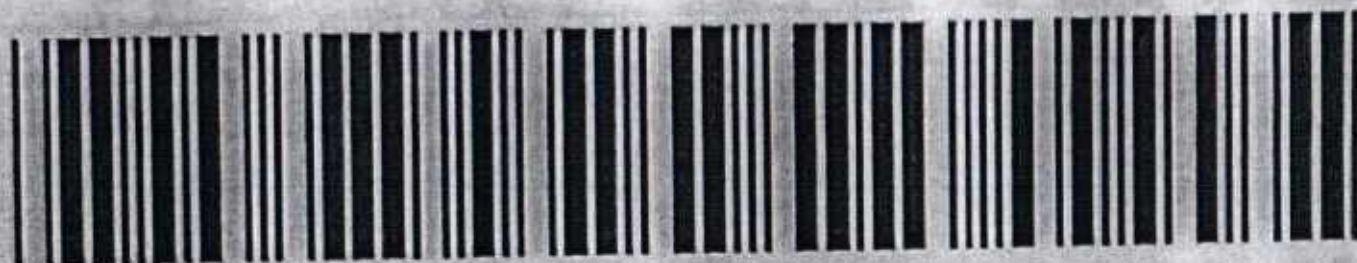
F

Country of birth

MALAYSIA



391336



NRIC No. **S7170039I**

Date of issue
31-07-2006

23 LOTUS AVE
SINGAPORE 277606

NRIC No: **S7170039I**

Date: **04/07/2016**



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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	27 Jul 2007
Class 3 Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	27 Jul 2007

NP 422A



Hello, NAC_BUKIT_MERAH_800676

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="29/01/2019 11:08"/>
Vehicle No.(For Motor)	<input type="text" value="SJE6717G"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5104656916		JEANNE ENG CHER FONG	S71700391	GPC	drive CLASSIC	SJE6717G	SJE6717G	15/10/2018	01/11/2019