

NATIONAL Assessment Centre Services.

(Ref: 1 Jan 2003)

19/04/2017 17:30

Date In: 08/07/2019 10:40	Job description	Date & Time Completed	Done by
Ref No: NBS/C71900258/4	SAS e-filing		
Veh No: G2 3000 K	E-mail (Within 8hrs, A/C 2hrs)		
D.O.A: 06/07/2019 12:10	I-Motor Claim Form		
OD / TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
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: SKJ 935J	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

Client Particulars:	Invoice Particulars (INC Only)	Amount	Amount
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100)	INC (\$30)	
Damaged Portion:	3) TP: Towing Fee	\$40/\$45	
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey	\$120	
Auditors Comments:	5) PT: Follow-Through Survey (Resurvey)	\$30	
Date:	For claiming against INC Only (Ref 10 Jan 2003)		
2/3:	6) TR: Re-inspection	\$75	
	7) NI: Idao DA + SMRT Survey	\$160	
	8) NTUC Additional Services:		
	OD:		
	*N5: Courtesy Car / Tpt Allowance	\$35	
	*N6: Repair Co-ordination	\$10	
	*N7: Post Repair Inspection	\$25	
	*N8: DV / Collect Excess Coordination	\$35	
	TE (N11): TP (Non 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	08/02/2019 10:40
Date Of Accident	06/02/2019 12:10
Exact Location Of Accident	ALONG YISHUN AVENIUE 7 AFTER CANBERRA DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ3000K
Insured/Policyholder	
Name Of Registered Owner	M/S DENNIS DESIGN
Co Reg No	53033641C
Email Address	DENNISDESIGN2012@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90675715
Alternative Phone No	OFFICE-90675715

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1818291800
Cover Note Number	

Driver

Name of Driver	DENNIS WEE HOCK SENG
NRIC No	S0133771H
Date Of Birth	25/12/1954
Occupation	INDOOR
Date Of Driving Pass	04/08/1983
Driving Experience	35 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90675715
Fax Number	
Contact Number	OFFICE-90675715
Email Address	DENNISDESIGN2012@GMAIL.COM

Address	BLK 216 YISHUN STREET 21 #09-325
Postcode	760216
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	CHAIN COLLISION
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	3
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?	YES
Remarks/ Reasons:	COULD NOT RETRIEVE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKJ9355J
Vehicle Make/Model/Colour	TOYOTA CAMRY
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TEOH ZHI SHENG
NRIC/Passport Number	S9346357I
Contact Number	93219463
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SFP8554K
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHITRAKALA D/O G ARUMUGAM
NRIC/Passport Number	S1719633B
Contact Number	98242057
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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**.
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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.


DENNIS DESIGN

Block 216 Yishun Street 21

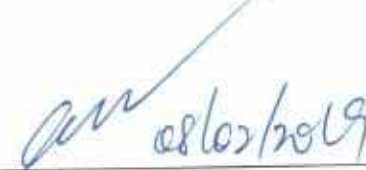
#09-325 Singapore 760216

Co. Reg No. 53936411

Policyholder's Signature
Date & Time:


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

07-02-2019


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

A) GZ3000
B) SKJ 935
C) SFP 855

OK 06/02/2019 AT ABOUT 12:10HRS I WAS DRIVING MY
VAN GZ3000K ALONG YORTHIN AVE 7 TRAFFIC WAS HEAVY. JUST
AFTER THE JUNCTION OF CAMBARRA DRIVE THE FRONT CAR
SKJ 9355J BRAKE & I COULD NOT BRAKE ON TIME &
HIT THE REAR OF THE CAR & THE CAR MOVED FORWARD &
HIT STEE 8354K. THAT ALL.

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

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

ACCIDENT STATEMENT

ACCIDENT DATE: 06/02/2019 (DD/MM/YYYY), TIME: 12:10pm (HH:MM)

LOCATION: Yishun Ave 7 and Geylang Drive

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GZ 3000K
b) INSURANCE COMPANY: China Taiping Insurance (S) Pte Ltd
c) POLICY NUMBER: DMCVSN181829/800
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Toyota Hiace
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
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: Dennis Wee Hick Seng (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S0133771H CONTACT: 90675715
c) ADDRESS: 216 Yishun St 21 #09-325 (760216)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Dennis Design (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S3033641C CONTACT: _____
c) ADDRESS: _____

*d) DATE OF BIRTH: 25/12/1984 (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: SKS 9355 J MODEL: Toyota Camry
b) DRIVER'S NAME: TEOH ZHI SHENG
c) NRIC/FIN/PASSPORT: S9346357I CONTACT: 9321 9463

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: SFP 8554 K MODEL: Mazda
e) DRIVER'S NAME: CHITRAKALA DIO G ARUMUGAM
f) NRIC/FIN/PASSPORT: S1719623 B CONTACT: 9824 2057

Email = dennusdesign2012@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0133771H



Name

DENNIS WEE HOCK SENG

Race

CHINESE

Date of birth

25-12-1954

Country/Place of birth

SINGAPORE

Sex

M

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S0133771H

Name

WEE HOCK SENG

Birth Date: 25 Dec 1954

Issue Date: 13 Jul 2000



5967478



NRIC No. S0133771H

Date of issue

28-06-2018

Address

APT BLK 210 YISHUN STREET 21
#09-325
SINGAPORE 760216

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PNES DATE

Class 2 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg 04 Aug 1993



License No: S0133771H

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. DMCVSN1818291800 Engine No : 1KD2807032
Chassis No: JTFHT02PX00243164
1. Index Mark and Registration Number of Vehicle G23000K
2. Name of Policy Holder M/S DENNIS DESIGN
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment 13 JUNE 2018
EXCESS SECT IS\$350.00
EX ON WINDSCREENS\$100.00
4. Date of Expiry of Insurance 12 JUNE 2019
5. Persons or Classes of Persons entitled to drive *

ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR 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.

Limitations as to use: *

- (1) USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
(2) USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS).
(3) USE FOR SOCIAL, DOMESTIC OR PLEASURE PURPOSES.
THE POLICY DOES NOT COVER:
(1) USE FOR HIRE OR REWARD OR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED TESTING.
(2) USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

HIRE PURCHASE CO. : ETHOZ CAPITAL LTD AS HP OWNER

* 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).
Please see reverse



Authorized Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorized Signatory