

NATIONAL Assessment Centre Services. [ver 1 Jan 00]

181901064

Date In: 11/02/2008 14:34	Job description	Date & Time Completed	Done by
Ref No: N81/1891/9002358/Y	SAS e-filing		
Veh No: SFJ 5351 J	E-mail (within 4hrs, AIC 2hrs)		
D.O.A: 23/12/2008 15:40	I-Motor Claim Form		
OID (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: Vch No: ( ) 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	Actions

Claimant's Particulars	Amount	Remarks
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
	5) FT: Follow-Through Survey (Resurvey)	\$30
Auditors Comments:	For claiming against INC Only (ver 10 Jan 2009)	
	6) TR: Re-inspection	\$73
Tel 1:	7) NI: Idan DA + SMRT Survey	\$160
	8) NTUC Additional Services:	
Tel 2:	OD:	
	*NS: Courtesy Car / Tpt Allowance	\$3
Tel 3:	*NG: Repair Coordination	\$10
	*NT: Post Repair Inspection	\$23
	*ND: DV / Critical Excess Coordination	\$3
	TP (NI): TP (Non INC) against INC	\$20
	9) NI: Idea 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	11/02/2019 14:34
Date Of Accident	23/12/2018 15:40
Exact Location Of Accident	LEVEL 9 INTERNATIONAL BUILDING LOT16
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ5351T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIN DECAI, DANIEL
NRIC No	S8436370G
Email Address	DANIELLINDA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98777980
Alternative Phone No	OTHERS-98777980

### Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-1.8 (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

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 28986659 QMX
Cover Note Number	

### Driver

Name of Driver	LIN DECAI, DANIEL
NRIC No	S8436370G
Date Of Birth	10/11/1984
Occupation	INDOOR
Date Of Driving Pass	01/11/2007
Driving Experience	11 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98777980
Fax Number	
Contact Number	OTHERS-98777980
E-Mail Address	DANIELLINDA@GMAIL.COM

Address	BLK 70A TELOK BLANGAH HEIGHTS #22-513
Postcode	101070
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	COLLIDED INTO PROPERTY
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	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : WIFE 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

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

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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)**

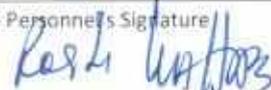
I understand, acknowledge, agree and consent that:

- (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.:



# ACCIDENT STATEMENT

ACCIDENT DATE: (23/11/2018) (DD/MM/YYYY). TIME: (15:40) (HH:MM)

LOCATION: International Building

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SG5 5351 T  
b) INSURANCE COMPANY: MSIG  
c) POLICY NUMBER: 28486659  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: Honda Civic 1.8  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: Private use  
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: Lin Daniel, DANIEL (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: 884863706 CONTACT: 98777980  
c) ADDRESS: 70A Telok Blangah Heights, #22-513, CS1101070

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: As above (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\*d) DATE OF BIRTH: (10/11/1984) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 1/11/2007

## 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: \_\_\_\_\_ MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: \_\_\_\_\_  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

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

\* No of passenger  
(Including driver)  
(2)

WIFE

\* No of passenger  
(Including driver)  
( )

\* No of passenger  
(Including driver)  
( )

Email = daniellinda@gmail.com

VIDEO



**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6827 7800  
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## 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 RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1  
Individual Ownership

**MOTOR MAX**  
Comprehensive

Certificate No. B 28986659 QMX

Excess : SGD500  
Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle  
SGJ5351T

2. Name of Policyholder  
Lin Decai Daniel

3. Effective Date of the Commencement of Insurance for the purposes of the Act  
13/07/2018

4. Date of Expiry of Insurance  
12/07/2019

5. Persons or Classes of Persons entitled to drive\*

Lin Decai Daniel

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

6. Limitations as to use\*

Use only for social domestic and pleasure purposes and for the Policyholder's business.  
The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

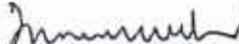
\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

**PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT ANY MSIG AUTHORIZED WORKSHOP LISTED IN THE ATTACHED.**

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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 any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.  
Approved Insurers

  
for Chief Executive Officer

ELYM201806211520

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8436370G



Name  
LIN DECAI, DANIEL

林 德 財

Race  
CHINESE

Date of birth  
10-11-1984

Country/Place of birth  
SINGAPORE

Sex  
M



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S8436370G

Name  
LIN DECAI, DANIEL

Birth Date 10 Nov 1984  
Issue Date 01 Nov 2007

001541069C



5471128

NRIC No: S8436370G

Date of issue  
19-05-2016

APT BLK 70A TELOK BLANDAH HEIGHTS #22-513  
SINGAPORE 101070

NRIC No: S8436370G

Date: 20/05/2016

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

PASS DATE

Class 3 Motor Cars < 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg 01 Nov 2007



NP 428A