

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: 13/02/19	Job description	Date & Time Completed	Done by
Ref No NA/FWD 19002654/13	SAS e-filing		
Veh No: 5J102SZ	E-mail (within 8hrs, AIC 2hrs)		
D.O.A 24/01/19	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: (SK Tel: Fax:)

TP Particulars: Veh No: PA9216R 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%; F: 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:- (INC hotline: 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 :

Date/Time	Actions

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	13/02/2019 14:40
Date Of Accident	24/01/2019 17:45
Exact Location Of Accident	NANYANG AVE @ HIVE BUILDING CARPARK Q
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT1025Z
Insured/Policyholder	
Name Of Registered Owner	WILLIE LIM WEI MING
NRIC No	S9524918C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84289527
Alternative Phone No	OTHERS-84289527

Vehicle Particulars

Manufacturer	HONDA
Model	STREAM
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	PNPV2018-00004750
Cover Note Number	

Driver

Name of Driver	WILLIE LIM WEI MING
NRIC No	S9524918C
Date Of Birth	20/07/1995
Occupation	INDOOR
Date Of Driving Pass	20/03/2015
Driving Experience	3 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84289527
Fax Number	
Contact Number	OTHERS-84289527
EMail Address	NOEMAIL

Address	BLK 482 SEGAR ROAD #08-352
Postcode	670482
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 PARKED VEHICLE
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG N.P.C
Police Station Address	ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190124/2153

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PA9216R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
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:

 13/02/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

NANYANG AVE

NTU HIVE, car park

A: SJT10252
B: PA9216R

B. PA9216R

Refer Police Report T/20190124/2153

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

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



SINGAPORE
POLICE FORCE



T/20190124/2153

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Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20190124/2153

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/01/2019 19:46			Vide Report No.:		Station Diary No.: 125
Informant's Particulars					
Name of Informant: WILLIE LIM WEI MING			Address: APT BLK 482 SEGAR ROAD #08-352 SINGAPORE 670482		
ID Type / ID No.: NRIC NO / S9524918C			Contact No.: Home/Office: Mobile: 84289527		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 23	Date of Birth: 20/07/1995	Type of Informant: Vehicle Owner		
Race: Chinese			Language:		Institution / School Name:
Occupation: Student			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/01/2019 17:45	Type of Location: Car Park
Location: Along Road 1 NANYANG AVENUE At Hive building, Carpark Q				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume:	
Type of Collision: Unknown			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	Motor Passenger
SJT1025Z	Car	HONDA	STREAM 1.8 A	Black	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



SINGAPORE
POLICE FORCE



T/20190124/2153

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20190124/2153

CONTINUATION OF REPORT

Vehicle Owner				
Name	WILLIE LIM WEI MING		ID No.	S9524918C
Related Vehicle	SJT1025Z (Car)		Contact No.	84289527
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

On 24/01/2019 at 1330HRS, I parked my vehicle SJT1025Z at carpark Q of the NTU hive building. Everything was intact when I left the vehicle.

On 24/01/2019 at about 1745HRS, I came back to my vehicle SJT1025Z and realized that it has been badly damaged. There were scratches all over the right front door over to the front right bumper of my car. There was also a big dent on the right front door and the bumper of my vehicle is almost dropping out. However, my vehicle is still functional.

I did not know who did this damage and there was no note left on my vehicle. I want to state that I do not have any in car camera footage.



SINGAPORE
POLICE FORCE



T/20190124/2153

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20190124/2153

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /

Sgt 2 TEO MING EN, RYAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt IRMAN BIN MOHAMAD SAID

Contact No.: 65476445

SN 127

Signature Of Informant:

Date/Time:

24/01/2019 19:46

Classification Of Case:



Authentication Stamp

Signature :

Singapore Police Force

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 24/01/2019	TIME: 17:45 hrs (hh:mm) 24 hrs Format		
LOCATION: Nan Yang Avenue, At Hive building, Carpark Q			
VEHICLE NUMBER: SJT1025Z			
INSURED NAME: Willie Lim Wei Ming			
NRIC/FIN: S9524918C	CONTACT: 8428 9527		
MAKE: Honda	MODEL: Stream 1.8A		
Are you claiming under your own insurance policy for repair to your vehicle?			
() Yes, If No, Pls Select: (<input checked="" type="checkbox"/>) Third Party () Reporting Only			
INSURANCE COMPANY: FWD			
TYPE OF POLICY: () COMPREHENSIVE () THIRD PARTY (<input checked="" type="checkbox"/>) TPFT			
POLICY NUMBER: PNPV2018-00004750			
NAME DRIVER: Willie Lim Wei Ming (<input checked="" type="checkbox"/>) SAME AS INSURED			
NRIC/FIN: S9524918C	CONTACT: 8428 9527		
DATE OF BIRTH: 20-07-1995			
DRIVING PASS DATE: 20-03-2015			
OCCUPATION: () INDOOR (<input checked="" type="checkbox"/>) OUTDOOR			
GENDER: (<input checked="" type="checkbox"/>) MALE () FEMALE			
EMAIL ADDRESS: sales@imprintsingapore.com () NO EMAIL			
ADDRESS OF DRIVER: Blk 482 Segar Road #02-352 Singapore 670482			
Number Of Passenger Include Driver: 0			
Was driver an employee of the Insured's Company? () YES (<input checked="" type="checkbox"/>) NO			
If No, Relationship Of The Driver With The Insured			
(<input checked="" type="checkbox"/>) Owner () Spouse () Friend () Relative () Children () Sibling () Others			
Does The Driver Own Any Other Vehicle?: () YES (<input checked="" type="checkbox"/>) NO			
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:			
Insurance Company Of Driver's Own Vehicle			
Weather Conditions: (<input checked="" type="checkbox"/>) Clear () Raining () Drizzling () Others			
Road Surface: (<input checked="" type="checkbox"/>) Dry () Wet () Others			
Was Any Foreign Vehicle Involved In This Accident? () YES (<input checked="" type="checkbox"/>) NO			
Was Anybody Injured In The Accident? () YES (<input checked="" type="checkbox"/>) NO			
If YES, Injured details:			
Convey By Ambulance: () YES (<input checked="" type="checkbox"/>) NO			
Was There Any Video Capture By Car Camera? (<input checked="" type="checkbox"/>) YES () NO Video with TP			
Was There Accident Reported To The Police? (<input checked="" type="checkbox"/>) YES () NO If Yes Attach Police Report			
Police Report Number (if any) No T/20190124/2153			
Details Of 3rd Party	Name / NRIC	No. of Paxs (Incl' driver)	Contact
Veh B PA 9216R		() / Not Sure ()	
Veh C		() / Not Sure ()	
Veh D		() / Not Sure ()	
Veh E		() / Not Sure ()	
Veh F		() / Not Sure ()	
Veh G		() / Not Sure ()	

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9524918C



Name

WILLIE LIM WEI MING

林 伟 铭

Race

CHINESE

Date of birth

20-07-1995

Sex

M

S9524918C



Country/Place of birth

SINGAPORE

5413119



NRIC No. S9524918C



Date of issue

02-01-2015

Address

**APT BLK 482 SEGAR ROAD
#08-352
SINGAPORE 670482**

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S9524918C**
Name:

WILLIE LIM WEI MING

Birth Date: **20 Jul 1995**
Issue Date: **20 Mar 2015**

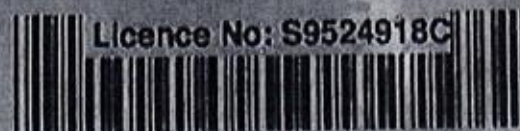


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg **20 Mar 2015**

NP 428A



CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNPV2018-00004750 (Third Party Fire And Theft)

Car plate number: SJT1025Z

Your name (As the policyholder): Willie Lim Wei Ming

Coverage start date: 14/04/2018

Coverage end date: 13/04/2019

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to drive:

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 08/04/2018



Abhishek Bhatia
Chief Executive Officer
FWD Singapore Pte Ltd

Please immediately inform us at +65-6820-8888
or email us at contact.sg@fwd.com if any details
in this Certificate of Insurance need to be changed.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 4918C

Vehicle Details

Vehicle No.: SJT1025Z
Vehicle to be Exported: Yes
Intended Deregistration Date: 13 Feb 2019
Vehicle Make: HONDA
Vehicle Model: STREAM 1.8 A
Primary Colour: Black
Manufacturing Year: 2007
Engine No.: R18A1728691
Chassis No.: RN61025377
Maximum Power Output: 103.0 kW (138 bhp)
Open Market Value: \$17,226.00
Original Registration Date: 16 Apr 2007
First Registration Date: 16 Apr 2007
Transfer Count: 6
Actual ARF Paid: \$18,949.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 15 Apr 2022
COE Category: E - Open Category
COE Period(Years): 5
PQP Paid: \$26,004.00
COE Rebate Amount: \$16,498.00
Total Rebate Amount: \$16,498.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 13 Feb 2019

OK