

NATIONAL Assessment Centre Services. [ver 1 Jan'05] **MNA 119022435.**

Date In: 18/2/19 14:50.	Job description	Date & Time Completed	Done by
Ref No: NA/INC 19002984/64.	SAS e-filing		
Veh No: SGD 3550E	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 16/2/19 18:05.	I-Motor Claim Form	MT/1032565-001	18/2/19 19:15.
OD: <input checked="" type="radio"/> Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Veh No: 538 1725 G. 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 Reference: 6788 6616)

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time	Actions

WA1901239

Invoice Item	Amount (\$)	Amount (\$)
1) AR: Accident Reporting (\$30);	30.00	
2) DA: Damage Assessment (\$100); INC (\$80)		
3) TP: Towing Fee \$40/\$45		
4) PT: Follow-Through Survey \$120		
5) PT: Follow-Through Survey (Resurvey) \$30		
For claiming against INC Only (wef 10 Jan 2005)		
6) TR: Re-inspection \$75		
7) NI: Idao DA + SMRT Survey \$160		
8) NTUC Additional Services:-		
QB:		
*N5: Courtesy Car / Tpt Allowance	\$5	
*N6: Repair Co-ordination	\$10	
*N7: Post Repair Inspection	\$25	
*N8: DV / Collect Excess Coordination	\$5	
TP (N11): TP (Non INC) against INC	\$20	
9) N12: Idao Mobile	30	
Invoice dated	Fee Charged	
Invoice dated	Fee Charged	

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Ref: 1:

Ref: 2/3:

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	18/02/2019 14:50
Date Of Accident	16/02/2019 18:05
Exact Location Of Accident	SERANGOON RD AFTER ST BARNABAS LANE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGD3550E
Insured/Policyholder	
Name Of Registered Owner	CHU SIEW LAI
NRIC No	S2505665E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93802273
Alternative Phone No	OFFICE-93802273
Vehicle Particulars	
Manufacturer	BMW
Model	320I
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5097326741-01
Cover Note Number	-
Driver	
Name of Driver	CHERYL YEO KIA MANG (YANG JIAMAN)
NRIC No	S9132449J
Date Of Birth	21/08/1991
Occupation	INDOOR
Date Of Driving Pass	01/02/2011
Driving Experience	8 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93802273
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 538 JELAPANG RD #11-28
Postcode	670538
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - DAUGHTER IN LAW
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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: : KOH HUI HOON
	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 ATTACHED STATEMENT.

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	SJB1725G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:

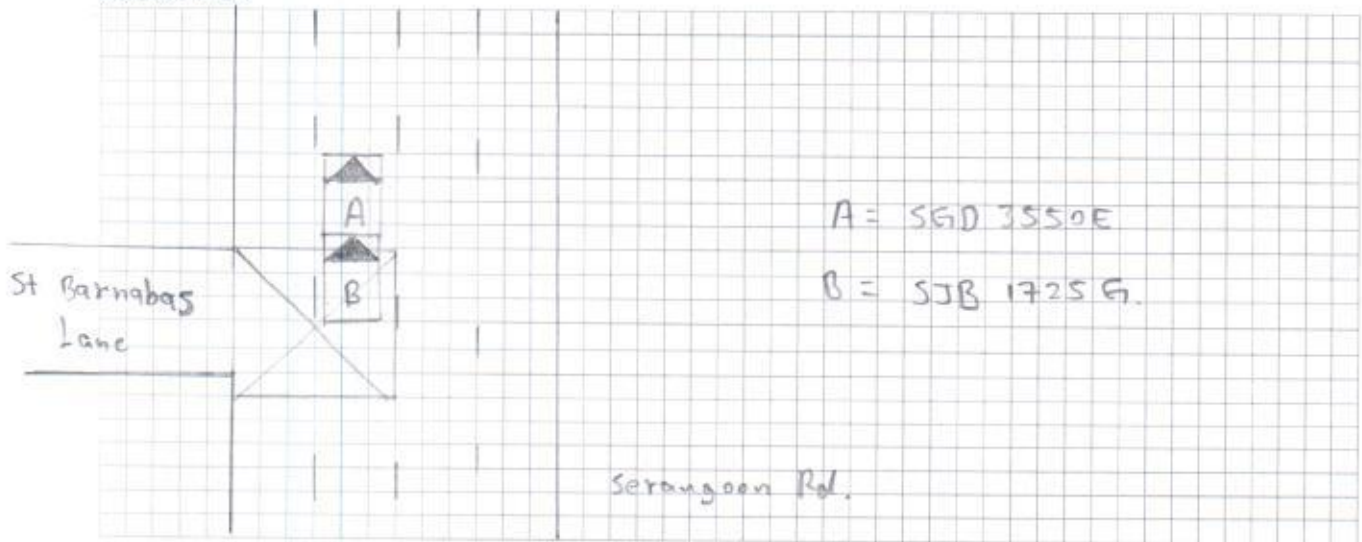
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

On the above mentioned date & time, I was travelling on Serangoon Road. As ~~it~~ there was traffic, I followed slowly & stopped in front of the yellow box. Suddenly, I felt an impact & I realised vehicle B has hit onto my rear.

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

Licence Number **S9132449J**

Name
**CHERYL YEO KIA MANG
(YANG JIAMAN)**

Birth Date **21 Aug 1991**
Issue Date **01 Feb 2011**

001934501H




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9132449J**

Name
**CHERYL YEO KIA MANG
(YANG JIAMAN)**
楊佳蔓

Race
CHINESE

Date of birth
21-08-1991

Sex
F

Country of birth
SINGAPORE






YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver, and other motor vehicles =< 2500kg 01 Feb 2011

NP 428A

Licence No: S9132449J



3927909

NRIC No. **S9132449J**

Date of issue
05-09-2006

Address
**APT BLK 538 JELAPANG ROAD #11-28
SINGAPORE 670538**

NRIC No: S9132449J Date: 07/05/2009 No: 6200080




Hello, NAC_PAYA_UBI_800601

[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="16/02/2019 14:44"/>							
Vehicle No.(For Motor)	<input type="text" value="SGD3550E"/>	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 type="radio"/>	5097326741-01		CHU SIEW LAI	S2505665E	GPC	drivo CLASSIC	SGD3550E	SGD3550E	15/02/2019	14/02/2020
<input type="button" value="Continue"/>										

Claim Handling

Accident MT/1032565

Policy No.	5097326741-01	Vehicle No.	SGD3550E	GST Registration No.	
Certificate No.					
Policyholder Name	CHU SIEW LAI			Policyholder NRIC	S25051
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	93802273	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No
▼ Accident Details					
Report Date	18/02/2019 19:06	Accident Report Within 24 hrs	Yes	Accident Type	Collisio
Date of Accident	16/02/2019	Time of Accident hh:mm	18:05	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	SERANGOON RD AFTER ST BARNABAS LANE				
▼ Excess					
Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	500.00	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 Registration No.		GST Status Verified	Yes		
Modification History					
▼ Policyholder Mailing Address					
Address 1	1 BUTTERWORTH LANE	Address 2	#12-03 DAWN VILLE	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	43944
Unit No.	12-03	Related Policy Number	5097326741-01		
▼ OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	CHERYL YEOW KIA MANG (YANG J	Driver NRIC	S9132449J	Driver DOB	21/08/
Register Date of Driver License	01/02/2011	Driver Age	27	Driving Experience	8
Contact No.(Mobile)	93802273	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 538 #11-28	Address 2	JELAPANG ROAD	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	67053
Unit No.	11-28				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	CHU SIEW LAI
Contact No.(Mobile)	93859961	Contact No. (Home)	67498073
Email Address		Vehicle Number	SGD3550E
Claim Description	SGD3550E / SJ81725G ON 16 Feb 2019		
Preferred Workshop	0	Insured Liability	Not at Fault
Report No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By			
		Claim Close Date	
			LIOW SHAN HUI

Print AK letter

Save Submit

Attachment

Accident No. MT/1032565 Claim No. 001

Last Doc. Received

☒ Yes ☐ No

Upload Date

18/02/2019 19:15

Path *

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Message Read

Category *

Confidential

Urgency *

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal


Clear

Please Select

NO

Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:15	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:15	SAS	Normal	SAS 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:14	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:14	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:14	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:14	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:14	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:14	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:13	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:13	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:13	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:13	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:13	Photos	Normal	Photos 2019-2-18
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 18 Feb 2019 19:13	Photos	Normal	Photos 2019-2-18

Video List

Uploaded By/Date	Folder Date	File Name	Source
		<div>Display in New Window</div> <div>Scan and uploading</div>	