

NATIONAL Assessment Centre Services. (wef 1 Jan 2005) **MNA1902 6841**

Date In: <b>26/2/19-16:47</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA/INC19003624/24</b>	SAS e-filing		
Veh No: <b>6UN57674</b>	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: <b>25/2/19-21:20</b>	i-Motor Claim Form	<b>MT/1633991-001</b>	<b>26/2/19 16:17</b>
OD: <b>TP</b> 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: Veh No: **6P5443x** 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

NA 190 1489	Invoice Preparation Checklist	Amt (\$) In Bill	Amt (\$) Add Bill
Claimant's Particulars:- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge):	1) AR: Accident Reporting (\$30);		
	2) DA: Damage Assessment (\$100); INC (\$80)		
	3) TF: Towing Fee \$40/\$45		
	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC:			
	*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: Idac Mobile 30		
	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	26/02/2019 16:43
Date Of Accident	25/02/2019 21:00
Exact Location Of Accident	STILL RD SOUTH TWDS ECP (CHANGI)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN5767Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	METRO CAR LEASING PTE LTD
Co Reg No	201810490D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

### Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA3 SEDAN 1.5 AT EU6
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101549843
Cover Note Number	

### Driver

Name of Driver	GABRIEL LIM YONG HUAT (LIN RONGFA)
NRIC No	S7622145F
Date Of Birth	24/07/1976
Occupation	INDOOR
Date Of Driving Pass	15/09/2015
Driving Experience	3 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97812700
Fax Number	
Contact Number	OFFICE-97812700
EMail Address	NOEMAIL

Address	BLK 3 UPPER ALJUNIED LANE #08-50
Postcode	360003
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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: : TAN LI CHING 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

REFER TO 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	SLP5443X
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)

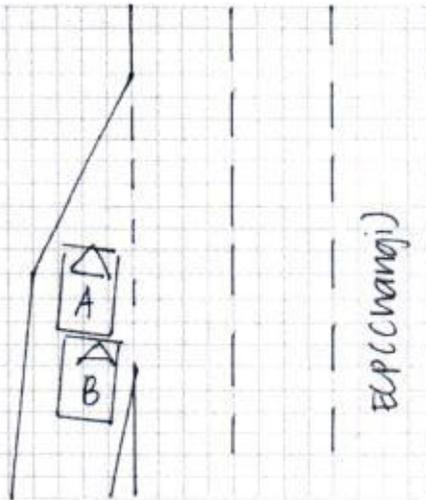
1



SKETCH PLAN

Vehicle A: SLN5767Y

Vehicle B: SLP 5443X



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time, I, vehicle 'A', SLN5767Y  
was travelling along the stated venue. Front vehicle made  
an abrupt brake and I slowed down and brake as well.  
About 3-5 seconds later, I felt an impact on my  
stationary vehicle's rear portion.

my passenger: Name: Tan Li Ching  
NRIC: S7838206F

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.:

# ACCIDENT STATEMENT

ACCIDENT DATE: 25/02/2019 (DD/MM/YYYY), TIME: 20:57 (HH:MM)

LOCATION: Still Road South Entrance to ECP (Changi)

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLN 5763Y  
b) INSURANCE COMPANY: NTUC  
c) POLICY NUMBER: \_\_\_\_\_  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: Mazda 3  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: Private  
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: Metro Car Leasing Pte Ltd (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

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

## DRIVER

- \* No of passenger  
(Including driver)  
(02)  
female passenger
- a) NAME: Gabriel Lim Yong Huat Lim Pengta (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S7822145F CONTACT: 97812700  
c) ADDRESS: 3 Upper Aljunied Lane #06-50 S(360003)

\* d) DATE OF BIRTH: 24/07/1976 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 3 years

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: hirer

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

- \* No of passenger  
(Including driver)  
(01)
- a) VEHICLE NUMBER: SLP 5443X MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: \_\_\_\_\_  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- \* No of passenger  
(Including driver)  
( )
- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

email =

fax =

**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number: **S 7622145F**  
Name:

**GABRIEL LIM YONG HUAT  
LIN RONGFA**

Birth Date: **24 Jul 1976**

Issue Date: **15 Sep 2015**



**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S7622145F**



Name

**GABRIEL LIM YONG HUAT  
(LIN RONGFA)**

**林 荣 发**

Race

**CHINESE**

Date of birth

**24-07-1976**

Sex

**M**

Country/Place of birth

**SINGAPORE**



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

**EFFECTIVE DATE**

**Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 15 Sep 2015**



**Licence No: S7622145F**

NP 428A

5423885



**NRIC No. S7622145F**



**Date of issue**

**27-01-2015**

**APT BLK 3 UPPER ALJUNIED LANE #08-50  
SINGAPORE 360003**

**NRIC No: S7622145F**

**Date: 22/02/2016**

eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

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

Policy No.  Date of Accident

Vehicle No.(For Motor)  Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5101549843		METRO CAR LEASING PTE LTD	201810490D	GPC	drive CLASSIC	SLN5767Y	SLN5767Y	18/06/2018	17/06/2019

Policy Information

Policy No.	5101549843	Policyholder Name	METRO CAR LEASING PTE LTD	Policyholder NRIC	201810490D
Certificate No.					
Address	210 TURF CLUB ROAD #LOT8 THE GRANDSTAND SINGAPORE 287995				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	18/06/2018	Effective Date	18/06/2018 00:00	Expiry Date	17/06/2019 23:59
Excess Type		All Claims Excess			
Third Party Excess	1500	Own damage Excess	1500	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	1500	Outside Singapore TP Excess	1500	Young/Inexperience Driver Excess	
Agent	TECK WEI CREDIT PTE. LTD.	Agent Tel.	64650020 null	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	210 TURF CLUB ROAD	Address 2	#LOT8 THE GRANDSTAND	Address 3	SINGAPORE 287995
Address 4		Address Type	Singapore address	Post Code	287995
Unit No.	LOT8	Related Policy Number	5107561174		

Insured Object: SLN5767Y

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue Cancel

Claim Handling

Exit

Accident MT/1033771

Policy No.	S101549843	Vehicle No.	SLN5767Y	GST Registration No.	
Certificate No.					
Policyholder Name	METRO CAR LEASING PTE LTD			Policyholder NRIC	2018104900
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	0	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KFK	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No
<b>Accident Details</b>					
Report Date	26/02/2019 16:55	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	25/02/2019	Time of Accident hh:mm	21:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	STILL RD SOUTH TWOS BCP (CHANGE)				
<b>Excess</b>					
Own damage Excess	1,500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	1,500.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
<b>Benefits</b>					
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date		GST Status Verified	No
GST Registration No.					
Modification History					
<b>Policyholder Mailing Address</b>					
Address 1	210 TURF CLUB ROAD	Address 2	#LOT48 THE GRANDSTAND	Address 3	SINGAPORE 287995
Address 4		Address Type	Singapore address	Post Code	287995
Unit No.	LOT48	Related Policy Number	S107561174		
<b>DI Driver Info</b>					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	24/07/1976
Unnamed driver name	GABRIEL LIM YONG HUAT (LIN)	Driver NRIC	S7622145F	Driving Experience	3
Register Date of Driver License	15/09/2015	Driver Age	42	Contact No.(Home)	0
Contact No.(Mobile)	97812700	Contact No.(Office)	0	Address 3	100 SENG GREEN
Address 1	BLK 3	Address 2	UPPER ALJUNIED LANE	Post Code	360003
Address 4	SINGAPORE 360003	Address Type	Singapore address		
Unit No.	08-50	Driver Vehicle No.		Driver Insurer Company	
Does he own a Singapore Registered car?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>Declaration</b>					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Modification History					

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	METRO CAR LEASING PTE LTD	Insured NRIC	2018104900	
Contact No.(Mobile)	8119294	Contact No.(Home)		Contact No.(Office)	NIL	
Email Address		DI Vehicle Number	SLN5767Y	TP Vehicle Number	SLP5443X	
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select			
Claimant Name *		Claimant NRIC *				
Claimant Address						
Claim Description	SLN5767Y / SLP5443X ON 25 Feb 2019				Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	26/02/2019 00:00	
Date Registered	26/02/2019 16:57	Claim Close Date				
Report Taken By	Jackson					
<input checked="" type="checkbox"/> Print AK letter						
<b>Save Submit</b>						

Attachment

Accident No.	MT/1033771	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	26/02/2019 16:58
Path *		Category *	
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO

Browse...

Clear

Please Select

NO

Normal

Browse...

Clear

Please Select

NO

Normal

Send Message Upload

**Attachment List**

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (00)	Action
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:58	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:58	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	SAS	Normal	SAS 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 26 Feb 2019 16:57	Photos	Normal	Photos 2019-2-26		<a href="#">Edit</a>

**Video List**

Uploaded By/Date	Folder Date	File Name	Source	Action
<div style="display: flex; justify-content: center; gap: 10px;"> <span style="border: 1px solid #ccc; padding: 2px;">Display in New Window</span> <span style="border: 1px solid #ccc; padding: 2px;">Scan and uploading</span> </div>				