

NATIONAL Assessment Centre Services

[wef 1 Jan 05] MHA 19027993

Date In: 28/1/05 - 17:30	Job description	Date & Time Completed	Done by
Ref No: NA/19027993/0586624	SAS e-filing		
Veh No: 978494C	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 27/1/05 - 17:30	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: ()

Tel: ()

Fax: ()

TP Particulars:

Veh No: 0W3JY9B

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:-

(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

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Ref. 1:

Ref. 2 / 3:

Invoice Preparation Checklist

Am't (\$)

Am't (\$)

Est. Bill

Add Bill

- 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:-
- 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	28/02/2019 17:30
Date Of Accident	27/02/2019 19:20
Exact Location Of Accident	WOODSVILLE TUNNEL TWDS POTONG PASIR
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJP8494C
Insured/Policyholder	
Name Of Registered Owner	MARIC & PARTNERS PTE LTD
Co Reg No	201620701N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-899999999
Vehicle Particulars	
Manufacturer	HONDA
Model	STREAM 1.8X A
Exact Purpose for which vehicle was being used at time of accident	WORKING
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 HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	999994654
Cover Note Number	
Driver	
Name of Driver	TONG YONG KENG (ZHUO YONGQING)
NRIC No	S8315437C
Date Of Birth	17/05/1983
Occupation	OUTDOOR
Date Of Driving Pass	29/11/2006
Driving Experience	12 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92705967
Fax Number	
Contact Number	OFFICE-92705967
Email Address	NOEMAIL

Address	BLK 987C BUANGKOK GREEN #14-47
Postcode	533987
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?	YES
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)	2
Passenger 1	NAME: : - GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20190228/7007.

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	SLW3549B
Vehicle Make/Model/Colour	CHEVROLET
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)

DETAILS OF INJURED PERSON 1

Name

TONG YONG KENG (ZHUO YONGQING)

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SJP8494C

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

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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.

Maric & Partners Pte Ltd
Co. Reg No. 201620701N
9 Tagore Lane #03-04
Singapore 87472

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



V.A) SJP8494C

V.B) SLW3549B

Woodsville Tunnel tud potong Pass.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle 'A' was travelling on the stated venue. I was travelling straight in my, traffic was red and all the cars in front were stationary. I was stationary in my lane too. A few moments later, I felt a huge impact on my vehicle rear, my passenger got a shock too. I got down and realised vehicle 'B' hit onto my stationary vehicle rear portion.

GoJek Passenger: male.

DECLARATION

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

Maric & Partners Pte Ltd
Co Reg No 201620701N
Policyholder's Signature
@ Reg No Lane #03-04
Date & Time:
Singapore 787472

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

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

ACCIDENT STATEMENT

ACCIDENT DATE: (27 / 02 / 2019) (DD/MM/YYYY), TIME: (19 : 20) (HH:MM)

LOCATION: Woodsville Tunnel twds potong Pass

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJP8494C
b) INSURANCE COMPANY: AIg
c) POLICY NUMBER: 99999654
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Honda stream
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: work
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: MARIC & Partners Pte Ltd (MALE / FEMALE)
B) NRIC/FIN/PASSPORT: 20620701N CONTACT: _____
C) ADDRESS: 9 Tagore Ave. +103-04

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Tock yang keng (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S8315437C CONTACT: 92705967
c) ADDRESS: 987C Buaykok Green
#14-47 553387

*d) DATE OF BIRTH: (17/5/1983) (DD/MM/YYYY)

- e) OCCUPATION: (INDOOR / OUTDOOR)
f) YEARS OF DRIVING EXPERIENCE: 13

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) 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) Tock Hong Keng
7. a) REPORTED TO POLICE (YES / NO) 106B Ave3
IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLW3549B MODEL: chevrolet
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: _____

14. No. of passengers
(Including driver)
(02)

1mml.

8. $\frac{1}{2}$ No of passenger
(including driver)
()

* No of passenger
(Including driver)
()

28K
Gunnabi Industrial park 2

1951-25, 51 USA Arc

$S(408933)$

Email = REPORTING@TOPQUE5.com
fax = 6452 4584

fax = 6452 4584



**SINGAPORE
POLICE FORCE**



T/20190228/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20190228/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/02/2019 13:59	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: TOCK YONG KENG			Address: APT BLK 987C BUANGKOK GREEN #14-47 SINGAPORE 533987	
ID Type / ID No.: NRIC NO / S8315437C			Contact No.: Home/Office:	Mobile: 92705967
Nationality: SINGAPORE CITIZEN			Email: yk_tock@hotmail.sg	
Sex: Male	Age: 35	Date of Birth: 17/05/1983	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Delivery Driver			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 27/02/2019 19:20	Type of Location: Straight Road
Location: WOODSVILLE TUNNEL					
Weather: Clear		Road Surface: Dry			Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working			Traffic Volume: Moderate
Type of Collision: My car was stationary waiting for traffic light to turn green and					Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJP8494C	Car	HONDA	Stream	Silver	Slightly Damaged	1
SLW3549B	Car			White		0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190228/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20190228/7007

CONTINUATION OF REPORT

Driver				
Name	TOCK YONG KENG		ID No.	S8315437C
Related Vehicle	SJP8494C (Car)		Contact No.	92705967
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	Slight
Passenger				
Name	Qijie		ID No.	NIL
Related Vehicle	NIL		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

My car was stationary awaiting for traffic to turn green and a car hit me from behind after about 5 second after I had come to a stationary position



**SINGAPORE
POLICE FORCE**



T/20190228/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20190228/7007

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
SITIMARSITA BINTE BOHARI
Contact No.: 65476219

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
28/02/2019 13:59

Classification Of Case:

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. **S8315437C**



Name
TOCK YONG KENG
(ZHUO YONGQING)
 卓勇庆

Race
CHINESE

Date of birth
17-05-1983

Country/Place of birth
SINGAPORE

Sex
M




License Number: **S8315437C**
 Name:
TOCK YONG KENG
ZHUO YONGQING

Birth Date: **17 May 1983**
 Issue Date: **25 Aug 2015**




002465523F

5305537



MNC No: **S8315437C**



Date of issue
15-05-2014

Address
APT BLK 987C BUANGKOK GREEN
#14-07
SINGAPORE 533987

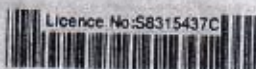
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

EFFECTIVE DATE

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

29 NOV 2006

NP 428A



Licence No: S8315437C

SJP8494C

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)

(The below excess is subject to GST)

THIRD PARTY
CERTIFICATE NO.
POLICY NO.

COMMERCIAL MOTOR
SJP8494C
999994654

POLICY EXCESS **S\$1000.00**
WINDSCREEN EXCESS **NA**

SUM INSURED **NA**
INSURING WITH COE/PARF **NA**
SJP8494C
MARIC & PARTNERS PTE LTD

VEHICLE REGISTRATION NO.

NAME OF INSURED

**EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE
OR THE PURPOSES OF THE ACT**

DATE OF EXPIRY OF INSURANCE

10 September 2018

24 April 2019

PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

* person who is driving on the Insured's order or with their permission.

1,000.00 Section II Excess is applicable for driver who is above 22 years old and/or with minimum 2 years driving experience.

1,000.00 Section II Excess is applicable for drivers who is 21 years old with minimum 1 year driving experience.

* policy does not cover drivers who are below 21 years old or less than 1 year driving experience.

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 under the order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

NA

Notwithstanding to the contrary, any provisions in the Policy which are inconsistent with the provisions 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.

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).

Issued in Singapore 10 Sep 2018

AIG Asia Pacific Insurance Pte. Ltd.

500656-000
Cowell Insurance (Agency) Pte. Ltd.
8 Burn Road
#09-09 Trivex
Singapore 369977

Maric

AUTHORIZED REPRESENTATIVE