

NATIONAL Assessment Centre Services.

[wrt 1 Jar00]

MAA49028671

Date In: 04/03/2019 18:39	Job description	Date & Time Completed	Done by
Ref No: NIA/INC19003997/y	SAS e-filing		
Veh No: SLC 66839	E-mail (w/dln 3hrs, AIC 2hrs)		
D.O.A: 28/02/2019 19:35	I-Motor Claim Form	MT1034536001	04/03/2019 18:55
OID: TP / Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SLC 6671L	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 repeler.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Reminders: (INC 19003997/y)

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Activity

MAA4901643

Driver/Owner:	1) AR: Accident Reporting (\$30)	
Contact No:	2) DA: Damage Assessment (\$100) INC (\$50)	
Damaged Portion:	3) TP: Towing Fee \$40/\$45	
	4) PT: Follow-Through Survey \$120	
	5) FT: Follow-Through Survey (Resurvey) \$30	
	6) TR: Re-inspection \$75	
	7) NI: Idco DA + SMRT Survey \$160	
	8) NTUC Additional Services:	
	ON:	
	*NS: Courtesy Car / TPR Allowance \$5	
	*N6: Repair Co-ordination \$10	
	*N7: Post Repair Inspection \$25	
	*N8: DV / Collect Excess Coordination \$5	
	*N9: TP (N1) / TP (N-in INC) \$20	
	*N12: Idco 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	04/03/2019 18:39
Date Of Accident	28/02/2019 19:35
Exact Location Of Accident	WEST COAST ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC6683G
Insured/Policyholder	
Name Of Registered Owner	YEO CHOON SIONG MELVYN
NRIC No	S7207169G
Email Address	MEL@LIFELINE.COM.SG
Mobile Phone No	(LOCAL) +65-90903408
Alternative Phone No	OTHERS-90903408

Vehicle Particulars

Manufacturer	TOYOTA
Model	HARREIR
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	5080541023-02
Cover Note Number	

Driver

Name of Driver	YEO CHOON SIONG MELVYN
NRIC No	S7207169G
Date Of Birth	07/03/1972
Occupation	INDOOR
Date Of Driving Pass	14/11/1989
Driving Experience	29 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90903408
Fax Number	
Contact Number	OTHERS-90903408
Email Address	MEL@LIFELINE.COM.SG

Address	32 KEPPEL BAY DRIVE #08-55
Postcode	098651
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	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?	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)	1

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKC6677L
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEN HUAZAI
NRIC/Passport Number	
Contact Number	85517551
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:

4 MARCH 2019
5:10 PM.

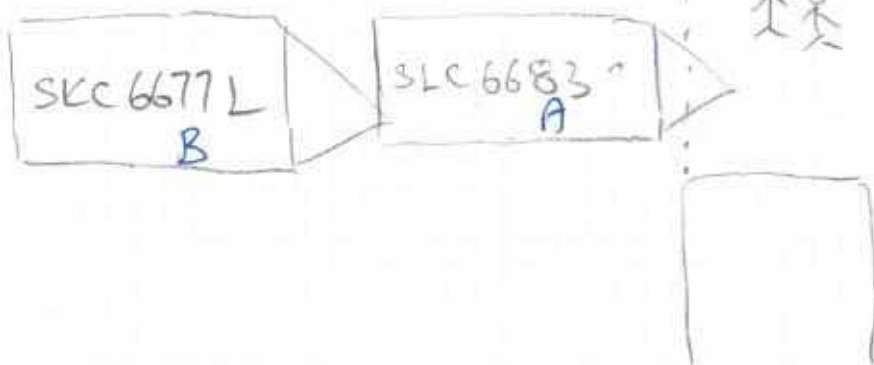
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

04/02/2019
[Signature]

SKETCH PLAN

NES1 CARPARK ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was coming out of carpark and stopped at stop line to let 2x pedestrians cross. was hit from the back by Chen Huezai's car coming out from the carpark.

DECLARATION

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

[Signature]
Policyholder's Signature
Date & Time:

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

[Signature] 08/03/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Claim Handling

Accident RT/LOH#338

Policy No.	5080541025-02	Vehicle No.	SLC6883G	GST Registration No.	
Certificate No.					
Policyholder Name	VED CHOON SIONG MELVIN			Policyholder NRIC	S2207169J
Product Code	PRIVATE-CAR INSURANCE	Cover Type	Priv (145.00)	Issuing	0
Contact No.(Mobile)	89823408	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPI	No Yes	TCR	No Yes	eCode Reason	
NCD Protection	Yes	NCD Endowment(Ns)	50	Private Hire	No

Accident Details

Report Date	04/03/2019 18:34	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head on collision
Date of Accident	20/02/2019	Time of Accident H:mm	07:25	Country of Accident	Singapore
Reporting Centre		Orange Force		CPN No.	
Accident Location	WEST COAST ROAD				

Excess

Own Damage Excess	0.00	Additional Excess	0	Windscreen Excess	500.00
Uninsured Driver Excess	0.00	Outside Singapore OD Excess	500.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Notification History					

Policyholder Mailing Address

Address 1	37 KERTEL BAY DRIVE	Address 2	#04-55 CARIBBEAN AT KERTEL	Address 3	SINGAPORE 098051
Address 4		Address Type	Singapore address	Post Code	098051
Unit No.	04-55	Related Policy Number	5080541025-02		

Q1 Driver Info

Driver Name	VED CHOON SIONG MELVIN	Driver Type	Main Driver		
Uninsured driver Name		Driver NRIC	S2207169J	Driver DOB	07/03/1972
Register Date of Driver License	14/11/1989	Driver Age	46	Driving Experience	29
Contact No.(Mobile)	89823408	Contact No.(Office)		Contact No.(Home)	
Address 1	37 KERTEL BAY DRIVE	Address 2	#04-55 CARIBBEAN AT KERTEL	Address 3	SINGAPORE 098051
Address 4		Address Type	Singapore address	Post Code	098051
Unit No.	04-55				
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SLC6883G	Driver Insurer Company	NICLC

Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes No		

Modification History

Claim 001 **None**

Claim Type *	OD-MK	Insured Name	VED CHOON SIONG MELVIN	Insured NRIC	S2207169J
Contact No.(Mobile)	89823408	Contact No.(Home)	83801155	Contact No.(Office)	
Email Address		Q1 Vehicle Number	SLC6883G	TP Vehicle Number	SWC6677L
Claim Description	SLC6883G / SWC6677L ON 29 Feb 2019				Agree if Preferred Workshop
Preferred Workshop		Insured Liability	Not at Fault		
Settled No. / Finalisation	Yes	Placed/Repay Option	Preferred Workshop, Name Unknown	GIA report	Received
Date Registered	04/03/2019 18:34	Claim Date		DRN Received	04/03/2019 00:00
Report Taken By	BOSLI WANAB				

Print AK letter

Save Submit

Attachment

Accident No.	RT/034536	Claim No.	001
Last Doc. Received	Yes No	Upload Date	04/03/2019 18:55
Path *		Category *	Confidential
Choose File No file chosen		Urgency *	Description *
Choose File No file chosen		Clear	Please Select
Choose File No file chosen		Clear	Please Select
Choose File No file chosen		Clear	Please Select
Choose File No file chosen		Clear	Please Select
Choose File No file chosen		Clear	Please Select
Choose File No file chosen		Clear	Please Select
Choose File No file chosen		Clear	Please Select
Message Read			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CC)
	NAC_BUKIT_MERAH_806676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 04 Mar 2019 18:55	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-3-4	
	NAC_BUKIT_MERAH_806676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 04 Mar 2019 18:55	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-3-4	
	NAC_BUKIT_MERAH_806676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 04 Mar 2019 18:55	SAS	Normal	SAS 2019-3-4	

	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:37	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:37	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:37	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:37	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:36	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:36	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:36	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:36	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:36	Photos	Normal	Photos 2019-3-4
	NAC_BUKIT_MERAH_800676/ NATIONAL ASSESSMENT CENTRE SERVICE-5 (BUKIT MERAH)) on 04 Mar 2019 18:36	Photos	Normal	Photos 2019-3-4

Video List

Uploaded On/Date	Folder Date	File Name	Source	Action
				Display in New Window Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 28/2/2019 (DD/MM/YYYY), TIME: 7:36 PM (HH:MM)

LOCATION: WEST COAST

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLC 6683G
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: ZSU600075490
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: TOYOTA HARRIER
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) NO
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: MELVYN YEO (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S720769G CONTACT: 90903408
c) ADDRESS: 32 KEPPEL RAY DR #08-55
SIC18651

* 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: 07/05/1972 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 1989

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

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS CLEAR)
b) ROAD SURFACE: (DRY / WET / OTHERS DRY)

6. WAS ANYBODY INJURED (YES / NO) NO

7. a) REPORTED TO POLICE (YES / NO) NO

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKC6677L MODEL: MERC 'C' CLASS
b) DRIVER'S NAME: CHEN HUAZAI
c) NRIC/FIN/PASSPORT: _____ CONTACT: 85517551

9. THIRD PARTY VEHICLE

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

email = mel@lifeline.com.sg
VIDEO



Type	Country Code	Passport No
PA	SGP	E6579594K

Name
YEO CHOON SIONG, MELVYN
(YANG JUNXIONG, MELVYN)

E6579594K

Sex	Nationality
M	SINGAPORE CITIZEN

Date of birth	Place of birth
07 MAR 1972	SINGAPORE


Date of issue	Date of expiry
02 MAR 2017	07 NOV 2022

Modifications	Authority
SEE PAGE 2	MINISTRY OF HOME AFFAIRS

National ID No
S7207169G

PASGPYEO<<CH00N<SIONG<MELVYN<<<<<<<<<<<<<<<
E6579594K7SGP7203073M2211075S7207169G<<<<<64

REPUBLIC OF SINGAPORE **DRIVING LICENCE**




Licence Number **S7207169G**

Name

YEO CHOON SIONG, MELVYN
(YANG JUNXIONG, MELVYN)

Birth Date **07 Mar 1972**

Issue Date **06 Oct 2003**



000893433D

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

	PASS DATE
Class 2B Motorcycles <= 200 CC	02 Oct 2013
Class 3 Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	14 Nov 1989

S7207169G

S / No. 9000180600

NP 429A



Licence No: S7207169G

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)

Certificate Number: 5080541023-02

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SLC6683G**
Chassis Number : ZSU600075490
2. Name of Policyholder : **YEO CHOON SIONG MELVYN**
3. Effective Date of Insurance : **23 May 2018**
4. Expiry Date of Insurance : **22 May 2019**
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
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 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#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: YEO CHOON SIONG MELVYN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: HL BANK
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : S & M ALLIANCE PTE LTD (00000614373)
Date of Issue : 21 May 2018 20:55 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive