

# NATIONAL Assessment Centre Services.

[ver 1 Jan'09]

MMA 119035956

Date In: 18/3/19 16:09	Job description	Date & Time Completed	Done by
Ref No: NA1 LIP1900 4873(h4)	SAS e-filing		
Veh No: SLU 4627 M.	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 16/3/19 18:35	I-Motor Claim Form		
OD: TP Reporting Only	I-Motor W/O (within: OD 2hrs, TP 4hrs)		
TP Insurer:	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: SME S910K	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)

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

2) QC Check / Post Repair Inspection ( )

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

Injury:

Date/Time	Actions

MMA 1901946

Claimant's Particulars:	Invoice Preparation Checklist	Amount (\$)	Amount (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	30.00	
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TP: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors Comments:	5) PT: Follow-Through Survey (Resurvey) \$30		
Ref. 1:	For claiming against INC Only (ver 10 Jan 2005)		
Ref. 2/3:	6) TR: Re-inspection \$75		
	7) NI: Idan DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
	*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: Idan Mobile \$0		
	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	18/03/2019 16:09
Date Of Accident	16/03/2019 18:35
Exact Location Of Accident	DORSET RD AFTER JUNC KENG LEE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU4627M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	DARWIN-51 CAR RENTAL PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-88215151

### Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V07071/VPZ/R01
Cover Note Number	-

### Driver

Name of Driver	BOO KOK WENG(WU GUORONG)
NRIC No	S7310441F
Date Of Birth	22/03/1973
Occupation	OUTDOOR
Date Of Driving Pass	08/04/1994
Driving Experience	24 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97336886
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 194 KIM KEAT AVE #11-394
Postcode	310194
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 - CHANGE/CROSS LANE
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: : UNKNOWN GENDER: : MALE

#### 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?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMF5810K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHIANG WENG CHAN
NRIC/Passport Number	
Contact Number	90916822
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	BOO KOK WENG(WU GUORONG)
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLU4627M
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	



## 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.

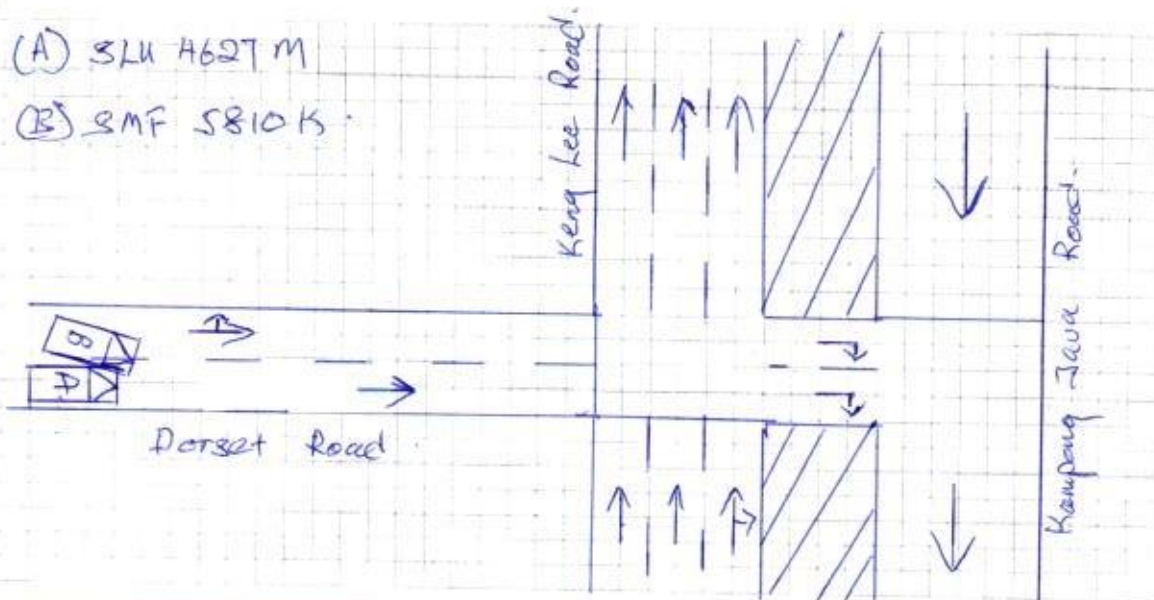


Policyholder's Signature  
Date & Time:

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

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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/03/19 at @ 1833hrs, I was travelling in my vehicle (SLU 4627M) along Dorset Road towards Keng Lee Road travelling straight on the right lane. Suddenly, a car (SMF 5810K) on my left, cut into my path and collided onto the left side of my vehicle.

## 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.:



Vehicle No.	SLU 4627 M	Model / Make	Toyota Prous Alpha
Date of Accident	16 / 03 / 19		
Time of Accident	1833 HRS		
Location of Accident	Dorset Road before junction Keng Lee Road		
Exact purpose use during accident	Chauffeur		
Name of Owner	Darwin-Si Car Rental Pte Ltd		
Telephone No.	H/P: 8821 5151	Home:	Office:
NRIC	201407909C		
Address	2, Kaki Bukit Ave 2 #01-17, Kaki Bukit Autocub, (S) 417921		
Claim type	OD	<u>THIRD PARTY</u>	REPORTING ONLY
Insurance Company	Liberty		
Type of Coverage	<u>Comprehensive</u>	Third Party	Third Party / Fire / Theft
Policy No.	SD 18V07071 / VP2 / RO1		
Name of Driver	As Above If No, Boo Kok Weng		
NRIC	S7310441F	Any Passengers:	<del>01</del> 01 (M)
Date of birth	22 / 03 / 1973		
Occupation	<u>Outdoor</u>	/	Indoor
Driving License Pass Date	08 / 04 / 1994		
Gender	<u>Male</u>	/	Female
Contact No.	H/P: 9733 6886	Home:	Office:
Address	BLK 194, Kim Keat Ave #11-394 (S) 310194		
Driver have any own vehicle	<u>No</u>	If yes, Reg No.	
Relationship	Employee,	If no, state <u>Hirer</u>	
Weather condition	<u>Clear</u>	Raining	Other
Road Surface	<u>Dry</u>	Wet	Other
Any Injuries	No,	<u>If Yes, Who?</u>	
Name And Contact No.	Boo Kok Weng (H/P: 9733 6886)		
Name And Contact No.			
Police Report	<u>No</u>	If Yes, Where?	
Vehicle B No.	SMF 5810 B	Any Passengers:	N.A.
Name of Driver	Chiang Weng Chan	Contact No.:	<del>9091</del> 9091 6822
Vehicle C No.		Any Passengers:	
Vehicle D No.		Any Passengers:	
Vehicle E no.		Any Passengers:	
Vehicle F No.		Any Passengers:	
Vehicle G No.		Any Passengers:	
Witness Name		Witness Contact:	
Accident Portion	<u>Left Side</u>		
Camera Recorder	<u>Yes</u>	No	
Email Address	bookekweng@gmail.com		
PARTICULAR WORKSHOP	N-S I		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Huixin		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n5i.com.sg		



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S7310441F



BOO KOK WENG  
(WU GUORONG)

Birth Date: 22 Mar 1973

Issue Date: 25 Mar 2004



REPUBLIC OF SINGAPORE

IDENTITY CARD NO: S7310441F



Name



BOO KOK WENG  
(WU GUORONG)

巫 国 荣

Race

CHINESE

Date of Birth

22-03-1973

Country of Birth

SINGAPORE

Sex

M

Land Transport & Authority



VOCATIONAL LICENCE

Licence No: S7310441F

Name: BOO KOK WENG

Card Issue Date: 08/02/2018

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

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

Class 3: Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

05 Apr 1994



Licence No: S7310441F

NP 428A



3298415

NRIC No: S7310441F



Blood Group

Date of issue

25-04-2003

APT BLK 194 KIM KEAT AVENUE #11-394  
SINGAPORE 310194

NRIC No: S7310441F

Date: 10/01/2010

No: 4329099

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	08/02/2018








**Liberty Insurance Pte Ltd**  
Registration no. 199002791D  
51 Club Street  
#03-00 Liberty House  
Singapore 069428  
Tel: (65) 6221 8611 Fax: (65) 6225 6890  
Website: <http://www.libertyinsurance.com.sg>

## 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 No	SD18V07071 /VPZ /R01
Form	MZ406C
Date Of Issue	10-JUL-2018
1.Index Mark and Registration No. of Vehicle:	SLU4627M
2.Chassis number of Vehicle:	ZVW400027184
3.Name of Policyholder:	DARWIN-51 CAR RENTAL PTE LTD
4.Effective date of Commencement of Insurance for the purpose of the Act:	28-JUL-2018 00:00 AM
5.Date of Expiry of Insurance:	27-JUL-2019 23:59 PM
6.Persons or Classes of Persons entitled to drive*:	<p>Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.</p> <p>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.</p> <p>And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.</p>
7.Limitations as to use*:	<p>A) Use for carriage of passengers or goods in connection with the Policyholder's business.</p> <p>B) Use for social, domestic, pleasure and business purposes of any person to whom the vehicle is hired.</p> <p>C) Use for the carriage of passengers for hire or reward under "Uber/Grabcar" by the person to whom the vehicle is hired.</p>
8.Policy does not cover:	<p>A) Use for racing, pace-making, reliability trial or speed-testing.</p> <p>B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.</p> <p>*Limitations rendered inoperative by Section 8 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.</p>
<p>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).</p> <p style="text-align: right;">For and on behalf of <b>LIBERTY INSURANCE PTE LTD</b> Approved Insurers</p> <p style="text-align: right;"> Authorized Signature</p>	
<b>For Information only:</b>	
COVERAGE :	Comprehensive, Unlimited Windscreen, Uber/Grabcar Extension
SUM INSURED:	MARKET VALUE AT THE TIME OF LOSS
EXCESS:	Section I - Singapore S\$2000 / Outside Singapore S\$4000, Section II - Singapore S\$1500 / Outside Singapore S\$3000, Windscreen Excess S\$100
FINANCE COMPANY:	MAYBANK
PRODUCER NAME:	INSURE HOUSE

PLYW/PLYW/10-JUL-18

10-JUL-18

## Register New Vehicle (Acknowledgement)

### Vehicle Particulars

Vehicle No.:	SLU4627M		
Vehicle Type:	Z11 - Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	TOYOTA	Vehicle Model:	PRIUS ALPHA HYBRID 1.8S CVT
Chassis No.:	ZVW400027184	Engine No.:	2ZR0A24802
Motor No.:	317H17589	Trailer Chassis No.:	-
Propellant:	Petrol-Electric	Passenger Capacity:	6
Engine Capacity:	1797 cc	Power Rating:	60.0 kW
Maximum Power Output:	100.0 kW ( 134 bhp )		
Unladen Weight:	1460 kg	Maximum Laden Weight:	1845 kg
Primary Colour:	Grey	Secondary Colour:	-
First Registration Date:	01 Dec 2017	Original Registration Date:	01 Dec 2017
Manufacturing Year:	2017	Open Market Value:	\$29,254.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$8,978.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$20,000.00 (100%), next \$9,254.00 (140%)
Actual ARF Paid:	\$17,956.00		

### Owner Particulars

Owner Name:	DARWIN-51 CAR RENTAL PTE LTD
Owner ID Type:	Company
Owner ID:	201407909C
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block /House No.:	1
Registered Street Name:	KAKI BUKIT ROAD 1
Registered Unit	



No.: # 01 - 09  
Registered  
Building Name: ENTERPRISE ONE  
Registered Postal  
Code: 415934  
COE No. / Expiry  
Date: 2017120103001001N / 30  
Nov 2027  
COE Bid Category: B - Car above 1600cc or  
97kW (130bhp)  
QP Paid: \$57,414.00

#### Transaction Details

Business  
Transaction Ref. 20171201092352933583  
No.:  
Business  
Transaction Date: 01 Dec 2017  
Business  
Transaction Time: 09:23:52

#### Message

The above vehicle has been successfully registered.

Please note that \$65,997.00 will be deducted from your GIRO account.