

NATIONAL Assessment Centre Services.

[ver 1 Jan'03] MMA 119036762.

Date In: 20/3/19 10:11	Job description	Date & Time Completed	Done by
Ref No: MA1222 190050151h4.	SAS e-filing		
Veh No: PZ 3388K	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 19/3/19 05:50.	1-Motor Claim Form		
OD (TP) Reporting Only	1-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	1-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: SFV 2150A. 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 repolar.

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

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

Reminders: (INC Notice 0700 6016)

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 1902062

Client's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors Comments:

Ref: 1:

Ref: 2/3:

Invoice Particulars	Amount (\$)	Remarks (\$)
1) AR: Accident Reporting (\$30);	30.00	
2) DA: Damage Assessment (\$100); INC (\$40)		
3) TP: Towing Fee \$40/\$45		
4) PT: Follow-Through Survey \$120		
5) IT: Follow-Through Survey (Resurvey) \$30		
For claiming against INC Only (ver 10 Jan 2003)		
6) TR: Re-Inspection \$75		
7) NI: Idan DA + SMRT Survey \$160		
8) NTUC Additional Services:		
ON:		
*N5: Courtesy Car / Tpt Allowance \$35		
*N6: Repair Co-ordination \$10		
*N7: Post Repair Inspection \$25		
*N8: DV / Collect Excess Coordination \$5		
TE (N11): TP (5-on 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 20/03/2019 10:11
 Date Of Accident 19/03/2019 05:50
 Exact Location Of Accident OPPOSITE LOR 16 GEYLANG
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number PZ3388K

Insured/Policyholder

Name Of Registered Owner GOH WHERE TRANSPORTATION AND TOURS
 Co Reg No -
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-64440027

Vehicle Particulars

Manufacturer TOYOTA
 Model -
 Exact Purpose for which vehicle was being used at time of accident STATIONARY
 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 BUS

Insurance Company

Name of Insurance Company INDIA INTERNATIONAL INSURANCE PTE LTD
 Type Of Coverage THIRD PARTY FIRE AND/OR THEFT
 Fleet Policy NO
 Policy Number M497303
 Cover Note Number -

Driver

Name of Driver CHEW WING THIM
 NRIC No S1234967Z
 Date Of Birth 29/01/1957
 Occupation OUTDOOR
 Date Of Driving Pass 26/01/2004
 Driving Experience 15 YEARS AND 1 MONTH
 Gender MALE
 Mobile Number (LOCAL) +65-87801599
 Fax Number
 Contact Number
 Email Address NOEMAIL

Address	BLK 293 YISHUN ST 22 #02-229
Postcode	760293
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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	3
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)	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

I WAS TRAVELLING ALONG GEYLANG RD WHILE APPROACHING OPPOSITE LOR 16 GEYLANG, I STOP MY VEH INFRONT OF A PARKED VEH B (EARING NO SFV2150A), BEFORE I ALIGHTING FROM MY VEH, SUDDENLY I FELT AN IMPACT FROM BEHIND. AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED VEH B BEEN HIT BY A TAXI AND THE IMPACT PUSH THE VEH B HIT ONTO MY VEH REAR PORTION. NO DRIVER INSIDE VEH B, THE TAXI LEFT A NOTE TO THE VEH B.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	HAVENT RETRIEVE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFV2150A
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHC7231T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN JUAY KIANG
NRIC/Passport Number	S0044233Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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

20x16 Greyhound

Greyhound Rd.

A

B

C

A = PZ 3388 K

B = SFV 2150 A

C = SHC 7231 T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

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
IDENTITY CARD NO. S1234967Z



Name
CHEW WING THIM

趙 泳 添

Race
CHINESE

Date of birth
29-01-1957

Country of birth
SINGAPORE

Sex
M

S1234967Z

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S1234967Z

Name
CHEW WING THIM

Birth Date 29 Jan 1957

Issue Date 31 Oct 2011

002013962K

Land Transport Authority


VOCATIONAL LICENCE

Licence No: S1234967Z

Name: CHEW WING THIM

Issue Date: 16/12/2015

Please visit www.lta.gov.sg to check the status of this vocational licence



4787925



NRIC No. S1234967Z



Date of issue
31-10-2011

APT BLK 293 YISHUN STREET 22 #02-229
SINGAPORE 760293


NRIC No: S1234967Z Date: 05/09/2014

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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	17 Apr 1979
Class 2A Motorcycles between 201 cc and 400 cc	17 Apr 1979
Class 2 Motorcycles > 400 cc	17 Apr 1979
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg	10 Feb 1983
Class 4 Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	26 Oct 1983
Class 5 Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	23 May 1990
Class 5 Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	


NP 428A

Licence No: S1234967Z



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
03	BUS VL	26/01/2004
04	BUS ATTENDANT	26/01/2004



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)

This certificate is not transferable to a new owner of the vehicle. If for any reason the Insurance is terminated during its currency, the Certificate must be returned to the Insurer, or if the Certificate has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the legislation relating to compulsory Insurance.
The Certificate must be returned if the Insurance is suspended during its currency.

Agency Code **75961SE**

Third Party Fire & Theft

Excess **SS1500/- Sect. II (Singapore) SS2000/- Section II (Johor)**
& additional **SS2500/- Sect. II for age < 21 years or > 65 years**
&/or S'pore D.L. < 2 years

CERTIFICATE NO.

M497303

1. Index Mark and Registration
Number of Vehicle

PZ 3388 K

2. Name of Policy Holder

Goh Where Transportation and Tours

3. Effective date of the commencement of
Insurance for the purposes of the Act

11th May 2018

4. Date of Expiry of Insurance

01st April 2019

5. Persons or Classes of Persons entitled to drive*

Any person provided he is in the Policyholder's employ and is driving on their order or with their 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*

Use only for the carriage of passengers or goods in connection with the Policyholder's business.

The Policy does not cover

(1) Use for 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.

*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.

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).

Date of Issue **hh/11.05.2018**

for India International Insurance Pte. Ltd.
(APPROVED INSURERS)

Geographical Area: Use within the Republic of Singapore & Johor Only

MZ 600C
OMNIBUS

Authorized Signatory

IMPORTANT NOTICE

Policyholders are hereby warned that under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189), it shall be unlawful for any person to use or to cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

Policyholders are further warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189).

The Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agree to cover the new owner they will endorse the policy accordingly and will issue a new Certificate of Insurance in the new owner's name.

IN THE EVENT OF AN ACCIDENT NOTIFICATION SHOULD BE GIVEN IMMEDIATELY TO THE COMPANY. FAILURE TO DO SO WILL RESULT IN UNDERWRITERS DECLINING LIABILITY.

Agent/Broker Name: **P&C**

Hire Purchase Company : **NA**