

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: 21/03/19	Job description	Date & Time Completed	Done by
Ref No: NA/LPC19005107/13	SAS e-filing		
Veh No: 5JP4575D	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 16/03/19 0730	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: JTG2781	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

Claimant's Particulars :-	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
		1st Bill	Add Bill
Driver/Owner:	1) AR : Accident Reporting (\$30);		
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		
	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:-		
	OD*		
	*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		
Cat. 1:	Invoice dated	Fee Charged	
Cat. 2 / 3:	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	21/03/2019 10:03
Date Of Accident	16/03/2019 07:30
Exact Location Of Accident	BKE HEADING TWDS JB DIRECTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP4575D
Insured/Policyholder	
Name Of Registered Owner	SUBHAN JABBAR SHAHJEHAN
NRIC No	S7083231C
Email Address	SHA_EGMORE@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-90251687
Alternative Phone No	OTHERS-90251687

Vehicle Particulars

Manufacturer	HONDA
Model	FREED
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	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z/17/VP05/015391-001
Cover Note Number	

Driver

Name of Driver	SUBHAN JABBAR SHAHJEHAN
NRIC No	S7083231C
Date Of Birth	08/12/1970
Occupation	INDOOR
Date Of Driving Pass	29/06/2003
Driving Experience	15 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90251687
Fax Number	
Contact Number	OTHERS-90251687
Email Address	SHA_EGMORE@YAHOO.COM.SG

Address	55 GEYLANG BAHRU #04-3613
Postcode	330055
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?	YES
Foreign Vehicle Registration Number	JTG2781 (MOTORCYCLE)
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	4
Passenger 1	NAME: : ZULAIKAH BEEVI GENDER: : FEMALE
Passenger 2	NAME: : JASMIN RIZHWANA GENDER: : FEMALE
Passenger 3	NAME: : SHAHI NASREEN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG N.P.C
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190316/2053

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JTG2781
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Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

MOTORCYCLE

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

GBF1253A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

LIU ZHAO ZHONG

NRIC/Passport Number

Contact Number

82699861

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

UNKNOWN

Approximate Age

Injuries Sustain

BLEEDING AND BADLY INJURED

Injured person in which vehicle?

JTG2781

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

ACCIDENT STATEMENT

ACCIDENT DATE: (16/03/2019) (DD/MM/YYYY), TIME: (07:30) (HH:MM)

LOCATION: BKE expressway heading towards JB Direction: Lamp Post

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJP 4575 D
 b) INSURANCE COMPANY: COMPAK
 c) POLICY NUMBER:
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: HONDA FREED
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PERSONAL / FAMILY
 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: SUBHAN JABBAR SHAJEHAN (MALE / FEMALE)
 B) NRIC/FIN/PASSPORT: S70832319 CONTACT: 9025 1687
 C) ADDRESS: 55 Geylang Bahru #04-3613 S330055

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS. ABRAH. (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: CONTACT:
 c) ADDRESS:

* d) DATE OF BIRTH: (08/12/1970) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 26-06-2003

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

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: Geylang NPC

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: JTG 2781 MODEL:
 b) DRIVER'S NAME:
 c) NRIC/FIN/PASSPORT: CONTACT:

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: GBF 1253A MODEL: Toyota Lorry
 e) DRIVER'S NAME: Liu Zhaozhong
 f) NRIC/FIN/PASSPORT: 92655681W CONTACT: 82699861

* No of passengers
 (including driver)
 (4)

* No of passengers
 (including driver)
 ()

* No of passengers
 (including driver)
 ()

16/03/19

watby vel



TP COMPOUND

Email = ~~SHA~~ SHA_EGMORE@YAHOO.Com.SG

VIDEO

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:

16/3/19 1.10 PM.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

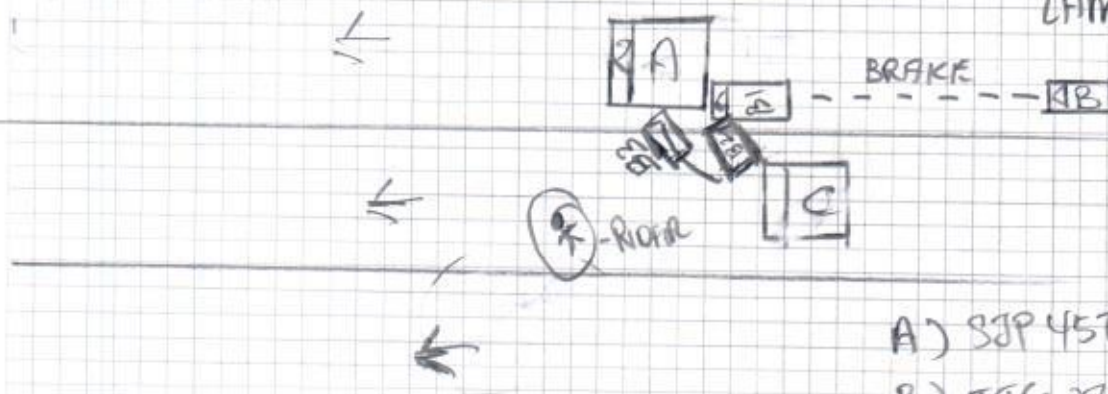
NRIC/FIN No.:

SKETCH PLAN

BKE HEADING TOWARDS JB ATTACK POINT

LAMP POST 435

1st LANE
2nd LANE
3rd LANE



- A) SJP 4575D
- B) JTG 781
- C) GBF 1253A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten note across the section: *pls refer to police report 7/20/90316/2053*

DECLARATION

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

[Signature]
Policyholder's Signature

Date & Time: 16/3/19 1.10 PM

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

[Signature] 21/03/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20190316/2053

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

1 of 3

Report No. T/20190316/2053

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/03/2019 12:00	Vide Report No.: L/20190316/0076	Station Diary No.: 49
Informant's Particulars		
Name of Informant: SUBHAN JABBAR SHAHJEHAN		Address: APT BLK 55 GEYLANG BAHRU #04-3613 SINGAPORE 330055
ID Type / ID No.: NRIC NO / S7083231C		Contact No.: Home/Office: Mobile: 90251687
Nationality: SINGAPORE CITIZEN		Email:
Sex: Male	Age: 48	Date of Birth: 08/12/1970
Type of Informant: Driver		
Race: Indian		Language: English
Institution / School Name:		
Occupation: COORDINATOR		Driving Licence Information: Class: Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/03/2019 07:30	Type of Location: EXPRESSWAY
Location: Along Road 1 BUKIT TIMAH EXPRESSWAY				
ALONG BUKIT TIMAH EXPRESSWAY (BKE) HEADING TOWARDS JOHOR BAHRU DIRECTION, BEFORE WOODLANDS AVE 3				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF1253A	Van	TOYOTA	TOYOTA DYNA 150 MANUAL	Blue	Slightly Damaged	0
JTG2781	Motorcycle				Seriously Damaged	0
SJP4575D	Car	HONDA	FREED 1.5G A	Red	Slightly Damaged	3



SINGAPORE POLICE FORCE



T/20190316/2053

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

2 of 3

Report No. T/20190316/2053

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJP4575D	LONPAC INSURANCE BHD.	Z17VP05015394-001	25/09/2017	24/03/2019

Brief Details.

On the 16th of March 2019 at about 0730hrs, I was driving my vehicle bearing registration plate SJP4575D along Bukit Timah Expressway (BKE) heading towards Johor Bahru direction, just before Woodlands Avenue 3. I was driving my vehicle on the first lane of the expressway. During which, the traffic was quite congested and I slowed down my vehicle, before becoming stationary. While my vehicle was stationary, all of a sudden, I felt an impact from the rear left portion of my vehicle. The impact made my vehicle surged forward. I then tried to stop my vehicle, to which I managed to do so. My wife who was seated on the front passenger seat, then mentioned that a motorcycle had hit onto my vehicle. I got out of the vehicle and I saw that the motorcycle rider was lying on the road, bleeding and badly injured. Other road users assisted to call police and ambulance for assistance. Other road users mentioned that a lorry bearing registration plate GBF1253A, had hit onto the motorcycle and that the lorry stopped quite a distance away, ahead of the accident scene. Traffic Police and ambulance came down to the scene and the motorcycle rider was conveyed to the nearest hospital.

I wish to state the damages were as follows:

- 1) SJP4575D - rear left portion dented and rear left tail-light damaged
- 2) JTG2781 - damaged pieces of motorcycle
- 3) GBF1253A - unable to ascertain damages

I wish to state that there is no in-car camera installed in my vehicle. I was then advised by the Traffic Police officer to proceed down to lodge for a traffic accident report.



**SINGAPORE
POLICE FORCE**



T/20190316/2053

Police Station Of Origin:

Geylang N.P.C

132 Paya Lebar Road SINGAPORE 409014

Tel No: 1800-8486999

3 of 3

Report No. T/20190316/2053

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

G /

Sgt 3 MUHAMMAD ARIF BIN HAIRUDIN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI THABAGESH JEYATHESH

Contact No.: 65476232

Signature Of Informant:

Date/Time:

16/03/2019 12:00

Classification Of Case:

Authentication Stamp

NP168

SINGAPORE
POLICE FORCE

SIGNATURE




Type	Country Code	Passport No
PA	SGP	E5500692H
Name		




Sex	Nationality	
M	SINGAPORE	CITIZEN
Date of birth	08 DEC 1970	Place of birth INDIA
Date of issue	23 APR 2015	Date of expiry 04 NOV 2020
Modifications	SEE PAGE 2	Authority MINISTRY OF
National ID No	S7083231C	

PASGPSUBHAN<JABBAR<SHAHJEHAN<<<<<<<<<<<<<<<<
E5500692HOSGP7012082M2011046S7083231C<<<<<00


REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number **S7083231C**
 Name **SUBHAN JABBAR SHAHJEHAN**
 Birth Date **08 Dec 1970**
 Issue Date **26 Jun 2003**


 000600093D

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	29 Jun 2003
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	29 Jun 2003


 Licence No: S7083231C

NP 422A

29/06/2003



LONPAC INSURANCE BHD (S98FC5635C)

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 199555.

Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-C

MX1

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION ACT (CAP 189) REPUBLIC OF SINGAPORE.
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE).
ROAD TRANSPORT ACT 1987 (MALAYSIA).
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No. : Z/17/VP05/015394-001

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

HONDA FREED 1.5
- SJP 4575D

2. Name of Policy Holder

SUBHAN JABBAR SHAHJEHAN

3. Effective date of the Commencement of Insurance
for the purpose of the Act.

25/09/2018

4. Date of Expiry of the Insurance

24/03/2019

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

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S
BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING,
RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES)
IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION
WITH THE MOTOR TRADE.

Excess

: S\$ 500.00 (SECTION 1) INSURED / NAMED DRIVERS
S\$ 1500.00 (SECTION 1) UNNAMED DRIVERS
S\$ 3000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR
INEXPERIENCED DRIVERS
S\$ 100.00 WINDSCREEN EXCESS

Condition

: ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS

* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor
Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under
heading.

I/We hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road
Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of
Singapore.

H.P. Owner : MAYBANK

Amek

CHIEF EXECUTIVE
(Singapore Branch)

User ID : ambika / hazechen
Date Issued : 19-09-2018