

NATIONAL Assessment Centre Services.

Date In: 22/03/2019 12:44	Job description	Date & Time Completed	Done by
Ref No: NBA/LIP19005174/K4	SAS e-filing		
Veh No: SLG 2136A	E-mail (Within 2hrs, A/C 2hrs)		
D.O.A: 10/03/2019 13:15	I-Motor Claim Form		
OID: 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: UNKNOWN	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 ()		

() Walk-In Customer : Customer's Information strictly Confidential & Strictly NO refer of rep/lor.
() Total Loss Case : to e-mail Insurer URGENTLY.
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

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

[illegible]

NA1902125

Driver/Owner:	1) AR: Accident Reporting (330)	
Contract No:	2) DA: Damage Assessment (3100% INC (350)	
Damaged Portion:	3) TP: Towing Fee 340345	
	4) PT: Follow-Through Survey 1120	
	5) FT: Follow-Through Survey (Resurvey) 330	
	Forfeiting against INC Only (w/ 10 Jan 2005)	
	6) TR: Re-inspection 375	
	7) NI: Idas DA + SMRT Survey 5160	
	8) NTUC Additional Services:-	

QC Checked by (Engr-In-Charge):	NS: Courtesy of 77 TPR Allowance	51
	NS: Female Coordination 28020070	510

Available Comments:	2011 Post-Rent Inspection	35	100	INC
Ref 1:	Inc DV / Collect Excess Coordination	35	100	INC
2 (2)	TP (Inc) : TP (Inc) : TP (Inc)	35	100	INC
	9) N12: Idea Mobile	30	100	INC
	Invoice dated	Fee Charged	100	INC
	Invoice dated	Fee Charged	100	INC

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	22/03/2019 12:44
Date Of Accident	10/03/2019 13:15
Exact Location Of Accident	QUEENSWAY/QUEENS CLOSEMSCP@BASEMENT NEAR WASHINGTON
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG2136A
Insured/Policyholder	
Name Of Registered Owner	LIM KHENG HWEE
NRIC No	S7131624F
Email Address	ZYKJ1322@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-91111572
Alternative Phone No	OTHERS-91111572

Vehicle Particulars

Manufacturer	TOYOTA
Model	-
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI18V11464/VPC/R02
Cover Note Number	

Driver

Name of Driver	LIM KHENG HWEE
NRIC No	S7131624F
Date Of Birth	07/09/1971
Occupation	INDOOR
Date Of Driving Pass	13/03/2000
Driving Experience	18 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91111572
Fax Number	
Contact Number	OTHERS-91111572
Email Address	ZYKJ1322@YAHOO.COM.SG

Address	BLK 21 QUEEN'S CLOSE #14-137
Postcode	140021
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	SIDE SWIPE
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20190310/2132

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

SKETCH PLAN

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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:

22/3/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

Queen's Way
Queens Close MSCP at basement near Washing Bay
At Multi Storey Carpark



A - SLG2136A
B - Unknown.

Hit and run - damage at top left corner

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the Police Report
T/20190310/2132

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:

- 22/3/2019

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



Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20190310/2132

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/03/2019 23:23	Vide Report No.:	Station Diary No.: 98
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Informant's Particulars

Name of Informant: LIM KHENG HWEE			Address: APT BLK 21 QUEEN'S CLOSE #14-137 SINGAPORE 140021		
ID Type / ID No.: NRIC NO / S7131624F			Contact No.: Home/Office: Mobile: 91111572		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 47	Date of Birth: 07/09/1971	Type of Informant: Vehicle Owner		
Race: Chinese			Language:	Institution / School Name:	
Occupation: ADMIN			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/03/2019 13:15	Type of Location: Car Park
Location: Along Road 1 QUEENSWAY Queens Close MSCP at basement near Washing Bay				
Weather:		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLG2136A	Car					0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190310/2132

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

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Report No. T/20190310/2132

CONTINUATION OF REPORT

Vehicle Owner			
Name	LIM KHENG HWEE	ID No.	S7131624F
Related Vehicle	SLG2136A (Car)	Contact No.	91111572
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.

On 10/03/2019 at 1830hrs, my wife went to my Vehicle as she wanted to drive and she discovered that on the front left wheel compartment was dented and some scratches. I view from my in built camera that on the same day at about 1330hrs, a vehicle (Mazda) reversed and parked onto the lot beside me. I believe that this is the time they knocked onto my car as they took a few attempt to park into the lot and when they manage to park onto the lot, The vehicle wife who was waiting outside while he parking, went over to him and seem to have some conversation and subsequently they drove the vehicle off without parking anymore. I suspect they are the one who knocked and scratched onto my vehicle. There is CCTV around the Carpark. I still have the video recording with me however i am unable to view the car plate number.



SINGAPORE
POLICE FORCE



T/20190310/2132

3 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20190310/2132

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:

D /

Sgt 1 LIM TIAN WEN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

SSI GOH GEOK LYE

Contact No.: 65476148

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

10/03/2019 23:23

Classification Of Case:

(Bukit Merah) Reported on 22/3/2019
@ 11:15 AM

ACCIDENT STATEMENT

ACCIDENT DATE: (10/3/2019) (DD/MM/YYYY), TIME: (13:15) (HH:MM)

LOCATION: Queenway / Queens Close MSCP at basement

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLG 2136A near washing Bay
- b) INSURANCE COMPANY: _____
- c) POLICY NUMBER: _____
- d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
- e) MAKE & MODEL: _____
- f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
- g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
- h) PURPOSE OF USING AT ACCIDENT TIME: _____
- 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: _____ (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
- c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- d) NAME: _____ (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: _____ CONTACT: 9111572
- c) ADDRESS: _____

* d) DATE OF BIRTH: (____/____/____) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS _____

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) OWNER

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

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: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: Unknown MODEL: _____

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: _____

email = 24kj1322@yahoo.com.sg

VIDEO

24kj1322@yahoo.com.sg

(Video)
yes

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7131624F



Name
LIM KHENG HWEE

林庆辉

Race
CHINESE

Date of Birth
07-09-1971 Sex
M

Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
Name **S7131624F**

LIM KHENG HWEE

Birth Date: **07 Sep 1971**

Issue Date: **14 Feb 2004**



1205701



NRIC No. **S7131624F**

Blood Group: **B+** Date of Issue: **20-08-1993**

APT BLK 21 QUEEN'S CLOSE #14-137
SINGAPORE 140021
NRIC No: S7131624F

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

PASS DATE

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

13 Mar 2000

NP 428A



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)

Name of Policyholder:

LIM KHENG HWEE

Date of Issue:

06 Sep 2018

Registration No.:

SLG2136A

Effective Date of Commencement:

23 Sep 2018 00:00

Chassis No.:

NSP1707054081

Certificate No.:

SI18V11464/ VPC / R02

Date of Expiry:

22 Sep 2019 23:59

Type of Certificate:

MX1

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 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.

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.

Limitations as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials 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 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).



For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers

For Information Only:

Coverage(s):	Comprehensive, Unlimited Windscreen, NCD Protection
Sum Insured:	MARKET VALUE AT THE TIME OF LOSS
Excess:	Section I - Named Drivers S\$500, Section I - Unnamed Drivers S\$1000, Additional Excess for Young, Elderly & Inexperienced Drivers S\$3000, Windscreen Excess S\$100
Name of Finance Company:	MAYBANK
Name of Producer:	VENTURE CREDIT PTE LTD (A1451-2)

SCTE-B/BAANT/MAFV/1161 06 Sep 2018/Motor EV16