

NATIONAL Assessment Centre Services.

(part 1 Jan 2005)

MMA 119037988

Date In: 22/3/19 16:55	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA/INC19005219/14.	E-mail (within 3hrs, AIC 2hrs)		
Veh No: SJV 3260L	I-Motor Claim Form	001 M7/1037071-	22/3/19 17:18
D.O.A: 21/3/19 21:30	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OD / <input checked="" type="radio"/> Reporting Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW: (

Tel:

Fax:

TP Particulars:

Veh No:

SGH 3695A.

INC () / Non-INC ()

Tel:

Owner / Driver: (

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 repaler.

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

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

Remarks:

(INC: Rodine 67886616)

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:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditor's Comments:

Ad. 1:

Ad. 2/3:

NA1902131

Invoice Preparation Checklist

1) AR: Accident Reporting (\$30);	30	20
2) DA: Damage Assessment (\$100); INC (\$80)		
3) TP: Towing Fee	\$40/\$45	
4) FT: Follow-Through Survey	\$120	
5) FT: Follow-Through Survey (Resurvey)	\$30	
For claiming against INC Only (ref 10 Jan 2005)		
6) TR: Re-inspection	\$75	
7) NI: Idan DA + SMRT Survey	\$160	
8) NTUC Additional Services:		
ON:		
*N5: Courtesy Car / Tpt Allowance	\$3	
*N6: Repair Coordination	\$10	
*N7: Post Repair Inspection	\$25	
*N8: DV / Collect Excess Coordination	\$5	
TE (N11): TP (Non INC) against INC	\$20	
9) N12: Idan Mobile	\$0	
Invoice dated	Fee Charged	
Invoice dated	Fee Charged	

And (\$5)

By: Abi (S)

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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 16:55
Date Of Accident	21/03/2019 21:30
Exact Location Of Accident	NICOLL HWY TWDS GUILLEMARD RD NEAR INDOOR STADIUM
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV3260L
Insured/Policyholder	
Name Of Registered Owner	H & H RENTAL & LEASING PTE. LTD.
Co Reg No	201703965Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97234411

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5090735902-01
Cover Note Number	-

Driver

Name of Driver	NG SIM HWEE(HUANG SENHUI)
NRIC No	S7513516E
Date Of Birth	11/05/1975
Occupation	OUTDOOR
Date Of Driving Pass	05/12/2008
Driving Experience	10 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97926335
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 315B ANCHORVALE RD #14-170
Postcode	542315
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 - 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?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800 - 3438999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

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	SGH3695A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ANG QI KAI
NRIC/Passport Number	S9516123E
Contact Number	97718080
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name NG SIM HWEE(HUANG SENHUI)

Approximate Age

Injuries Sustain NECK

Injured person in which vehicle? SJV3260L

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

Diagram illustrating the sketch plan area, showing a grid and two marked points A and B.

A = SJV 3260L
B = SGH 3695A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report

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.:

ACCIDENT STATEMENT

ACCIDENT DATE: (21 / 3 / 19) (DD/MM/YYYY), TIME: (21 : 30.) (HH:MM)

LOCATION: Nicoll Hwy twds Guillemard rd near indoor Stadium.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SVV 3260L
b) INSURANCE COMPANY: lmc
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: Commercial
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: H Z H. (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 9723 4411
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Ng Sim Hwee (Huang senhui) (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 9792 6335
c) ADDRESS: _____

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

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: _____

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

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

6. WAS ANYBODY INJURED (YES / NO) neck.

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

IF YES, PLEASE STATE WHICH POLICE STATION: Sengkang NPC.

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SGH 3695 A. MODEL: _____
b) DRIVER'S NAME: Ang Ai Kai
c) NRIC/FIN/PASSPORT: 59516123 E CONTACT: 9771 8080.

9. THIRD PARTY VEHICLE

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

* No of passengers
(Including driver)

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* No of passengers
(Including driver)

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* No of passengers
(Including driver)

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VIDEO = No.



SINGAPORE POLICE FORCE



T/20190322/2051

1 c

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20190322/2051

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/03/2019 11:44	Vide Report No.:	Station Diary No.: 45
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Informant's Particulars

Name of Informant: NG SIM HWEE			Address: APT BLK 315B ANCHORVALE ROAD #14-170 SINGAPORE 542315		
ID Type / ID No.: NRIC NO / S7513516E			Contact No.: Home/Office: Mobile: 97926335		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 43	Date of Birth: 11/05/1975	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: PRIVATE HIRE			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/03/2019 21:30	Type of Location: Straight Road
Location: Along Road 1 NICOLL HIGHWAY towards guillemard road near indoor stadium				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGH3695A	Car			Black	Seriously Damaged	1
SJV3260L	Car	TOYOTA	wish	Silver	Seriously Damaged	1

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190322/2051

2 of 4

Report No. T/20190322/2051

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

CONTINUATION OF REPORT

Driver			
Name	ANG QI KAI		ID No. S9516123E
Related Vehicle	SGH3695A (Car)		Contact No. 97718080
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
Passenger			
Name	Unknown Passenger		ID No. NIL
Related Vehicle	SGH3695A (Car)		Contact No. NIL
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
Driver			
Name	NG SIM HWEE		ID No. S7513516E
Related Vehicle	SJV3260L (Car)		Contact No. 97926335
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	21/03/2019	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Passenger			
Name	Unknown Passenger		ID No. NIL
Related Vehicle	SJV3260L (Car)		Contact No. NIL
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



**SINGAPORE
POLICE FORCE**



T/20190322/2051

3 of 4

Police Station Of Origin:

Sengkang N.P.C

2 Sengkang Square #01-02 SINGAPORE

545025

Tel No: 1800-343 8999

Report No. T/20190322/2051

CONTINUATION OF REPORT

Brief Details.

On the 21/03/2019, at around 2130hrs, I was trapped in a traffic jam along Nicoll highway toward guillemard road, near the indoor stadium. While waiting suddenly, I felt an impact coming from the rear of my vehicle (SVJ3260L). I went to check and realise that the car (SGH3695A) behind my car had collided into the rear of my car.

The rear part of my car suffered a huge dent. No one was conveyed to the ambulance, no police was at scene and no government property damaged.

However, I felt pain in my neck and I went to consult doctor at Sengkang General Hospital and was given a 5 days of MC.

I am lodging this report as I was given a 5 days of MC.



**SINGAPORE
POLICE FORCE**



T/20190322/2051

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

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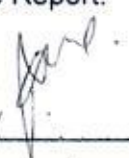

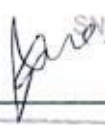
Report No. T/20190322/2051

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: F / Sgt 2 PHUA WEN XUE 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 22/03/2019 11:44
Officer In Charge Of Case: TP / AEIT / Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID Contact No.: 65476172	Classification Of Case:  SN 085
Authentication Stamp NP168	

Singapore Police Force

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7513516E



Name
NG SIM HWEE
(HUANG SENHUI)

Race
CHINESE

Date of birth
11-05-1975

Sex
M

Country of birth
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7513516E

Name
NG SIM HWEE
HUANG SENHUI

Birth Date: 11 May 1975

Issue Date: 11 Dec 2015




002502271D

SG 50

3738604



NRIC No. S7513516E



Date of issue
08-07-2005

APT BLK 315B ANCHORVALE ROAD #14-170
SINGAPORE 542315


NRIC No: S7513516E Date: 07/03/2017

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


	EFFECTIVE DATE
Class 2B Motorcycles \leq 200 cc	01 Oct 2009
Class 2A Motorcycles between 201 cc and 400 cc	16 Nov 2010
Class 2 Motorcycles $>$ 400 cc	11 Dec 2015
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	05 Dec 2008


NP 428A

Licence No: S7513516E



Land Transport Authority

 PDVL/TDVL
33 Nov 2008
279509



VOCATIONAL LICENCE

Licence No : **S7513516E**
Name : **NG SIM HWEE (HUANG
SENHUI)**

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

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

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	04/07/2018



Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident
Vehicle No.(For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5090735902-01		H & H RENTAL & LEASING PTE. LTD.	201703965Z	GFT	drive CLASSIC	SJV3260L	SJV3260L	28/03/2018	

▼ Policy Information

Policy No.	5090735902-01	Policyholder Name	H & H RENTAL & LEASING PTE. I	Policyholder NRIC	201703965Z
Certificate No.					
Address	61 UBI AVENUE 2 #04-12 AUTOMOBILE MEGAMART SINGAPORE 408898				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	26/03/2018	Effective Date	28/03/2018 00:00	Expiry Date	27/03/2019 23:59
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	61.92		
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00		
Agent	S & M ALLIANCE PTE LTD	Agent Tel.	96354288	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	61 UBI AVENUE 2	Address 2	#04-12 AUTOMOBILE MEGAMAR	Address 3	SINGAPORE 408898
Address 4		Address Type	Singapore address	Post Code	408898
Unit No.	04-12	Related Policy Number	5104976511		

► Insured Object: SJV3260L

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	28/03/2018 00:00	Basic Information Endorsement	000001286783177	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SGY6835D 28-03-2018 \$1,176.42 In view of this amendment, a refund of \$1,176.42 (inclusive of GST) will be adjusted against the outstanding premium.
2	29/03/2018 00:00	Basic Information Endorsement	null	Entry Rejected	
3	29/03/2018 00:00	Basic Information Endorsement	000001286785069	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: CHASSIS NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. GB71058136 02-04-2018 \$1,061.56 2. NHP1707115022 02-04-2018 \$1,061.56 In view of this amendment, an additional premium of \$2,123.12 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the

Claim Handling

The premium on this policy has not been collected.

Accident MT/1037071

Policy No.	5090735902-01	Vehicle No.	SVJ3260L	GST Registration No.	
Certificate No.					
Policyholder Name	H & H RENTAL & LEASING PTE. LTD.			Policyholder NRIC	201701
Product Code	FLEET INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	97234411	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes
Accident Details					
Report Date	22/03/2019 17:13	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	21/03/2019	Time of Accident hh:mm	21:30	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	NICOLL HWY TWDS GUILLEMARD RD NEAR INDOOR STADIUM				
Excess					
Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History	22/03/2019 17:15:48 System auto update fail: time-out				

Policyholder Mailing Address

Address 1	61 UBI AVENUE 2	Address 2	#04-12 AUTOMOBILE MEGAMAR	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	408891
Unit No.	04-12	Related Policy Number	5104976511		

01 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	NG SIM HWEE(HUANG SENHUI)	Driver NRIC	S7513516E	Driver DOB	11/05/
Register Date of Driver License	05/12/2008	Driver Age	43	Driving Experience	10
Contact No.(Mobile)	97926335	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 315B #14-170	Address 2	ANCHORVALE ROAD	Address 3	ANCHC
Address 4	SINGAPORE 542315	Address Type	Singapore address	Post Code	542315
Unit No.	14-170				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	H & H RENTAL & LEASING PTE.
Contact No.(Mobile)		Contact No. (Home)	NIL
Email Address		01 Vehicle Number	SVJ3260L
Claim Description	SVJ3260L / SGH3695A ON 21 Mar 2019		
Preferred Workshop	0	Insured Liability	Not at Fault
Report No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	22/03/2019 17:17
<input checked="" type="checkbox"/> Print AK letter			LIEW SHAN HUI

Save Submit

Attachment

Accident No. Claim No.

MT/1037071

001

Last Doc. Received

☒ Yes
 ☐ No

Upload Date

22/03/2019 17:18

Path *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Category *	Confidential	Urgency *
<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>	<input type="button" value="Normal"/>
<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>	<input type="button" value="Normal"/>
<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>	<input type="button" value="Normal"/>
<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>	<input type="button" value="Normal"/>
<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>	<input type="button" value="Normal"/>
<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>	<input type="button" value="Normal"/>
<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>	<input type="button" value="Normal"/>

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	SAS	Normal	SAS 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:18	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:17	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:17	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:17	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:17	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:17	Photos	Normal	Photos 2019-3-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Mar 2019 17:17	Photos	Normal	Photos 2019-3-22

Video List

Uploaded By/Date	Folder Date	File Name	Source
		<input type="button" value="Display in New Window"/>	<input type="button" value="Scan and uploading"/>