

NATIONAL Assessment Centre Services.

(ref 1 Jan 2003)

MAH 904/55

Date In: 30/03/2019 17:57	Job description	Date & Time Completed	Done by
Ref No: NA/INC/900566/1	SAS e-filing		
Veh No: SK990632	E-mail (Within 2hrs, AIC 2hrs)		
D.O.A: 30/03/2019 15:00	I-Motor Claim Form		
OID: 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/WRAP		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SK9029.7	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 Information:		
() 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: ()		

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

Injury: _____

Date of Incident: _____	Location: _____
Time of Incident: _____	Weather: _____
Police Report No: _____	Police Station: _____
Witness Name: _____	Witness Contact: _____
Witness Address: _____	Witness City: _____
Witness State: _____	Witness Zip: _____

MAH 902303	1) AR: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$30)	
Contact No:	3) TP: Towing Fee \$40/\$45	
Damaged Portion:	4) PT: Follow-Through Survey \$120	
	5) PT: Follow-Through Survey (Resurvey) \$30	
	6) TR: Re-inspection \$75	
	7) NI: Idac DA + SMRT Survey \$160	
	8) NTUC Additional Services:	
	9) NI: Idac Mobile	
QC Checked by (Engi-In-Charge):	10) NI: Idac Mobile	
	11) NI: Idac Mobile	
	12) NI: Idac Mobile	
	13) NI: Idac Mobile	
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	20) NI: Idac Mobile	

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	30/03/2019 17:57
Date Of Accident	30/03/2019 15:00
Exact Location Of Accident	ALONG PAYA LEBAR RD (BEFORE EXIT TO PIE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT9063Z
Insured/Policyholder	
Name Of Registered Owner	WAYNE TAN WEI CHENG
NRIC No	S8421905C
Email Address	WAYNETHEPAINT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81119174
Alternative Phone No	OTHERS-81119174

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	200E
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5105859555
Cover Note Number	

Driver

Name of Driver	WAYNE TAN WEI CHENG
NRIC No	S8421905C
Date Of Birth	21/07/1984
Occupation	INDOOR
Date Of Driving Pass	06/07/2007
Driving Experience	11 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81119174
Fax Number	
Contact Number	OTHERS-81119174
E-Mail Address	WAYNETHEPAINT@GMAIL.COM

Address	BLK 663 JALAN DAMAI #08-145
Postcode	410663
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?	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)	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

PLEASE REFER TO SKETCH PLAN

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	SGK9029T
Vehicle Make/Model/Colour	TOYOTA COROLLA ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PANG YEE LAI
NRIC/Passport Number	S1557862I
Contact Number	97451376
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

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: 30/03/2019
17:57.

Driver's Signature

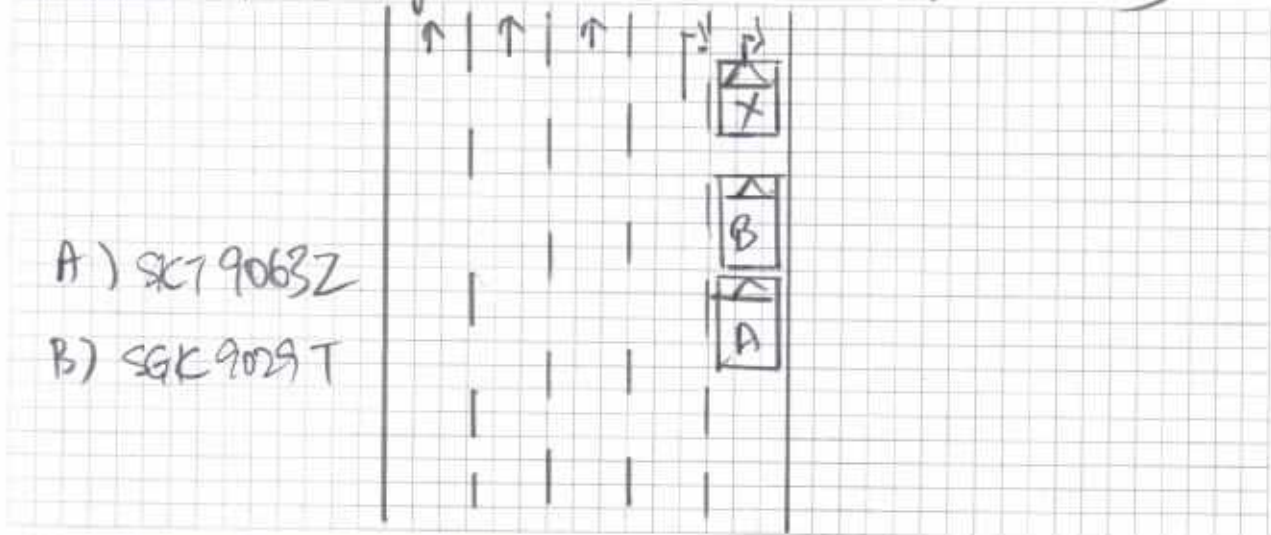
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name: Rafael Martinez
NRIC/FIN No.:

SKETCH PLAN

Along Paya Lebar Road (Before Exit to PIE)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON PAYA LEBAR ROAD, BEFORE EXITING TO PIE (CHANGI). GREEN ARROW COMES ON AND CARS STARTED MOVING HOWEVER THERE'S A SUDDEN STOP FROM THE CAR IN FRONT. WE ARE ON THE FIRST LANE (U-TURN LANE). MY REACTION IS NOT FAST ENOUGH AND DISTANCE TOO SHORT, MY CAR (SKT 9063Z) HIT THE BACK OF THE TOYOTA ALTIS (SGK 9029T). SURFACE CHECKS THERE WERE NO DENTS BUT DRIVER OF TOYOTA ALTIS SAID BOOT UNABLE TO SECURE AND BUMPER CRACK.

DECLARATION

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

Policyholder's Signature
Date & Time: 30/03/2019
17:57

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

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

Accidents 197/1018154

Monthly sales history

Claim 001 NEW

Claim Type *	CO-RE		Insured Name	WAYNE TAN WEI CHENG		Insured NRIC	S8421095	
Contact No (Mobile)	81118124		Contact No. (Home)	88425582		Contact No. (Office)		
Email Address	weeytan@gmail.com		CI	SAT90612		TP	SQW30391	
Claim Description	SKT90612 / SQW30391 ON 30 Mar 2019		Vehicle Number			Vehicle Number		
Preferred Workshop	[Blank]		Insured Liability	Fully at Fault		Name of Preferred Workshop		
Repair No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop Name unknown		GA report	Received		
Date Registered			Claim Date	03/04/2019 10:19		Date Received	03/04/2019 00:00	
Report Taken By			Report Date	03/04/2019		Report Received		
Print & Attach								

Figure	Substrate
Fig. 1	Glucose
Fig. 2	Glucose
Fig. 3	Glucose
Fig. 4	Glucose
Fig. 5	Glucose
Fig. 6	Glucose
Fig. 7	Glucose
Fig. 8	Glucose
Fig. 9	Glucose
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Fig. 96	Glucose
Fig. 97	Glucose
Fig. 98	Glucose
Fig. 99	Glucose
Fig. 100	Glucose

Attachments

[illegible]

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	My Sent (EO)
	NAC_BUKIT_MERAH_300676 NATIONAL ASSESSMENT CENTRE SERVICE 3 (BUKIT MERAH) on 01 Apr 2019 10:19	Photos	Normal	Photos 2019-4-1	
	NAC_BUKIT_MERAH_300676 NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH) on 02 Apr 2019 10:20	Photos	Normal	Photos 2019-4-1	
	NAC_BUKIT_MERAH_300676 NATIONAL ASSESSMENT CENTRE SERVICE 6 (BUKIT MERAH) on 01 Apr 2019 10:19	Photos	Normal	Photos 2019-4-1	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:18	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:19	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:19	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:19	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:19	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:19	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:19	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:18	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:18	SAG	Normal	SAG 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 10:18	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-1

Video List

Uploaded By/Date	Folder/Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: (30/08/2019) (DD/MM/YYYY), TIME: (15:00) (HH:MM)

LOCATION: ALONG DAYA CEBAR ROAD (BEFORE EXIT TO AE)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKT 9063 Z
 b) INSURANCE COMPANY: NTUC INCOME
 c) POLICY NUMBER: S105859555
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: MERCEDES BENZ / 200E
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 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: WAYNE TAN WEI CHENG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8421905C CONTACT: 8111 9174
 c) ADDRESS: BIK 663 JALAN DAMAI #08-145 S(410663)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: WAYNE TAN WEI CHENG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8421905C CONTACT: 8111 9174
 c) ADDRESS: BIK 663 JALAN DAMAI #08-145 S(410663)

* d) DATE OF BIRTH: (21/07/1984) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 06/07/2007

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)
 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: SGK 9029 T MODEL: TOYOTA ALTIS
 b) DRIVER'S NAME: MR PANG YEE LAI
 c) NRIC/FIN/PASSPORT: S1557862I CONTACT: 97451376

9. THIRD PARTY VEHICLE

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

* No of passenger
 (including driver)
 (01)

* No of passenger
 (including driver)
 (01)

* No of passenger
 (including driver)
 ()

email = WAYNETHEPAINT@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8421905C



Name

WAYNE TAN WEI CHENG

陈伟程

Race

CHINESE

Date of birth

21-07-1984

Country of birth

SINGAPORE

Sex

M



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8421905C

Name

WAYNE TAN WEI CHENG

Birth Date 21 Jul 1984

Issue Date 06 Jul 2007



001512375C



4023830

NRIC No. S8421905C



Date of issue

31-03-2007

Address

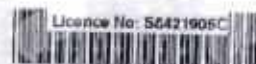
APT BLK 663 JALAN DAMAI
#08-145
SINGAPORE 410663

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

PASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 06 Jul 2007

NP 428A



Licence No: S8421905C

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="30/03/2019 17:56"/>
Vehicle No. (For Motor)	<input type="text" value="SKT9063Z"/>	Certificate Number	<input type="text"/>

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="checkbox"/>	5105859555		WAYNE TAN WEI CHENG	S8421905C	GPC	Third Party	SKT9063Z	SKT9063Z	25/11/2018	28/02/2020