

25049042470

TP (hrs): 20:56

Reminder	UNCL0010126788 60.61N	Complete	Exception
1) Apply for Transport Allowance () / Courtesy Car ()			
2) QC Check / Post Repair Inspection ()			
3) Upload Resurvey Photo [Repair Cost > \$3000] ()			

NO 1902387	INCIDENT REPORTING - (330)		
Driver/Owner:	2) DA: Damage Assessment (\$100)	INC (\$50)	
Contact No:	3) TV: Towing Fee	\$40/\$45	
Damaged Portion:	4) PT: Follow-Through Survey	\$120	
	5) PT: Follow-Through Survey (Resurvey)	\$30	
	Forfeiting against UNC Only (w/af 10 Jan 2003)		
	6) TR: Re-inspection	\$75	
	7) NI: Idac DA + SMRT Survey	\$160	
	8) NTUC Additional Services:		

FOR: 10-DEC-2018 MON 08:09

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	01/04/2019 20:38
Date Of Accident	01/04/2019 08:40
Exact Location Of Accident	ALONG PIE TOWARDS CHANGI AIRPORT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ5179D
Insured/Policyholder	
Name Of Registered Owner	MOK SOO
NRIC No	S2562678H
Email Address	JESSEMOK87@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90035890
Alternative Phone No	OTHERS-86883810

Vehicle Particulars

Manufacturer	LEXUS
Model	NX200T-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	TRAVELLING TO WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107826509
Cover Note Number	

Driver

Name of Driver	MOK JESSE
NRIC No	S8770184J
Date Of Birth	07/12/1987
Occupation	INDOOR
Date Of Driving Pass	23/05/2007
Driving Experience	11 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86883810
Fax Number	
Contact Number	OTHERS-90035890
Email Address	JESSEMOK87@GMAIL.COM

Address	BLK 29 HAZEL PARK TERRACE #01-08
Postcode	678950
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	CLOUDY
Road Surface	WET

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	FBM6321S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	JOHAN BIN RAMLI
NRIC/Passport Number	S9545612Z
Contact Number	98354904
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.
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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)

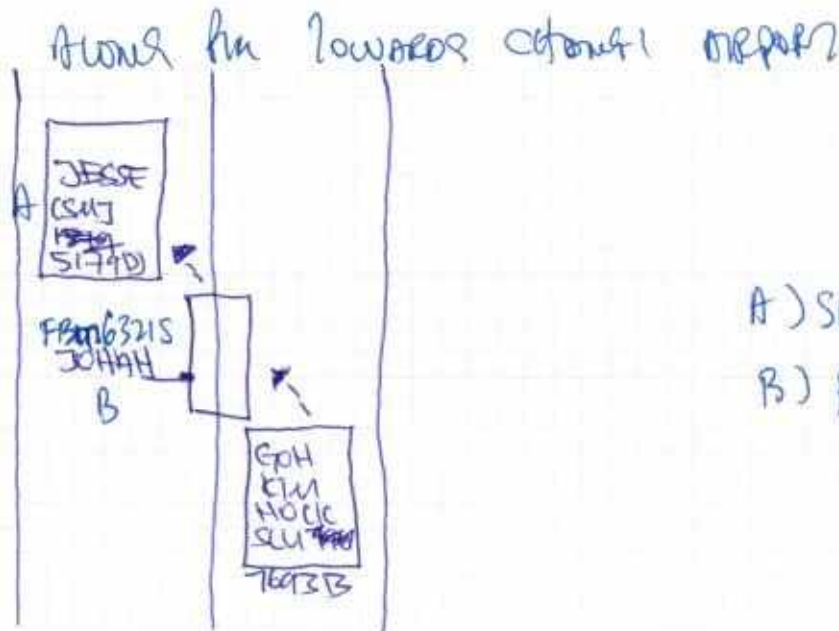
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



A) SMJ 5179D
B) FRM 6321S

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

• LOCATION/TIME ⇒ PIE / 08:40hrs.

JOHAN WAS RIDING BEHIND MY VEHICLE BUT TOOK AN EMERGENCY SUDDEN SWERVE TO HIS LEFT DUE TO AN APPROACHING VEHICLE ON HIS RIGHT. JOHAN HAS THIS CAUSED A BENT AND SCRATCH ON MY CAR REAR PANEL. NO ONE WAS INJURED DURING THIS ACCIDENT.

THE APPROACHING VEHICLE DRIVING ON THE RIGHT OF JOHAN WAS MR GOH KIM HOCK (S7407202Z) CAR PLATE NO: SLN 7903B).

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.:

Claim Handling

Accident MT/1036356

Policy No.	5107825505	Vehicle No.	SM051790	GST Registration No.	
Certificate No.					
Policyholder Name	WOK DOO	Cover Type	Only PREMIUM	Policyholder NRIC	S2562878H
Product Code	PRIVATE CAR INSURANCE	Contact No. (Office)		Issuing	0
Contact No. (Mobile)	99039890	Special Remark		Contact No. (Home)	
Email Address				eCode	NA
ETB	No Yes	TCA	No Yes	eCode Reason	
NCI Protection	Yes	NCI Exemption (%)	50	Vehicle Make	NA
Accident Details					
Report Date	31/04/2019 20:33	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	31/04/2019	Time of Accident (hr:min)	20:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG PIE TOWARDS CHANGI AIRPORT				
Total Excess Applicable					
Excess Type	Per Accident	Whichever Excess	100.00		
OD Standard Excess	400.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Not Applicable
Additional Excess	0.00				
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
Policyholder Mailing Address					
Address 1	21 HAZEL PARK TERRACE	Address 2	#01-09 HAZEL PARK CONDO UNIT	Address 3	51 HAZEL PARK ESTATE
Address 4		Address Type	Singapore address	Post Code	678948
Unit No.		Related Policy Number	5107825505		
01 Driver Info					
Driver Name	Hok Jooe	Driver Type	Named Driver	Driver DOB	8/12/1967
Unnamed driver Name		Driver NRIC	S87701841	Driving Experience	11
Register Date of Driver License	22/05/2007	Driver Age	51	Contact No. (Office)	
Contact No. (Mobile)	86683610	Contact 2		Contact No. (Home)	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SM051790	Driver Insurer Company	NTUC
Declaration					
Breathalyzer or Blood Test Reading	0 mg	Any Injury?	Yes No		

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	WOK DOO	Insured NRIC	S2562878H
Contact No. (Mobile)	99039890	Contact No. (Home)	52942878	Contact No. (Office)	
Email Address	hokjooe@yahoo.com	Vehicle Number	SM051790	TP Number	88963215
Claim Description	SM051790 / 88963215 ON 1 Apr 2019				
Preferred Workshop	Yes	Insured Liability	Not at Fault	GIA report	Received
Preferred Workshop, Name unknown					
Data Registered	31/04/2019 20:36	Claim Date		Date Received	01/04/2019 00:00
Report Taken By	WOSLI WOHAS				

Print As Letter

Save Submit

Attachment

Accident No.	MT1036356	Claim No.	001
Last Doc. Received	Yes No	Upload Date	31/04/2019 20:36
Path *			
Choose File	No file chosen	Clear	Category *
Choose File	No file chosen	Clear	Category
Choose File	No file chosen	Clear	Category
Choose File	No file chosen	Clear	Category
Choose File	No file chosen	Clear	Category
Choose File	No file chosen	Clear	Category
Choose File	No file chosen	Clear	Category
Message Read	Send Message		
Attachment List			
Attachment	Uploaded By/Date	Category	Urgency
NAC_BUKIT_MERAH_8006791 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 01 Apr 2019 20:36	Photos	Normal	Description
NAC_BUKIT_MERAH_8006791 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 01 Apr 2019 20:36	Photos	Normal	Description

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:55	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:56	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:55	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:56	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:56	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:56	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:56	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:56	Photos	Normal	Photos 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:56	SAS	Normal	SAS 2019-4-1
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 01 Apr 2019 20:56	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: 01/04/2009 (DD/MM/YYYY), TIME: 08:40 (HH:MM)

LOCATION: PIE

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SUJ 5179 D
 b) INSURANCE COMPANY: NTUC HICOME
 c) POLICY NUMBER: 5107826509
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: LEXUS NX200T
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: TRAVELLING TO WORK
 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: MOE SOO (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S2526784 CONTACT: 90035890
 c) ADDRESS: 25 HAZEL PARK TERRACE #01-09
HAZEL PARK CONDO UNIT 567890

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: JESSE MOIC (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S2570000 CONTACT: 98354909
 c) ADDRESS: 25 HAZEL PARK TERRACE #01-09
HAZEL PARK CONDO UNIT 567890

* d) DATE OF BIRTH: 07/12/1987 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 23/5/2007

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

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) WET ROAD
 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: TEU 6321 S MODEL: _____
 b) DRIVER'S NAME: JOHAN BIN BAKU
 c) NRIC/FIN/PASSPORT: S95456122 CONTACT: 98354909

9. THIRD PARTY VEHICLE

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

Email: JESSE MOIC87@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8770184J



Name
MOK JESSE

莫子嘉
Race
CHINESE
Date of birth
07-12-1987 Sex
M
Country of birth
MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8770184J
Name
MOK JESSE

Birth Date 07 Dec 1987
Issue Date 23 May 2007



4119939

APRIC No. S8770184J



Date of issue
24-10-2007

APT BLK 29 HAZEL PARK TERRACE #01-08
SINGAPORE 878950

APRIC No. S8770184J

Date 28/12/2016

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

Class 3 Motor Cars $\leq 2000\text{kg}$ with ≤ 7 passengers, exclusive of the driver; and other motor vehicles $\leq 2000\text{kg}$ PASS DATE 23 May 2007

NP 426A



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)

Certificate Number: 5107826509

Cover : drive PREMIUM

1. Index mark and Registration Number of Vehicle : **SMJ5179D**
 Chassis Number : **JTJBARBZX02053134**
2. Name of Policyholder : **MOK SOO**
3. Effective Date of Insurance : **09 Mar 2019**
4. Expiry Date of Insurance : **01 Jun 2020**
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#
 - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial 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 Vehicle (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.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: MOK SOO
NAMED DRIVER (1)	: MOK Z-KENT
NAMED DRIVER (2)	: MOK JESSE
HIRE PURCHASE COMPANY	: OCBC BANK LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : ASSURE PTE. LTD. (00000572842)
 Date of Issue : 08 Mar 2019 13:42 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

 Authorised Officer



 Chief Executive