

# NATIONAL Assessment Centre Services

[wef 1 Jan'05] MNA11904438

Date In: 5/4/9 - 15.45	Job description	Date & Time Completed	Done by
Ref No: NA11904438/24	SAS e-filing		
Veh No: JMC1241E	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 29/1/9 - 09:30	i-Motor Claim Form	NA11904438-001	5/4/9 16:34
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: 68F672E	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

NA1904438	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
		Int Bill	Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	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:-		
QC Checked by (Engr-In-Charge):	ON:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$3		
Auditors' Comments:-	TP (N11): TP (N11) against INC \$20		
Dat. 1:	9) N12: Idac Mobile 30		
Dat. 2 / 3:	Invoice dated	Fee Charged	
	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	05/04/2019 13:45
Date Of Accident	29/03/2019 09:30
Exact Location Of Accident	THOMSON RD TWDS NOVENA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMC1041E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TW AUTOMOBILE
Co Reg No	53333500X
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

### Vehicle Particulars

Manufacturer	TOYOTA
Model	SIENTA HYBRID 1.5X CVT
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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5101671180-01
Cover Note Number	

### Driver

Name of Driver	CHONG CHIN LEONG (ZHANG ZHENLONG)
NRIC No	S8118835A
Date Of Birth	14/04/1981
Occupation	OUTDOOR
Date Of Driving Pass	29/06/2005
Driving Experience	13 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84186690
Fax Number	
Contact Number	OFFICE-84186690
Email Address	NOEMAIL



Address	BLK 223 LORONG 8 TOA PAYOH #25-751
Postcode	310223
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	CHAIN COLLISION
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	3
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: : VALYA AZZAYA GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TOA PAYOH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 93 TOA PAYOH CENTRAL TOA PAYOH COMMUNITY BUILDING , POSTCODE: 319194 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2519999 - FAX NO: 63548749
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190330/2019.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH TRAFFIC POLICE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBF672E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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 GBF4059A  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category COMMERCIAL VEHICLE  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name CHONG CHIN LEONG (ZHANG ZHENLONG)  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? SMC1041E  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

#### DETAILS OF INJURED PERSON 2

Name VALYA AZZAYA  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? SMC1041E  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? YES  
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.:



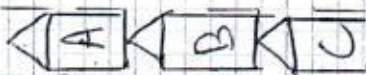
SKETCH PLAN

A: SMC 1041 E

B: GBF 672 E

C: GBF 4059 A

THOMSON ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

BUSTOP BIL

ON THE STATED TIME AND DATE, I, (SMC 1041 E) WAS TRAVELLING ON THE MIDDLE LANE ON THE STATED VENUE. ~~WHILE~~ AS THE FRONT VEHICLE APPLIED BRAKES, I FOLLOWED SUIT ~~AS~~ AND KEPT AT LEAST 1 CAR DISTANCE AWAY AS MY WIFE WAS PREGNANT, (VALYA AZZAYA S2EB1695 A), Suddenly, there WAS A HUGE BANG FROM MY REAR; ~~AT~~ I CHECKED ON MY WIFE AND IMMEDIATELY CALLED FOR AMBULANCE AS SHE HAD PAIN ON HER ABDOMINAL AREA. AFTER THAT, I ALIGHTED AND REALISED ITS A CHAIN COLLISION BETWEEN MY VEHICLE AND GBF 672 E AND GBF 4059 A.



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.:

*[Signature]*



Date of Accident : 29/03/19 Accident Time: 0930 (24-HR-Format)  
 Accident Place : THOMSON ROAD TOWARDS NOVENA  
 Vehicle Reg. No. (Car Plate No.) : SMC 1041 E  
 Vehicle Make/Model : TOYOTA SIENTA  
 Insurance Company : NTUC Policy No. \_\_\_\_\_  
 Owner or Company Name / IC No. : ATW AUTOMOBILE  
 Owner or Company Contact No. : \_\_\_\_\_ Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
 DRIVER'S Name / IC No. : CHONG CHIN LEAH  
 DRIVER'S Date Of Birth : 14-04-81 DRIVER'S License Pass Date 29/06/05  
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: HIRER  
 DRIVER'S Address : BLK 223, WONG 8 TOA PAYOH #25-751  
 DRIVER'S Contact No. / Alt No. : 1) 8418 6690 2) 530223  
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
 Email Address : ADMIN@MTCAR.SG  
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
 Number of Passengers (Including Driver): 02 Female  
 Was there any video Captured by car camera: YES \ NO WITH TP  
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particular (if any)

<p><u>B</u> Vehicle Reg. No: <u>GBF 672 E</u></p> <p>Vehicle Make/Model: _____</p> <p>Name Driver: _____</p> <p>IC No. Driver: _____</p> <p>Driver's Contact &amp; Add: _____</p>	<p><u>C</u> Vehicle Reg. No: <u>GBF 4059 A</u></p> <p>Vehicle Make/Model: _____</p> <p>Name Driver: _____</p> <p>IC No. Driver: _____</p> <p>Driver's Contact &amp; Add: _____</p>
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# SINGAPORE POLICE FORCE



T/20190330/2019

1 of 3

Report No. T/20190330/2019

Police Station Of Origin:  
Toa Payoh N.P.C  
93 Toa Payoh Central #01-02 Toa Payoh  
Community Building SINGAPORE 319194  
Tel No: 1800-2519999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/03/2019 05:43		Vide Report No.: E/20190329/0059		Station Diary No. 13	
<b>Informant's Particulars</b>					
Name of Informant: CHONG CHIN LEONG			Address: APT BLK 223 LORONG 8 TOA PAYOH #25-751 SINGAPORE 310223		
ID Type / ID No. NRIC NO / S8118835A			Contact No. Home/Office: Mobile: 84186690		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 37	Date of Birth: 14/04/1981	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: PROJECT MANAGER			Driving Licence Information: Class: 3 Date of Expiry:		

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/03/2019 09:30	Type of Location: Straight Road
Location: Along Road 1 THOMSON ROAD				
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: Yes

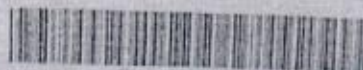
## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF4059A	Lorry	TOYOTA	TOYOTA DYNA 150 MANUAL	White		0
GBF672E	Lorry	TOYOTA	TOYOTA DYNA 150 MANUAL	White		0
SMC1041E	Car	TOYOTA	SIENTA HYBRID 1.5X CVT	White	Seriously Damaged	1





**SINGAPORE  
POLICE FORCE**



T/20190330/2019

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

2 of 3

Report No: T/20190330/2019

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	CHONG CHIN LEONG	ID No.	S8118835A
Related Vehicle	SMC1041E (Car)	Contact No.	84186690
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	29/03/2019	Date Discharge	29/03/2019
No. of Days granted Medical Leave	04	Degree of Injury	Slight
<b>Passenger</b>			
Name	VALYA AZZAYA	ID No.	S8561695A
Related Vehicle	SMC1041E (Car)	Contact No.	88185078
Hospital/Clinic	KK WOMEN'S AND CHILDREN'S HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	29/03/2019	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Serious

**Brief Details.**

On 29/03/2019 at about 0930hrs, I was driving my vehicle (SMC1041E) along Thomson Road together with my wife, and I had stopped the car at a traffic light junction as it was red. Out of a sudden, I felt impact from the rear. I realized that a lorry (GBF672E) had collided into my vehicle. I got out of my vehicle to make a check. I discovered that a second lorry (GBF4059A) had collided into the lorry that was behind me.

Due to the impact, my pregnant wife felt some contraction, as such, ambulance and police were called. My wife was then conveyed to KKH by the ambulance. Right after the accident happened, I felt some discomfort, as such I went to Tan Tock Seng Hospital to get myself checked as well. I was given 4 days of medical leave.

My vehicle sustained a serious damage on its rear, and it had to be towed away.





SINGAPORE  
POLICE FORCE



T/20190330/2019

Police Station Of Origin:  
Toa Payoh N.P.C  
93 Toa Payoh Central #01-02 Toa Payoh  
Community Building SINGAPORE 310194  
Tel No. 1800-2519999

3 of 3

Report No. T/20190330/2019

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:  
E /  
Sgt 2 NURUL NADIAH BINTE MOHAMED  
SARIFF

Signature Of Informant:

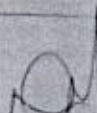
Signature Of Interpreter:  
Not applicable

Date/Time:  
30/03/2019 05:43

Officer In Charge Of Case:  
TP / GIT /  
Sgt 2 LEE MING CAI  
Contact No. 65476960

Classification Of Case:

Authentication Stamp  
NP168

  
SIGNATURE



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8561695A



Name

VALYA AZZAYA

Race

MONGOLIAN

Date of birth

04-03-1985

Sex

F

S8561695A

Country/Place of birth

MONGOLIA



9403983



NRIC No. S8561695A



Nationality

MONGOLIAN

Date of issue

26-05-2016

Address

APT BLK 673 WOODLANDS DRIVE 71  
#09-05  
SINGAPORE 730673



REPUBLIC OF SINGAPORE DRIVING LICENCE



Effective Number: S8118835A

CHONG CHIN LEONG  
(ZHANG ZHENLONG)

Birth Date: 14 Apr 1981

Issue Date: 22 Nov 2017



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8118835A



Name

CHONG CHIN LEONG  
(ZHANG ZHENLONG)

Race

CHINESE

Date of birth

14-04-1981

M

Country/Place of birth

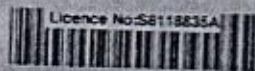
SINGAPORE

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

Class 1: Motor cars with unladen weight  $\leq 3000\text{kg}$  with  $\leq 7$  passengers, exclusive of driver, and other motor vehicles with unladen weight  $\leq 2500\text{kg}$

EFFECTIVE DATE

29 Jun 2005



Licence No: S8118835A

5398576



AMEC No. S8118835A



APT BLK 223 LORONG 8 TOA PAYOH #26-751  
SINGAPORE 310223

S8118835A

23.07.2017



**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:** 5101671180-01

**Cover :** drivo CLASSIC

- |   |                 |
|---|-----------------|
| 1. Index mark and Registration Number of Vehicle  | : SMC1041E      |
| Chassis Number  | : NHP1707119157 |
| 2. Name of Policyholder   | : TW AUTOMOBILE |
| 3. Effective Date of Insurance  | : 16 Jan 2019   |
| 4. Expiry Date of Insurance   | : 15 Jan 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 or Hirer's business.  |                 |

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
  - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
  - (c) 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\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: TAN WEI CREDIT PTE 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 : DICKSON INSURANCE AGENCY PTE. LTD. (00000573832)  
Date of Issue : 17 Jan 2019 17:19 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



eBaoTech

General Claim

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="29/03/2019 09:30"/>
Vehicle No.(For Motor)	<input type="text" value="SMC1041E"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5101671180-01		TW AUTOMOBILE	53333500X	GFT	drivo CLASSIC	SMC1041E	SMC1041E	16/01/2019	
<input type="button" value="Continue"/>										



## Policy Information

Policy No.	5101671180-01	Policyholder Name	TW AUTOMOBILE		Policyholder NRIC	53333500X
Certificate No.						
Address	9 TAGORE LANE #02-01 9 @ TAGORE SINGAPORE 787472					
Product Name	FLEET INSURANCE	Plan			Group Policy Flag	N
Policy issue Date	17/01/2019	Effective Date	16/01/2019 00:00	Expiry Date	15/01/2020 23:59	
Excess Type		All Claims Excess				
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00	
Additional Excess	0	OS Premium	0			
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00	Young/Inexperience Driver Excess		
Agent	DICKSON INSURANCE AGENCY	Agent Tel.	63447667	GST Flag	Y	
Co-insurance Flag	No					
Open Policy Info						
Certificate Info						

## Policyholder Mailing Address

Address 1	9 TAGORE LANE	Address 2	#02-01 9 @ TAGORE	Address 3	SINGAPORE 787472
Address 4		Address Type	Singapore address	Post Code	787472
Unit No.	02-01	Related Policy Number	5104194055-01		

## Insured Object: SMC1041E

## Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	11/03/2019 00:00	Basic Information Endorsement	000001287023807	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: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. GK31344771 11-03-2019 \$1,792.86 In view of this amendment, an additional premium of \$1,792.86 (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 cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.
2	11/03/2019 00:00	Basic Information Endorsement	000001287025621	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 11 Mar 2019, the following amendment(s) is/are made to this policy: VEHICLE REGISTRATION NUMBER: SMJ5436L

Continue

Cancel



## Claim Handling

Exit

Accident MT/1039009

Policy No.	5101671180-01	Vehicle No.	SMC1041E	GST Registration No.	
Certificate No.					
Policyholder Name	TW AUTOMOBILE	Cover Type	drive CLASSIC	Policyholder NRIC	53333500X
Product Code	FLEET INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	0	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	1
KYC	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	Yes
<b>Accident Details</b>					
Report Date	05/04/2019 16:31	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	29/03/2019	Time of Accident hh:mm	09:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	THOMSON RD TWDS NOVENA				
<b>Excess</b>					
Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore DO Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
<b>Benefits</b>					
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
<b>Policyholder Mailing Address</b>					
Address 1	9 TAGORE LANE	Address 2	#02-01 9 @ TAGORE	Address 3	SINGAPORE 767472
Address 4		Address Type	Singapore address	Post Code	767472
Unit No.	02-01	Related Policy Number	5104194055-01		
<b>DI Driver Info</b>					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	14/04/1981
Unnamed driver Name	CHONG CHIN LEONG (ZHANG Z	Driver NRIC	SB118835A	Driving Experience	13
Register Date of Driver License	29/05/2005	Driver Age	37	Contact No.(Home)	0
Contact No.(Mobile)	84186690	Contact No.(Office)	0	Address 3	SINGAPORE 310223
Address 1	BLK 223	Address 2	LDRONG & TOA PAYOH	Post Code	310223
Address 4		Address Type	Singapore address		
Unit No.	25-751				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
<b>Declaration</b>					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	TW AUTOMOBILE	Insured NRIC	53333500X
Contact No.(Mobile)	85865535	Contact No.(Home)		Contact No.(Office)	
Email Address		OT Vehicle Number	SMC1041E	TP Vehicle Number	GBF672E
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SMC1041E / GBF672E ON 29 Mar 2019				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	05/04/2019 16:34	Claim Close Date		Date Received	05/04/2019 00:00
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

## Attachment

Accident No.	MT/1039009	Claim No.	001		
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	05/04/2019 16:37		
Path *		Category *	Confidential	Urgency *	Description *
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal



☐ Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:37	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:37	SAS	Normal	SAS 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:36	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:36	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:36	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:36	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:36	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:36	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERV) on 05 Apr 2019 16:34	Photos	Normal	Photos 2019-4-5		<a href="#">Edit</a>

Video List

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