NATIONAL Assessment Centre Services. [wef 1 Jan'09]

	Job description	Date & Time Completed	Done by
Date In: 08/04/2019 16:19			
Ref No: NBA/INC/90/06/10/4	SAS e-filing		
Veh No: SDG 3808D	E-mail (Within 8hrs, AIC 2hrs)		
D.O.A: 06/04/2019 14:20	I-Motor Claim Form	MT/1039352-001	09/04/2019 10:06
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: SGD 9476Y. 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: ( )

Complete Following Services	Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > $3000] ( )		

Injury :

Details

NB1902692

Claimant Details

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Additional Comments

Invoice Charges		Charge(s)	Invoice No
1) AR : Accident Reporting ($30)			
2) DA : Damage Assessment ($100) INC ($30)	$40/$45		
3) TF : Towing Fee	$120		
4) FT : Follow-Through Survey	$30		
5) FT : Follow-Through Survey (Resurvey) For claiming against INC Only (wef 10 Jan 2005)	$75		
6) TR : Re-Inspection	$160		
7) N1 : Idea DA + SMRT Survey			
8) NTUC Additional Services:- OD*	$5		
*N5: Courtesy Car / TPT Allowance	$10		
*N6: Repair Co-ordination	$25		
*N7: Post Repair Inspection	$5		
*N8: DV / Collect Excess Coordination	$20		
TP(N11) : TP (Non INC) against INC	30		
9) N12: Idea Mobile			
Invoice dated	Fee Charged		
Invoice dated	Fee Charged		

10-DEC-2018 MON 08:09

MNA419045647 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 06/04/2019 16:19
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 09/04/2019 10:04

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	08/04/2019 16:19
Date Of Accident	06/04/2019 14:10
Exact Location Of Accident	BLK 88 TANGLIN HALT(CARPARK QXCAM)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJG3828D
Insured/Policyholder	
Name Of Registered Owner	U2 EDUCATION CENTRE
Co Reg No	53202125
Email Address	KINGSLEY8282@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82918889
Alternative Phone No	OFFICE-82918889
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLA 180
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094927139-01
Cover Note Number	
Driver	
Name of Driver	WU XI
NRIC No	G0949109R
Date Of Birth	13/08/1986
Occupation	INDOOR
Date Of Driving Pass	21/06/2014
Driving Experience	4 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-82918889
Fax Number	
Contact Number	OTHERS-82918889
EMail Address	KINGSLEY8282@GMAIL.COM

Address	BLK 93A TELOK BLANGAH STREET 31 #06-157
Postcode	
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	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	SGD9476Y
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MOHAMMAD JUMADI BIN SELAMAT
NRIC/Passport Number	S7143422B
Contact Number	90296923
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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**.
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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.

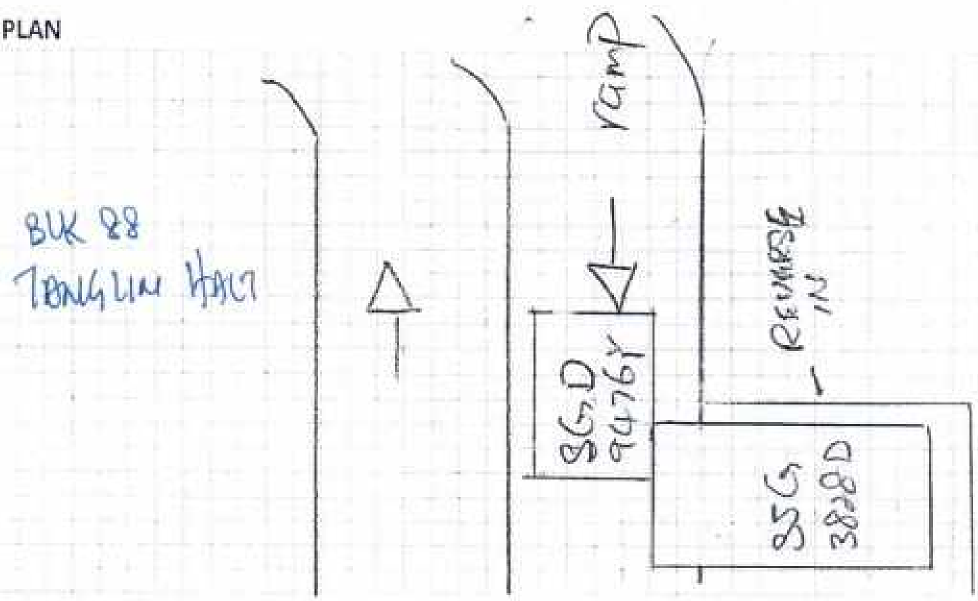
   (e) the information so collected under (d) above may be shared / disclosed:

   (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:	04/04/2019 Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

6/4/2019, 1408hrs, I'm Parking the car SSG3828D into the lot (Photo attach) I was almost Parkedinto the lot (carpark) REVERSE IN A car SGD9467Y suddenly turn up from the ramp and ~~bam~~ hit on my car front right side)
& He told me, ~~he~~ was a ~~d~~ taxi driver never slept well last nite. He said the road is too narrow & he can't see the car. Photos attach this carpark lane is 2 lanes ~~car~~ Road.

He did whatapp my husband Ng Teck Peng S7200845J to private settle but the amount he willing to pay only $350.00 (whatapp Proof in my husband's handphone) & is not enough to cover it.

Now the car's bumper broke a hole, Bended in & the car wheel's handle got some noise when drive thought hump.

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:

09/04/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Claim Handling

Accident MT/1039352

Policy No.	5094927139-01	Vehicle No.	SJG3828D	GST Registration No.	
Certificate No.					
Policyholder Name	U2 EDUCATION CENTRE			Policyholder NRIC	S3202125L
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo PREMIUM	Loading	0
Contact No.(Mobile)	82918889	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	09/04/2019 09:59	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	06/04/2019	Time of Accident hh:mm	14:10	Country of Accident	Singapore
Reporting Centre		Orange Force		VON No.	
Accident Location	BLK 88 TANGLIN HALT(CARPARK QIECAM)				

Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	09/04/2019 10:01:35 System changed GST Status Verified from No to Yes		

Policyholder Mailing Address

Address 1	NIL	Address 2		Address 3	
Address 4		Address Type	Singapore address	Post Code	999999
Unit No.	01-00	Related Policy Number	5094927139-01		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	W(X)	Driver NRIC	G0949108R	Driver DOB	13/08/1988
Register Date of Driver License	21/08/2014	Driver Age	32	Driving Experience	4
Contact No.(Mobile)	82918889	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 93A #06-157	Address 2	TELOK BLANGAH STREET 31	Address 3	TELOK BLANGAH FARCVIEW
Address 4	SINGAPORE 101093	Address Type	Foreign address	Post Code	101093
Unit No.	06-157				
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SJG3828D	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	Yes No

Modification History

Claim 001 New

Claim Type *		OD-MX	Insured Name: U2 EDUCATION CENTRE	Insured NRIC: S3202125L	
Contact No.(Mobile)		88911006	Contact No. (Home)	Contact No. (Office)	
Email Address			OI Vehicle Number: SJG3828D	TP Vehicle Number: SGD9476Y	
Claim Description		SJG3828D / SGD9476Y ON 6 Apr 2019		Name of Preferred Workshop	
Preferred Workshop		Insured Liability: Not at Fault			
Contact No.		Insured Repair Option: Preferred Workshop, Name unknown	GIA report: Received		
Finalisation	Yes				
Date Registered		09/04/2019 10:02	Claim Close Date	Date Received: 09/04/2019 00:00	
Report Taken By		ROSLI WAHAB			

Print All letter

Save Submit

Attachment

Accident No.	MT/1039352	Claim No.	001
Last Doc. Received	Yes No	Upload Date	09/04/2019 10:06

Path *		Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Read Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Apr 2019 10:06	SAS	Normal	SAS 2019-4-9	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:02	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:03	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:02	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:02	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:02	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:02	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:02	Photos	Normal	Photos 2019-4-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Apr 2019 10:02	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-9

Video List

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

SKMAC4 [illegible] 8/1/14 : 0015 8/10mP

ACCIDENT STATEMENT

ACCIDENT DATE:(06 / 04 / 2019)(DD/MM/YYYY). TIME:(14 : 08)(HH:MM)
LOCATION: Blk 88, Tanglin Halt (carpark @ xCAM)

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: SSG3828D
   b) INSURANCE COMPANY: Income
   c) POLICY NUMBER: 5094927139 - 01
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
   e) MAKE & MODEL: Mercedes Benz / CLA 180
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: supermarket
   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: U2 Education Centre (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: 53202125L CONTACT: 82918889
   c) ADDRESS: 591, Serangoon Road, #01-00 S218205

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

\# No of passenger (Including driver) (1)

DRIVER
   a) NAME: Wu Xi (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: G0969109M CONTACT:
   c) ADDRESS: 93A, Telok Blangah St. 31, #06-157 S101093
   *d) DATE OF BIRTH: (13 / 08 / 1986) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS 21/6/2014
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: SGD9476Y MODEL: Nissan
   b) DRIVER'S NAME: Mohammad Jumadi Bin Solamat
   c) NRIC/FIN/PASSPORT: S7143422B CONTACT: 90296923

\# No of passenger (Including driver) (__)

9. THIRD PARTY VEHICLE
   d) VEHICLE NUMBER: ______ MODEL: ______
   e) DRIVER'S NAME: ______
   f) NRIC/FIN/PASSPORT: ______ CONTACT: ______

\# No of passenger (Including driver) (__)

email = kingsley8282@gmail.com
VIDEO

REPUBLIC OF SINGAPORE

FIN G0949109R

Name
WU XI

Date of Birth
13-08-1986

Sex
F

Nationality
CHINESE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number G0949109R
Name
WU XI

Birth Date 13 Aug 1986
Issue Date 21 Jun 2014
Valid Till 20 Jun 2019

002317145A

FA2064944

VISIT PASS

Immigration Regulations

FIN G0949109R PLUS

MULTIPLE JOURNEY VISA ISSUED

Date of Issue 27-02-2018

Date of Expiry 27-02-2021

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU

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

		EFFECTIVE DATE
Class 3	Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 250ukg	21 Jun 2014

Licence No: G0949109R

NP 428A

eBaoTech GeneralClaim

Hello, NAC_BUKIT_MERAH_800676 · Change Language · Change Password · Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.
Vehicle No.(For Motor) SJG3828D
Date of Accident 06/04/2019 14:39
Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5094927139-01		U2 EDUCATION CENTRE	53202125L	GPC	drivo PREMIUM	SJG3828D	SJG3828D	27/02/2019	26/02/2020

Continue