

NATIONAL Assessment Centre Services. [part 1 Jan03] MMA 119047297.

Date In: 11/4/19 14:17	Job description	Date & Time Completed	Done by
Ref No: MA/INC 19006476/h4	SAS e-filing		
Veh No: SGJ 7901T	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 23/3/19 14:00	I-Motor Claim Form	MT/1037959-002	11/4/19 17:11
OD / 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/Wksp		

Preferred Wksp / IHC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SH 9101R	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 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

NA1902614	Invoice Preparation Checklist	Am (3)	Ad (3)
1) All: Accident Reporting (\$30)		30.00	
2) DA: Damage Assessment (\$100); INC (\$30)			
3) TP: Towing Fee \$40/\$45			
4) PT: Follow-Through Survey \$120			
5) PT: Follow-Through Survey (Resurvey) \$30			
For claiming against INC Only (w/ef 10 Jan 2003)			
6) TR: Re-Inspection \$75			
7) NI: Idan DA + SMRT Survey \$160			
8) NTUC Additional Services:			
ON*			
*N5: Courtesy Car / Tpt Allowance \$5			
*N6: Repair Co-ordination \$10			
*N7: Post Repair Inspection \$25			
*N8: DV / Collect Bxonta Coordination \$5			
TE (N11): TP (N-on INC) against INC \$20			
9) N12: Idan Mobile \$0			
Invoice dated	Fax Charged		
Invoice dated	Fax 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	11/04/2019 14:17
Date Of Accident	23/03/2019 14:00
Exact Location Of Accident	PAYA LEBAR RD JUNCTION WITH AIRPORT RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ7901T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	VISCAR LEASING PTE LTD
Co Reg No	201634983K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90303074

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS
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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5087371725-02
Cover Note Number	-

### Driver

Name of Driver	MOHAMMAD SHAREL BIN ITHNIN
NRIC No	S8119668J
Date Of Birth	05/07/1981
Occupation	OUTDOOR
Date Of Driving Pass	15/01/2014
Driving Experience	5 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87424291
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 158 YUNG LOH ROAD #01-42
Postcode	510158
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?	NO
Was any injured conveyed to hospital by ambulance?	
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

I STOP AT THE TRAFFIC JUNCTION OF PAYA LEBAR RD AND AIRPORT RD DUE TO RED LIGHT, MY VEH ACCIDENTALLY ROLLED FORWARD TOUCH ONTO THE TAXI INFRONT OF ME, NO DAMAGE TO BOTH VEH.

#### 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	SH9101R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
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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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

Airport Rd



A = SGJ7901T

B = SH 9101 R.

Paya Lebar Rd

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

### 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.:

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8119668J

Name

MOHAMMAD SHAREL BIN ITHNIN

Birth Date: 05 Jul 1981

Issue Date: 15 Jan 2014

002265629D

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8119668J

Name

MOHAMMAD SHAREL BIN ITHNIN

محمد سهريل بن ايثنين

Race

MALAY

Date of birth

05-07-1981

Sex

M

Country of birth

SINGAPORE

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 15 Jan 2014

Licence No: S8119668J

NP 420A

5057408

NRIC No: S8119668J

Date of issue

05-07-2012

Address

APT BLK 158 YUNG LOH ROAD  
#01-42  
SINGAPORE 610158



## 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:** 5087371725-02

**Cover :** Third Party

1. Index mark and Registration Number of Vehicle : **SGJ7901T**  
Chassis Number : **MR053ZEC107123538**
2. Name of Policyholder : **VISCAR LEASING PTE LTD**
3. Effective Date of Insurance : **09 Jan 2019**
4. Expiry Date of Insurance : **08 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)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : CITY INSURANCE AGENCY PTE. LTD. (00000573566)  
Date of Issue : 03 Jan 2019 12:38 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type:	Company
Owner ID:	4983K

**Vehicle Details**

Vehicle No.:	SGJ7901T
Vehicle to be Exported:	Yes
Intended Deregistration Date:	17 Apr 2019
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Gold
Manufacturing Year:	2006
Engine No.:	3ZZ4580376
Chassis No.:	MR053ZEC107123538
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$15,950.00
Original Registration Date:	21 Jul 2006
First Registration Date:	21 Jul 2006
Transfer Count:	3
Actual ARF Paid:	\$17,545.00

**Intended PARF Rebate Details**

PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

**Intended COE Rebate Details**

COE Expiry Date:	30 Jun 2021
COE Category:	E - Open Category
COE Period(Years):	5
PQP Paid:	\$23,227.00
COE Rebate Amount:	\$10,232.00
<b>Total Rebate Amount:</b>	<b>\$10,232.00</b>

**Message**

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 11 Apr 2019

OK



## Claim Handling

The premium on this policy has not been collected.

## Accident MT/1037959

Policy No.	5087371725-02	Vehicle No.	SGJ7901T	GST Registration No.	
Certificate No.					
Policyholder Name	VISCAR LEASING PTE LTD			Policyholder NRIC	20163-
Product Code	FLEET INSURANCE	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	NA	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	Not av

Report Date

29/03/2019 13:56

Date of Accident

23/03/2019

Reporting Centre

administrator

Accident Location

UPP PAYA LEBAR RD / AIRPORT RD

Accident Report Within 24 hrs

Yes

Time of Accident hh:mm

14:30

Orange Force

No

Accident Type

Unknow

Country of Accident

Singap

ICM No.

Own damage Excess

0.00

Additional Excess

0

Windscreen Excess

0.00

Unnamed Driver Excess

Outside Singapore OD Excess

0.00

Third Party Excess

1,500.00

Outside Singapore TP Excess

1,500.00

GST Registered

No

GST Registration No.

Modification History

GST Registration Date

GST Status Verified

Yes

Address 1

10 UBI CRESCENT

Address 4

Unit No.

05-16

Address 2

#05-16 UBI TECHPARK

Address Type

Singapore address

Related Policy Number

5087371725-02

Driver Name

Unamed driver Name

Register Date of Driver License

Contact No.(Mobile)

Address 1

Address 4

Unit No.

Does he own a Singapore Registered car?

Yes ☒ No ☐

Driver Type

Driver NRIC

Driver Age

Contact No.(Office)

Address 2

Address Type

Foreign address

Driver Vehicle No.

Driver DOB

Driving Experience

Contact No.(Home)

Address 3

Post Code

Driver Insurer Company

Address 3

SINGA

Post Code

40856

Address 1

10 UBI CRESCENT

Address 4

Unit No.

05-16

Address 2

#05-16 UBI TECHPARK

Address Type

Singapore address

Related Policy Number

5087371725-02

Driver Name

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Contact No.(Mobile)

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Unit No.

Does he own a Singapore Registered car?

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Driver Type

Driver NRIC

Driver Age

Contact No.(Office)

Address 2

Address Type

Foreign address

Driver Vehicle No.

Driver DOB

Driving Experience

Contact No.(Home)

Address 3

Post Code

Driver Insurer Company

Address 3

SINGA

Post Code

40856

Claim 002 **New**

Claim Type *	OD-MX	Insured Name	VISCAR LEASING PTE LTD
Contact No.(Mobile)	90303074	Contact No. (Home)	
Email Address		Ol Vehicle Number	SGJ7901T
Claim Description	SGJ7901T / SH9101R ON 23 Mar 2019		
Preferred Workshop	0	Insured Liability	Fully at Fault
Report No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	11/04/2019 17:08
			LIEW SHAN HUI

☒ Print AK letter

Save Submit

## Attachment

Accident No.	MT/1037959	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	11/04/2019 17:11
Path *		Category *	Confidential
		Urgency *	

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

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Message Read

Clear Please Select NO Normal

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## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:11	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:11	SAS	Normal	SAS 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:10	Photos	Normal	Photos 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:10	Photos	Normal	Photos 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:10	Photos	Normal	Photos 2019-4-11
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:10	Photos	Normal	Photos 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:10	Photos	Normal	Photos 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:08	Photos	Normal	Photos 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:08	Photos	Normal	Photos 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:08	Photos	Normal	Photos 2019-4-11
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:08	Photos	Normal	Photos 2019-4-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 11 Apr 2019 17:08	Photos	Normal	Photos 2019-4-11

## Video List

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