

NATIONAL Assessment Centre Services

(Ref: Jan 2005)

2.2

Date In: 18/04/2019 10:36	Job description	Date & Time Completed	Done by
Ref No. NA/LIP19006903/K4	SAS e-filing		
Veh No: YN 8829.D	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 16/04/2019 14:40	i-Motor Claim Form		
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: YN 3199X	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

NA1902840	Invoice Preparation Checklist	Am't (\$) Inc Bill	Am't (\$) 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		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idao Mobile 30		
	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	18/04/2019 10:36
Date Of Accident	16/04/2019 14:40
Exact Location Of Accident	(MCE) LANE 5 NEAR EXIT FORT ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	YN8829D
Insured/Policyholder	
Name Of Registered Owner	SUNNY METAL & ENGINEERING PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91000852
Alternative Phone No	OFFICE-91000852
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	-
Exact Purpose for which vehicle was being used at time of accident	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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V08418/VCV/R00
Cover Note Number	
Driver	
Name of Driver	WONG SIN PIOW
NRIC No	S0091464I
Date Of Birth	16/02/1950
Occupation	OUTDOOR
Date Of Driving Pass	24/05/1971
Driving Experience	47 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91000852
Fax Number	
Contact Number	OTHERS-91000852
Email Address	NOEMAIL

Address	BLK 320 TAMPINES STREET 33
	#04-116
Postcode	520320
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	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

PLS REFER TO THE ATTACHED STATEMENT.

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	YN3199X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	RAMESH
NRIC/Passport Number	
Contact Number	84325900
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:

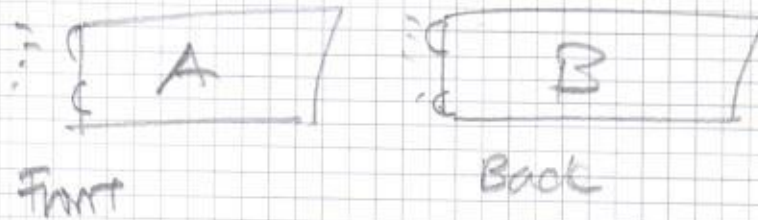
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

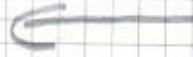
SKETCH PLAN



A - YN 8829D
B - YN 3199X



(MCE) Lane 5
Near Exit Fort Rd



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along MCE Lane 5 near Fort Road exit about 200m from the exit. The speed I was driving was 60km/h. The lorry behind me YN 3199X (Fuso) hit me from behind. The name of the driver is Ramesh. There was no damage on my lorry but was advised to make a report. Major

The date of the accident is 16 April 2019 @ 14:40.

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.:

18/4/2019

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0091464I



Name

WONG SIN PIOW

黄新标

Race

CHINESE

Date of birth

16-02-1950

Country/Place of birth

SINGAPORE

Sex

M



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S0091464I

Name

WONG SIN PIOW

Birth Date: 16 Feb 1950

Issue Date: 15 Apr 2003



6085668



NRIC No. S0091464I



Date of issue

19-12-2018

Address

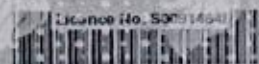
APT BLK 320 TAMPINES STREET 33
#04-116
SINGAPORE 520320

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS:

PASS DATE

24 May 1971

Class 3 Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms




NP 428A

Email: admin@sunnymetal.com ✓

Email: diana@sunnymetal.com ✓

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 No	SD18V08418 /VCV /R00
Form	MZ300A
Date Of Issue	13-AUG-2018
1.Index Mark and Registration No. of Vehicle:	YN8829D
2.Chassis number of Vehicle:	FEB71EA10081
3.Name of Policyholder:	SUNNY METAL & ENGINEERING PTE LTD
4.Effective date of Commencement of Insurance for the purposes of the Act:	18-AUG-2018 00:00 AM
5.Date of Expiry of Insurance:	17-AUG-2019 23:59 PM
6.Persons or Classes of Persons entitled to drive*:	
<p>Any person who is driving on the Policyholder's order or with their permission.</p> <p>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.</p> <p>And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.</p>	
7.Limitations as to use*:	
<p>A) Use in connection with the Policyholder's business.</p> <p>B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.</p> <p>C) Use for social, domestic and pleasure purposes.</p>	
8.The Policy does not cover:	
<p>A) Use for hire or reward or for racing, pace-making, reliability trials or speed-testing.</p> <p>B) Use whilst drawing a trailer except the towing or any one disabled mechanically propelled vehicle.</p>	
<p>*Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.</p>	
<p>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).</p>	
<p>For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers</p>	
 <hr/> <p>Authorised Signature</p>	
For Information only:	
COVERAGE :	Comprehensive, Unlimited Windscreen
SUM INSURED:	MARKET VALUE AT THE TIME OF LOSS
EXCESS:	Section I S\$850, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers S\$3000, Windscreen Excess S\$100
FINANCE COMPANY:	DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD
PRODUCER NAME:	ACORN INTERNATIONAL NETWORK PTE LTD

PLYW/PLYW/13-AUG-18

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13-AUG-18