

# NATIONAL Assessment Centre Services.

[ver 1 Jan 05]

19/01/2019 11:31

Date In: 20/04/2019 12:10	Job description	Date & Time Completed	Done by
Ref No: NA/C1190065841	SAS e-filing		
Veh No: 9265x	E-mail (w/da 3hrs, AIC 2hrs)		
D.O.A: 18/04/2019 07:45	I-Motor Claim Form		
OID: (TP) Reporting Only	I-Motor W/O (Withlat OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wkup / INC Assign Wkup / QW: (	Tel:	Fax:
TP Particulars:	Veh No: YP 67445	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 repair.		
( ) Total Loss Case: to e-mail Insurer URGENTLY.		
Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )		

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

Injury: ( )

Date of Incident: ( )	
Time of Incident: ( )	
Location of Incident: ( )	
Weather Conditions: ( )	
Road Conditions: ( )	
Vehicle Condition: ( )	
Driver Condition: ( )	
Witnesses: ( )	
Police Report: ( )	
Insurance Claim: ( )	

NA1902978	1) AR: Accident Reporting (330)	
Driver/Owner:	2) DA: Damage Assessment (5100)	INC (550)
Contact No:	3) TP: Towing Fee	\$10/245
Damaged Portion:	4) PT: Follow-Through Survey	\$120
	5) PT: Follow-Through Survey (Resurvey)	\$30
	Forfeiting against INC Only (wef 10 Jun 2005)	
	6) TR: Re-inspection	\$75
	7) NI: Idea DA + SMRT Survey	\$160
	8) NTUC Additional Services:	
	ON:	
	• NG: Courtesy Car / Tpr Allowance	\$5
	• NG: Repairs Coordination	\$10
	• NG: Post Repair Inspection	\$25
	• NG: DV / Collect Excess Coordination	\$5
	• TP (NI): TP (on INC)	\$10
	• NI: Idea Mobile	\$20
	Invoice dated	
	Invoice dated	
	Fee Charged	
	Fee Charged	

FOR: 10-DEC-2018 MON 06:09



## 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	20/04/2019 12:10
Date Of Accident	18/04/2019 07:45
Exact Location Of Accident	30 KAKI BUKIT ROAD 3 #03-01 EMPIRE TECHNOCENTRE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG9965X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TURNON ENGINEERING PTE LTD
Co Reg No	A199906608H
Email Address	SHARON.LIOU@TURNON.COM.SG
Mobile Phone No	(LOCAL) +65-91279012
Alternative Phone No	OFFICE-97453356

### Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	LORRY WAS PARKED
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1771351801
Cover Note Number	

### Driver

Name of Driver	CHUA SENG GIAP
NRIC No	S0286759A
Date Of Birth	20/12/1950
Occupation	OUTDOOR
Date Of Driving Pass	23/09/1972
Driving Experience	46 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91279012
Fax Number	
Contact Number	OFFICE-97453356
EMail Address	SHARON.LIOU@TURNON.COM.SG

Address BLK 571 HOUGANG STREET 51  
#11-121

Postcode 530571

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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) 0

#### 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 YP6744S

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number 67439200

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.
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:

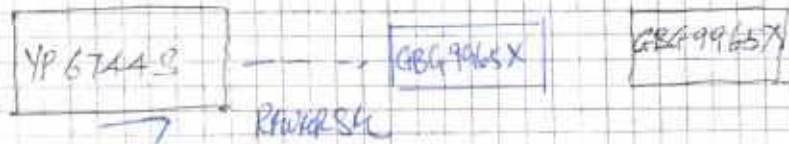
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



SKETCH PLAN

30 KAKI BUKIT ROAD 3 #03-01 EMPIRE TECHNOCENTRE



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 18 APR 2019 AT 17:45, I CAME BACK FROM OUTSIDE TO MY OFFICE, I PARK MY LORRY BEHIND THE LORRY YP6744S. THEN, I GO TO MY OFFICE, SUDDENLY I HEARD A SOUND, AND I REALISE MY LORRY WAS KNOCK BY LORRY YP6744S DURING REVERSING.

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.:

22/04/2019

22/04/2019

# ACCIDENT STATEMENT

ACCIDENT DATE: 18/04/2019 (DD/MM/YYYY), TIME: 07:45 (HH:MM)

LOCATION: 30 KAKI BUKIT ROAD 3 #03-01 EMPIRE TECHNECEN/RE

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: CBG 9965X  
 b) INSURANCE COMPANY: CHINA TRADING INSURANCE (S) P/L  
 c) POLICY NUMBER: TMVLSN/TT1351801  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: NISSAN CHERA  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING LORRY WAS PARKED  
 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: TURNON ENGINEERING PTE LTD (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 199906608H CONTACT: 67453356  
 c) ADDRESS: 30 KAKI BUKIT ROAD 3 #03-01 EMPIRE TECHNECEN/RE  
S (A17814)

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: ANA JING GOR (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 50286757A CONTACT: 91279012  
 c) ADDRESS: BLK 571 HANGANG ST. 51 #11-121  
S (S30571)

\* d) DATE OF BIRTH: 20/12/1950 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 23/4/1972

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: YES

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: YP 6744 S MODEL: LORRY  
 b) DRIVER'S NAME:  
 c) NRIC/FIN/PASSPORT: CONTACT: 67439200

## 9. THIRD PARTY VEHICLE

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

email = sharon.lieu@turnon.com.sg

VIDEO

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0286759A



Name  
CHUA SENG GIAP

蔡成业

Race  
CHINESE

Date of Birth  
20-12-1950

Sex  
M

Country of Birth  
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

Tranche Number S0286759A

Name  
CHUA SENG GIAP

Birth Date 20 Dec 1950

Issue Date 04 Oct 2003




0090384



NRIC No. S0286759A



ISU

Blood Group Date of Issue  
B+ 15-09-1991

APT BLK 571 HOUGANG STREET 51 #11-121  
SINGAPORE 530571

NRIC No: S0286759A Date: 25-07-2001 No: 3854851

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	21 Aug 1976
Class 2A	Motorcycles between 201 cc and 400 cc	21 Aug 1976
Class 2	Motorcycles exceeding 400 cc	21 Aug 1976
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	23 Sep 1972
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	16 Dec 1977
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	29 Oct 1980

NP 428A

Licence No: S0286759A







中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Co. Reg. No. 320290004D

H2302/C  
# 34  
AW21364  
Cov. Type: C

MOTOR COMMERCIAL VEHICLE

**CERTIFICATE OF INSURANCE**

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 180)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1989 (Singapore)

ORIGINAL

CERTIFICATE No

DMCVSH1771351801

Engine No : 2D30027172N  
Chassis : 2N15C27142D860500

1. Make Mark and Registration  
Number of vehicle

DMC99654

AUTOSAFE

2. Name of Policy Holder

TURNON ENGINEERING PTE LTD

3. Effective date of the Commencement of  
insurance for the purposes of the Regulations,  
Certificate or Endowment

23 December 2018

Excess SECT I ..... \$5500.00  
EX ON WINDSCREEN ..... \$1100.00

4. Date of Expiry of insurance

22 December 2019

5. Persons or Classes of Persons entitled to drive\*

Any person who is driving on the policyholder's order or with their 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\*

- (1) use in connection with the policyholder's business.
- (2) use for the carriage of passengers (other than for hire or reward) in connection with the  
policyholder's business.
- (3) use for social, domestic or pleasure purposes.  
The policy does not cover,
- (3) use for hire or reward or racing, pace-making, reliability trial or speed testing.
- (2) use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE (2), 1 UNITED OVERSEAS BANK LIMITED AS HP OWNER

\* Limitations removed irrespective by Section 2 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 180)  
and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

**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 180) and Part IV of the Road  
Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: LIM SHU REN  
Authorised Officer

Authorised Signatory

1 Anson Road #18-00 Springleaf Tower Singapore 079909 Tel: 6348 8111 Fax: 6228 3592 Website: www.tg.citiapig.com