

NATIONAL Assessment Centre Services

Date In: 24/04/2019 09:56	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA/INC19007184/K4	E-mail (within 8hrs, A/C 2hrs):		
Veh No: GBE5234J	i-Motor Claim Form: MT/1041639-001	25/4/19 10:23	
D.O.A: 23/04/2019 11:05	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OD: (TP) Reporting Only	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: SHC7873R 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)

Remarks	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

NA1902964

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Invoice Preparation Checklist

	Ant (\$) 1st Bill	Ant (\$) Add Bill
1) AR: Accident Reporting (\$30);		
2) DA: Damage Assessment (\$100); INC (\$80)		
3) TF: Towing Fee \$40/\$45		
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) NI: Idac DA + SMRT Survey \$160		
8) NTUC Additional Services:-		
OD*		
*N5: Courtesy Car / Tpt 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: Idac Mobile \$0		

Auditors' Comments :-

Cat 1:

Cat 2/3:

Invoice date:

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	24/04/2019 09:56
Date Of Accident	23/04/2019 11:05
Exact Location Of Accident	JUNC OF OUTRAM ROAD AND CHIN SWEE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE5234J
Insured/Policyholder	
Name Of Registered Owner	OSIM INTERNATIONAL PTE. LTD.
Co Reg No	198304191N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87003253
Alternative Phone No	OFFICE-87003253

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5072559137-03
Cover Note Number	

Driver

Name of Driver	MOHAMED FAISAL BIN MOHAMED HASSAN
NRIC No	S7701206J
Date Of Birth	01/01/1977
Occupation	INDOOR
Date Of Driving Pass	29/05/2014
Driving Experience	4 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87003253
Fax Number	
Contact Number	OTHERS-87003253
E Mail Address	NOEMAIL

Address	BLK 108 SERANGOON NORTH AVENUE 1 #05-707
Postcode	550108
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	SHC7873R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM HOWE KIANG
NRIC/Passport Number	S0708608C
Contact Number	96713064
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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:

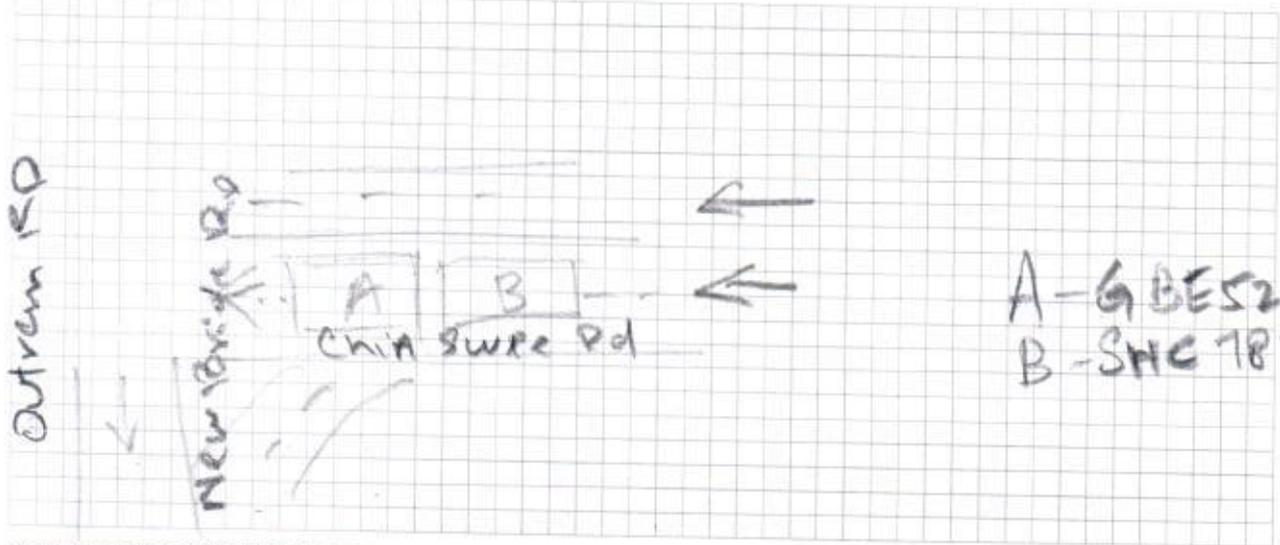
Jc

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

24/4/2019

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

~~Vehicle A, stopping at junction traffic junction waiting for red light turn to green light at Outram road junction. Suddenly vehicle B come and hit from behind the vehicle A from behind~~

Vehicle A coming from Outram park and stopping at Chin Swee Rd traffic junction. While waiting for the red traffic light change to green light suddenly vehicle B come and hit vehicle A from behind. Vehicle A ~~no~~ ~~reback~~ no damage

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.:

24/4/2019

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7701206J**



Name
**MOHAMED FAISAL BIN
MOHAMED HASSAN**

Race
BOYANESE

Date of birth
01-01-1977

Sex
M

Country of birth
SINGAPORE





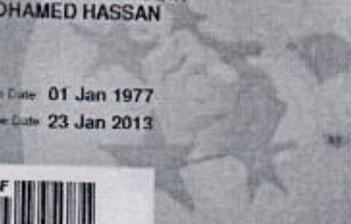
REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S7701206J**

Name
**MOHAMED FAISAL BIN
MOHAMED HASSAN**

Birth Date **01 Jan 1977**

Issue Date **23 Jan 2013**

002145010F



4067676




NRIC No. **S7701206J**

Date of issue
05-07-2007

Address
**APT BLK 10B SERANGOON NORTH AVENUE 1
#05-707
SINGAPORE 550108**



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

		EFFECTIVE DATE
Class 2B	Motorcycles <= 200 CC	23 Jan 2013
Class 2A	Motorcycles between 201 CC and 400 CC	05 Sep 2014
Class 2	Motorcycles > 400 CC	23 Jan 2017
Class 3	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor tractor/vehicles <= 2500 kg	29 Mar 2014

S7701206J **S / No. 9000238098**

Licence No. **S7701206J**



NP 42BA

Hello, NAC_PAYA_UBI_800601

Change Language Change Password Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.

Vehicle No.(For Motor)

Date of Accident

Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5072559137-03		OSIM INTERNATIONAL PTE. LTD.	198304191N	GFT	Comprehensive	GBE5234J	GBE5234J	01/07/2018	

Continue

▼ Policy Information

Policy No.	5072559137-03	Policyholder Name	OSIM INTERNATIONAL PTE. LTD	Policyholder NRIC	198304191N
Certificate No.					
Address	65 UBI AVENUE 1 OSIM HEADQUARTERS SINGAPORE 408939				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	28/06/2018	Effective Date	01/07/2018 00:00	Expiry Date	30/06/2019 23:59
Third Party Excess	0.00	Own damage Excess	350.00	Windscreen Excess	0.00
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	JARDINE LLOYD THOMPSON PTE	Agent Tel.	63336311	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	65 UBI AVENUE 1	Address 2	SINGAPORE 408939	Address 3	
Address 4		Address Type	Singapore address	Post Code	408939
Unit No.		Related Policy Number	5072559137-03		

▶ Insured Object: GBE5234J

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	04/09/2018 00:00	Basic Information Endorsement	000001286895403	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 04 Sep 2018, the following amendment(s) is/are made to this policy: VEHICLE REGISTRATION NUMBER: 1. GBH7012D 2. GBH7202Y 2. GBH7118H 3.
2	04/09/2018 00:00	Basic Information Endorsement	000001286895114	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: CHASSIS NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. VSKYBAM20U0153547 04-09-2018 \$870.66 2. VSKYBAM20U0153365 04-09-2018 \$870.66 3. VSKYBAM20U0153579 04-09-2018 \$870.66 In view of this amendment, an additional premium of \$2,611.98(inclusive of GST) is payable under your policy. Please ignore this premium payment request if

Claim Handling

Accident MT/1041639

Policy No.	5072559137-03	Vehicle No.	GBE5234J	GST Registration No.
Certificate No.				
Policyholder Name	OSIM INTERNATIONAL PTE. LTD.			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Comprehensive	Loading
Contact No.(Mobile)	87003253	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
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

Accident Details

Report Date	25/04/2019 10:05	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	23/04/2019	Time of Accident hh:mm	11:05	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	JUNC OF OUTRAM ROAD AND CHIN SWEE ROAD			

Excess

Own damage Excess	350.00	Additional Excess		Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess		
Third Party Excess	0.00	Outside Singapore TP Excess		

Benefits

GST Registered Information

GST Registered	Yes	GST Registration Date	01/12/19
GST Registration No.	M200625382	GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	65 UBI AVENUE 1	Address 2	SINGAPORE 408939	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5072559137-03	

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	MOHAMED FAISAL BIN MOHAME	Driver NRIC	S7701206J	Driving Experience
Register Date of Driver License	29/05/2014	Driver Age	42	Contact No.(Home)
Contact No.(Mobile)	87003253	Contact No.(Office)	0	Address 3
Address 1	BLK 108 #	Address 2	SERANGOON NORTH AVENUE 1	Post Code
Address 4		Address Type	Singapore address	
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Com

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001 OD-MX **New**

Claim Type *	OD-MX	Insured Name	OSIM I
Contact No.(Mobile)		Contact No. (Home)	
Email Address		OJ Vehicle Number	GBE5234J
Claim Description	GBE5234J / SHC7873R ON 23 Apr 2019		
Preferred Workshop	Preferred	Insured Liability	Not at Fault
Workshop No.		Repair Option	Preferred Workshop, Name unknown
Finalisation	Yes	GIA report	Received
Date Registered	25/04/2019 10:14	Claim Close Date	
Report Taken By		Workshop Repairer	

Print AK letter

Save Submit

Attachment

Accident No. MT/1041639 Claim No. 001
 Last Doc. Received Yes No Upload Date 25/04/2019 10:10

- Choose File No file chosen
- Message Read

Path *

Category *

Clear	Please Select	Confidential
Clear	Please Select	NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:13	NRIC/ Driving License	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:12	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:12	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Apr 2019 10:11	Photos	Normal	Photos

Video List

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