

NATIONAL Assessment Centre Services. (ver 1 Jan 2009)

MA19053281

Date In: 24/04/2019 17:50	Job description	Date & Time Completed	Done by
Ref No: N68/MC1900M02/Y	SAS e-filing		
Veh No: SA 8258 Z	E-mail (update then, AIC then)		
D.O.A: 19/04/2019 00:35	I-Motor Claim Form	M/1041857-00	26/04/2019
OID: TP Reporting Only	I-Motor W/O (With: OD then, TP then)		15:50
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/Whan		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Veh No: SF7056G 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 ()

() 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: ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: _____

Date/Time: _____

MA1903072	1) AR: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100)	INC (\$30)
Contact No:	3) TP: Towing Fee	\$10/\$45
Damaged Portion:	4) FT: Follow-Through Survey	\$120
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey)	\$30
Inspector's Comments:	Enrolment against INC Only (ver 10 Jun 2009)	
Date:	6) TR: Re-inspection	\$75
2/3	7) NI: Idas DA + SMRT Survey	\$160
	8) NTUC Additional Services:	
	OD:	\$1
	* No: Courtesy Car / TP Allowance	\$10
	* No: Repair Co-ordination	\$25
	* No: Post Repair Inspection	\$5
	* No: DV / Collect Excess Coordination	\$20
	TP (NI) / TP (Non INC) e-mail/submit	\$0
	9) NI: Idas Mobile	
	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	24/04/2019 17:50
Date Of Accident	19/04/2019 00:35
Exact Location Of Accident	ROUNDAABOUT ALONG ARTILLERY AVE BEFORE CITY EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA8258Z
Insured/Policyholder	
Name Of Registered Owner	HOE LAY BOON
NRIC No	S1480228B
Email Address	ENOCHTEOZY1@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90916061
Alternative Phone No	OTHERS-96964647

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	CLA 180
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY BACK HOME
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094392967-01
Cover Note Number	

Driver

Name of Driver	TEO ZHENG YI ENOCH
NRIC No	S9021536A
Date Of Birth	20/06/1990
Occupation	INDOOR
Date Of Driving Pass	20/01/2019
Driving Experience	0 YEAR AND 2 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90916061
Fax Number	
Contact Number	OTHERS-96964647
EEmail Address	ENOCHTEOZY1@GMAIL.COM

Address	BLK 148 MEI LING STREET #07-105
Postcode	140148
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	SKF7056G
Vehicle Make/Model/Colour	PORCHE CAYENNE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
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: 24/4/19

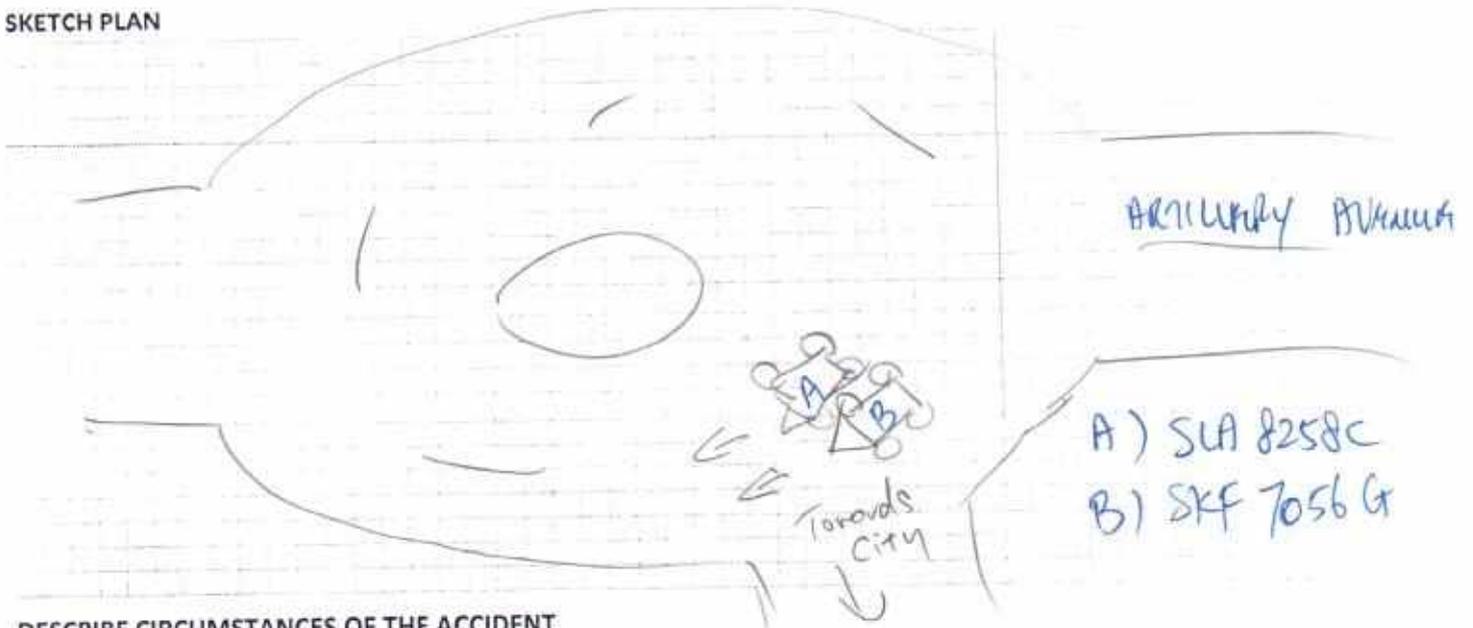


Driver's Signature
(If driver is not the policyholder)
Date & Time: 24/4/19
5.50pm



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

SKETCH PLAN



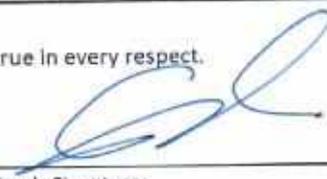
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

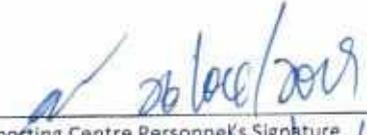
I was travelling along the roundabout along Artillery Road. While trying to exit the City exit, ~~the other~~ my vehicle and the other vehicle met a side collision.

DECLARATION

I/We declare the foregoing particulars are true in every respect.


 Policyholder's Signature
 Date & Time: 24/4/19


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 24/4/19
 5:30pm


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

Claim Handling

Accident MT/1041897

Policy No.	5094392967-01	Vehicle No.	SLA8258Z	GST Registration No.	
Certificate No.				Policyholder BRIC	S14802288
Policyholder Name	HDE LAY BOON	Cover Type	drive PREMIUM	Loading	6
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Contact No.(Home)	
Contact No.(Mobile)	90910062	Special Remark		eCode	No
Email Address		TCA	Yes No	eCode Reason	
RFK	Yes No	NCD Entitlement(%)	40	Private Hire	No
NCD Protection	No				

Accident Details

Report Date	25/04/2019 15:40	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	15/04/2019	Time of Accident hh:mm	13:25	Country of Accident	Singapore
Reporting Centre		Orange Force		DCM No.	
Accident Location	SOUNDABOUT ALONG ARTILLERY AVE BEFORE CITY EXIT				

Excess

Own Damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	2,500.00	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 Status Verified	Yes
GST Registration No.					
Modification History					

Policyholder Mailing Address

Address 1	BLK 148 #07-105	Address 2	MEI LING STREET	Address 3	SINGAPORE 140148
Address 4		Address Type	Singapore Address	Post Code	140148
Unit No.	07-105	Related Policy Number	5094392967-01		

OT Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	20/06/1990
Unnamed driver Name	TEO ZHENG VI ENOCH	Driver NIC	S9021526A	Driving Experience	0
Register Date of Driver License	31/01/2019	Driver Age	28	Contact No.(Office)	
Contact No.(Mobile)	99964647	Contact No.(Office)		Address 1	SINGAPORE 140148
Address 1	BLK 148 #07-105	Address 2	MEI LING STREET	Post Code	140148
Address 4		Address Type	Foreign Address		
Unit No.	07-105			Driver Insured Company	NTUC
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SLA8258Z		

Declaration

Breathalyser or Boyd Test Reading?	0 mg	Any injury?	Yes No
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Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	HDE LAY BOON	Insured NIC	S14802288	
Contact No.(Mobile)	90910062	Contact No.(Home)	NIL	Contact No.(Office)		
Email Address	inda.hdeh@gmail.com	OT Vehicle Number	SLA8258Z	TP Vehicle Number	SA77056G	
Claim Description	SLA8258Z / SA77056G ON 19 Apr 2019				Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Not at Fault	GIA report	Received	
Date Registered	25/04/2019 15:50	Repair Option	Preferred Workshop, Name unknown	Claim Date	25/04/2019 00:00	
Report Taken By	ROSLI WAHAB					

Save Submit

Attachment

Accident No.	MT/1041897	Claim No.	001
Last Doc. Received	Yes No	Upload Date	25/04/2019 15:50

Attachment	Updated By/Date	Category	Urgency	Description	Msg Sent (CO)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 15:50	Photos	Normal	Photos 2019-4-26	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 15:50	Photos	Normal	Photos 2019-4-26	
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NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 15:50	SAS	Normal	SAS 2019-4-26
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 15:50	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-26
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 15:50	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-26

Video List

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

Winn Lee

ACCIDENT STATEMENT

ACCIDENT DATE: 19/4/2019 (DD/MM/YYYY), TIME: 12:35 (HH:MM)
LOCATION: Roundabout along Artillery Ave before City exit.

1. DETAILS OF VEHICLE
 - a) VEHICLE NUMBER: SLA 8258 Z
 - b) INSURANCE COMPANY: NTUC INCOME
 - c) POLICY NUMBER: SO94392967
 - 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: JOURNEY HOME
 - 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: HOE LAY BOON (MALE / FEMALE)
 - b) NRIC/FIN/PASSPORT: S148022PB CONTACT: 90916061
 - c) ADDRESS: BLK 148 MEI LING ROAD STREET #07-105, S140148

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

- DRIVER
- a) NAME: TEO ZHENG YI ENOCH (MALE / FEMALE)
 - b) NRIC/FIN/PASSPORT: S9021536A CONTACT: 96964647
 - c) ADDRESS: BLK 148 MEI LING STREET #07-105 (S) 140148

- *d) DATE OF BIRTH: 20/06/1990 (DD/MM/YYYY)
- e) OCCUPATION: (INDOOR / OUTDOOR)
- f) DATE OF DRIVING PASS: 31/1/2019

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: GANGA TRAFFIC POLICE HQ

8. THIRD PARTY VEHICLE
 - a) VEHICLE NUMBER: SKF 7056G MODEL: Porsche Cayenne
 - b) DRIVER'S NAME: _____
 - c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

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

*No of passenger (including driver) (1)

*No of passenger (including driver) ()

*No of passenger (including driver) ()

Email = enochteozy1@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1480228B



Name
HOE LAY BOON

何丽文

Race
CHINESE
Date of birth
28-12-1961
Country of Birth
SINGAPORE
Sex
F

OWNER

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9021536A



Name
TEO ZHENG YI ENOCH

張正義

Race
CHINESE
Date of birth
20-06-1990
Country/Place of birth
SINGAPORE
Sex
M

DRIVER

1193874



NRIC No. S1480228B



Blood Group
O+
Date of issue
15-08-1993

Address
APT BLK 148 MEI LING STREET #07-105
SINGAPORE 140148

NRIC No: S1480228B Date: 16/12/2007 No: 5893419

6091261



NRIC No. S9021536A



Date of issue
31-12-2018

Address
APT BLK 148 MEI LING STREET
#07-105
SINGAPORE 140148

REPUBLIC OF SINGAPORE DRIVING LICENCE

IC No: S9021536A

TEO ZHENG YI, ENOCH

DOB: 20 Jun 1990

Valid until: 03 Feb 2019

002896692J



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS/ES

Class	Vehicle Description	EFFECTIVE DATE
Class 3	Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	03 Feb 2019

NP 428A

Licence No: S9021536A



My Desktop

Notice of Loss

Policy Query

Policy No. Date of Accident
 Vehicle No.(For Motor) 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"/>	5094392967-01		HOE LAY BOON	S14802285	GPC	drive PREMIUM	SLA8258Z	SLA8258Z	20/09/2018	19/09/2019

Continue