

NATIONAL Assessment Centre Services

Date In: 04/05/19	Job description	Date & Time Completed	Done by
Ref No: NA/C1219007850/13	SAS e-filing		
Veh No: 5GX928P	E-mail (within 8hrs, AIC 2hrs)		
DOA: 29/04/19 2220	i-Motor Claim Form		
OD: (7P) 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: 5HC8296A	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

NA/1903365	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			1st Bill	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			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection \$75			
	7) N1: 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			
Auditors' Comments :-	TP (N11): TP (Non INC) against INC \$20			
Cat. 1:	9) N12: Idac Mobile 30			
Cat. 2 / 3:	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	04/05/2019 10:36
Date Of Accident	29/04/2019 22:20
Exact Location Of Accident	BEDOK NORTH AVE 3 BLK 406 CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGX928P
Insured/Policyholder	
Name Of Registered Owner	HOE SWEE YING(HE XUEYING)
NRIC No	S7723139J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81685529
Alternative Phone No	OTHERS-81685529

Vehicle Particulars

Manufacturer	BMW
Model	-
Exact Purpose for which vehicle was being used at time of accident	PARKED VEH
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1761311801
Cover Note Number	

Driver

Name of Driver	TAN KOK PEOW
NRIC No	S7524637D
Date Of Birth	17/08/1975
Occupation	INDOOR
Date Of Driving Pass	30/09/1993
Driving Experience	25 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97476524
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 407 BEDOK NORTH AVE 3 #25-185
Postcode	460407
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
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

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	SHC8296A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	MR PANG
NRIC/Passport Number	
Contact Number	97711320
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

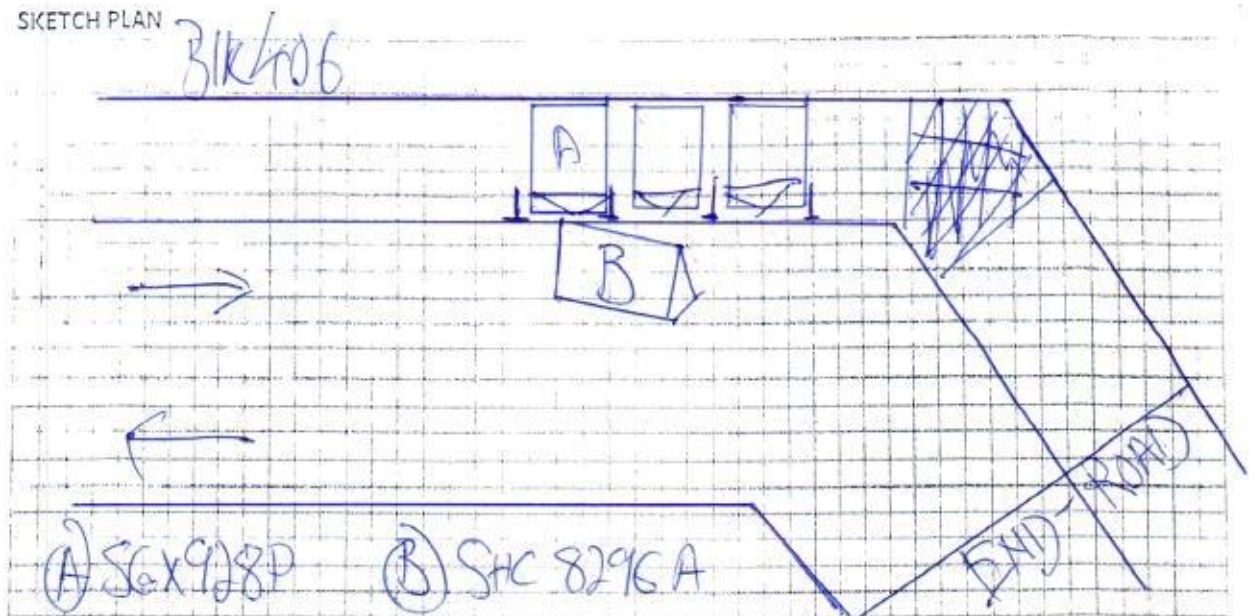
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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6. The report will be forwarded by the insurers of the GIA Records Management Centre 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




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

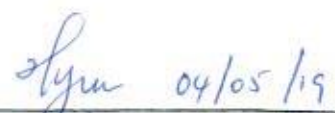
On 29-04-2019 @ ABOUT 8pm I park my vehicle on Bik/06 BROAD NORTH AVE 3 over night. The next morning when to collect my vehicle and see a note leave on my windscreen state that driver MR PANG ^{SHC8296A} admit hit onto my vehicle. I have called him and discuss and agree that we would file insurance claim. that all

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:

 04/05/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

~~SORRY~~
To owner of 56X928P

Mr. I am taxi driver

Mr. Ray, my contact 97711320

97711320. Sorry I had

trunk your ^{car} slightly damaged

the front of the front while moving

I will pay for the repair

of the touch-up paintwork

Thank you

29/4/19

VEHICLE NO:

SGX 928P

MAKE & MODEL:

BMW 5 Series

DATE OF ACCIDENT

29 / 04 / 2019

TIME OF ACCIDENT

AM / PM

10:22 PM

LOCATION OF ACCIDENT

BEUK NORTH AVE 3 Bk 406 CAR PARK

Exact Purpose use during accident

NAME OF OWNER

HOE SWEE YING

TELP NO

81685529

NRIC

S7723139J

CLAIM TYPE

OD

/ (THIRD PARTY)

Reporting Only

INSURANCE CO.

CHINA TAIPING

TYPE OF COVERAGE

(Comprehensive) / Third Party / Third Party Fire & Theft

POLICY NO.

DMPCS N17631801

NAME OF DRIVER

As above / If No.

TAN KOK DEOW

NRIC

S7524637D

Any passengers.

DATE OF BIRTH

17 / 08 / 1975

OCCUPATION

Outdoor / Indoor

DATE OF DRIVING PASS

20 / SEP / 1993

GENDER

Male

Female

CONTAC NO.

97476524

Office,

Home,

ADDRESS

Bk 407 BEUK NORTH AVE 3 #25-185

DRIVER HAVE ANY OWN Vehicle

NO / If yes, Reg No.

RELATIONSHIP

Employee / If No.

SPONGER

WEATHER CONDITION

Clear

/ Raining

/ Other,

ROAD SURFACE

Dry

/ Wet

/ Other,

ANY INJURIES

No / If yes, Who?

CONTAC NO.

97476524

POLICE REPORT

No / If yes, Where?

VEHICLE B NO.

SHC 8296A

Any Passenger,

NAME

MR PAUG

CONTAC NO.

VEHICLE C NO.

Any Passenger,

VEHICLE D NO.

Any Passenger,

VEHICLE E NO.

Any Passenger,

VEHICLE F NO.

Any Passenger,

ANY WITNESS

WITNESS CONTACT NO.

Have you been approach by unknown person soliciting (s) /

offering accident claims assistance?

YES / NO

PARTICULAR WORKSHOP

Sme Motor Pte Ltd

TELP NO

1 Kaki bukit ave 6 #02-15

CONTACT PERSON

Autobay @ kaki bukit

FAX NO.

Singapore 417883

Telp, 67476106 (6 lines)

Fax, 67442368

FAX:

67479402

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7524637D



Name

TAN KOK PEOW

陈国彪

Race

CHINESE

Date of birth

17-08-1975

Sex

M

Country of birth

SINGAPORE

S7524637D

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S7524637D

Name

TAN KOK PEOW

Birth Date: 17 Aug 1975

Issue Date: 10 Sep 2003



3766888

NRIC No. S7524637D



Date of issue

08-09-2005

APT BLK 407 BEDOK NORTH AVENUE 3 #25-185
SINGAPORE 460407

NRIC No. S7524637D

Date: 28-05-2007

No: S7524637D

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS:

Class 3

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

PASS DATE

30 Sep 1993

NP 428A





中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MX1/BR SN
AN0498A
Cov. Type: C

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.	DMPCSN1761311801	Engine No: 20880511S638448 Chassis No: WBSFV92050DX96615
1. Index Mark and Registration Number of Vehicle	SGX928P	
2. Name of Policy Holder	HOB SWEE YING (HE XUEYING)	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	21 DECEMBER 2018	NAMED DRIVERS EX SECT. I\$2,500.00 EXCESS SECT. I (OUTSIDE SINGAPORE).....\$55,000.00 EX ON WINDSCREEN\$500.00
4. Date of Expiry of Insurance	20 DECEMBER 2019	
5. Persons or Classes of Persons entitled to drive *	<p>AS PER NAMED DRIVER(S) STATED BELOW.</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>THE INSURED & TAN KOK FROM DRIVING ONLY</p>	
6. Limitations as to use: *	<p>USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.</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.

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).
Please see reverse



Countersigned By:

Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com