

NATIONAL Assessment Centre Services

Date In: 17/06/19	Job description	Date & Time Completed	Done by
Ref No: NA/21P 19010695/13	SAS e-filing		
Veh No: 4M8340B	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 14/06/19 1120	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: (TWINCAR	Tel:	Fax:
TP Particulars:	Veh No: 5LS8474X	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

NA1904521	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) 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) RT : Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 1:	6) TR : Re-inspection \$75		
Cat. 2 / 3:	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		
	TP (N11) : TP (Non INC) against INC \$20		
	9) N12: Idac 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 willful 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	17/06/2019 16:01
Date Of Accident	14/06/2019 11:20
Exact Location Of Accident	BAYFRONT AVE NEAR MARINA BAY OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YM8340B
Insured/Policyholder	
Name Of Registered Owner	UNITED MOTOR SERVICES PTE LTD
Co Reg No	199205036R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97226809

Vehicle Particulars

Manufacturer	HINO
Model	-
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	THIRD PARTY
Fleet Policy	NO
Policy Number	SD18V08316/VCZ/R08
Cover Note Number	

Driver

Name of Driver	HO SWEE WOA
NRIC No	S1832964F
Date Of Birth	10/11/1967
Occupation	OUTDOOR
Date Of Driving Pass	20/05/2003
Driving Experience	16 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94513318
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 195C PUNGGOL RD
	#12-534
Postcode	823195
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	SLS8474X
Vehicle Make/Model/Colour	
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

IMPORTANT NOTICE

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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.



X
Policyholder's Signature
Date & Time:

Company chop and sign


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

 17/06/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

Marina Blvd

Marina Bay Open Carpark

Circus

Bayfront Ave.

A - 4M8340B

B - 5LS8474X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14/06/19 at @ 1120hrs, I parked my vehicle (4M8340B) along Bayfront Ave after Marina Bay Open carpark on the left lane to submit some documents after delivery at the Circus. When I come back to my lorry, as I was about to move off, a vehicle (5LS8474X) from behind collided onto the rear portion of my lorry.

DECLARATION

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

X

Policyholder's Signature

Date & Time:

Company stamp and sign

Driver's Signature

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

Vehicle No.	YM 8340B	Model / Make	hino
Date of Accident	14/06/19		
Time of Accident	1120 HRS		
Location of Accident	Bayfront Ave near Marina Bay Open Carpark.		
Exact purpose use during accident	Commercial Used.		
Name of Owner	United Motor Services Pte Ltd.		
Telephone No.	H/P: 9722 6809	Home:	Office:
NRIC	199205036R		
Address	66, Loyang Way (S) 508756		
Claim type	OD <u>THIRD PARTY</u>	REPORTING ONLY	
Insurance Company	Liberty		
Type of Coverage	Comprehensive <u>Third Party</u>	Third Party / Fire / Theft	
Policy No.	9018V08316 / VCZ / R08		
Name of Driver	As Above If No, Ho Swee Waa.		
NRIC	S 1832964 F.	Any Passengers:	N.A.
Date of birth	10/11/1967.		
Occupation	<u>Outdoor</u> / Indoor		
Driving License Pass Date	20/05/2003		
Gender	<u>Male</u> / Female		
Contact No.	H/P: 9451 3318	Home:	Office:
Address	BLK 195C Punggol Road #12-534 (S) 823195		
Driver have any own vehicle	<u>No</u> , If yes, Reg No.		
Relationship	<u>Employee</u> , If no, state		
Weather condition	<u>Clear</u> Raining Other		
Road Surface	<u>Dry</u> Wet Other		
Any Injuries	<u>No</u> , If Yes, Who?		
Name And Contact No.			
Name And Contact No.			
Police Report	<u>No</u> , If Yes, Where?		
Vehicle B No.	SL8 8474 X.	Any Passengers:	N.A.
Name of Driver		Contact No.:	
Vehicle C No.		Any Passengers:	
Vehicle D No.		Any Passengers:	
Vehicle E no.		Any Passengers:	
Vehicle F No.		Any Passengers:	
Vehicle G No.		Any Passengers:	
Witness Name	N.A.	Witness Contact:	N.A.
Accident Portion	Rear Portion.		
Camera Recorder	Yes / <u>No</u>		
Email Address	-		
PARTICULAR WORKSHOP	Twincar		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Zi Tong		
FAX NO	6741 0510		
WORKSHOP Email ADDRESS	Sales@n5i.com.sg		

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1832964F**

Name: **HO SWEE WOA**

Birth Date: **10 Nov 1967**

Issue Date: **16 Dec 2002**

Barcode: 000003075E

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1832964F**

Name: **HO SWEE WOA**

何瑞儒

Race: **CHINESE**

Date of Birth: **10-11-1967**

Country of Birth: **SINGAPORE**

Sex: **M**

For LKK/NAC Use Only

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

Class	Description	PASS DATE
Class 3	Motor cars and Motor Tractors the weight unladen does not exceed 2500 kg	19 Dec 2001
Class 4	Heavy Motor Cars and Motor Tractors the weight unladen exceeds 2500 kg	20 May 2003

S1832964F

S / No. 9000000471

Licence No. **S1832964F**

MP 428A

For LKK/NAC Use Only

Barcode: 1425781

NRIC No. **S1832964F**

Blood Group: **O+**

Date of issue: **14-11-1993**

APT BLK 195C PUNGGOL ROAD #12-534

SINGAPORE 823195

NRIC No. **S1832964F**

Date: **27-05-2006**

No. **5317512**

For LKK/NAC Use Only



Liberty Insurance Pte Ltd
 Registration no 199002791D
 51 C&D Street
 #03-00 Liberty House
 Singapore 069428
 Tel: (65) 5221 8611 Fax: (65) 5225 6890
 Website: <http://www.libertyinsurance.com.sg>

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1950
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No

SD18V08316 /VCZ /R08

Form

MZ407

Date Of Issue

03-DEC-2018

1. Index Mark and Registration No. of Vehicle:

YMB340B

2. Chassis number of Vehicle:

FD8JJK10144

3. Name of Policyholder:

UNITED MOTOR SERVICES PTE LTD

4. Effective date of Commencement of Insurance for the purpose of the Act:

01-DEC-2018 00:00 AM

5. Date of Expiry of Insurance:

10-SEP-2019 23:59 PM

6. Persons or Classes of Persons entitled to drive*:

Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.

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.

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.

7. Limitations as to use*:

A) Use for carriage of passengers or goods in connection with the Policyholder's business.

B) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.

8. Policy does not cover:

A) Use for racing, pace-making, reliability trials or speed-testing.

B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

C) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 25 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings.

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).

For and on behalf of
LIBERTY INSURANCE PTE LTD
 Approved Insurers

Authorised Signature

For Information only:

COVERAGE:

Third Party Only

SUM INSURED:

EXCESS:

Section II: S\$2000 Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers: S\$3000

FINANCE COMPANY:

PRODUCER NAME:

AVA INSURANCE BROKERS PTE LTD

PLSL/PLSL03-DEC-18

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03-DEC-18