

# NATIONAL Assessment Centre Services.

[ver 1 Jan'09]

MNA 119080864

Date In: 21/06/2019 13:48	Job description	Date & Time Completed	Done by
Ref No. NA/LPC19010980/h4	SAS e-filing		
Veh No. 98B4563G	E-mail (within 3hrs, AIC 2hrs)		
DDA 20/06/2019 16:35	I-Motor Claim Form		
OD (TP) Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksn		

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

TP Particulars: Vch No: S4D 7006Y 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 repolier.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

Remarks: (INC Module: 07100016)

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

2) QC Check / Post Repair Inspection ( )

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

Injury: ( )

Date/Time: ( ) Actions: ( )

## Comments Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors Comments:

Ref 1:

Ref 2/3:

Invoice Preparation Charge	Amo (\$)	Payable (\$)
1) AR: Accident Reporting (\$30);		
2) DA: Damage Assessment (\$100); INC (\$50)		
3) TP: Towing Fee \$40/\$43		
4) FT: Follow-Through Survey \$120		
5) FT: Follow-Through Survey (Resurvey) \$30		
For claiming against INC Only (ver 10 Jan 2009)		
6) TR: Re-Inspection \$75		
7) NI: Idan DA + SMRT Survey \$160		
8) NTUC Additional Services:		
ON:		
*NS: Courtesy Car / Tpt Allowance \$5		
*NG: Repair Coordination \$10		
*NF: Post Repair Inspection \$25		
*NR: DV / Collect Excess Coordination \$5		
TP (N11): TP (Inc in INC) against INC \$20		
9) N12: Idan Mobile \$0		
Invoice dated	Fax Charged	
Invoice dated	Fax 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	21/06/2019 13:48
Date Of Accident	20/06/2019 16:35
Exact Location Of Accident	OPEN CARPARK OF BLK 256 JURONG EAST STREET 24
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB4563G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	EFFICIENT NETWORKS INTERNATIONAL (SINGAPORE) PTE L
Co Reg No	200803459R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68489318

### Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	COMMERICAL
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	LONPAC INSURANCE BHD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	Z19VC05002719
Cover Note Number	

### Driver

Name of Driver	RAJADHESINGU SENGATHIR
NRIC No	G6567975U
Date Of Birth	02/06/1984
Occupation	OUTDOOR
Date Of Driving Pass	14/08/2018
Driving Experience	0 YEAR AND 10 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-83075227
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	10 UBI CRESCENT #01-63 UBI TECHPARK
Postcode	408534
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 - MAJOR/MINOR RD
Weather Conditions	RAINING
Road Surface	WET

#### 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 THE STATEMENT ATTACHED .

#### 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	SHD7006Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
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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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:

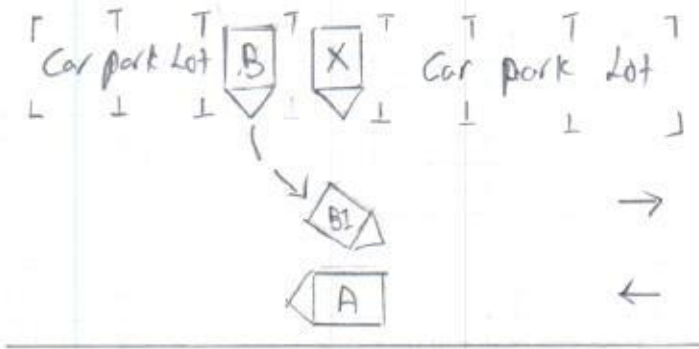
*P. Sanyal*

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

*[Signature]*

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

SKETCH PLAN



A = GBB 4563G

B = SHD 7006Y

Open Car of

Bik 256

Jurong East  
Street 24

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attach

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.:

On 20.06.19 at about 16:35 hours along Open Carpark of Block 256 Jurong East Street 24. I was travelling straight on my lane, suddenly I heard a loud bang from behind. When I alighted I realise it was vehicle (B) coming out from carpark lot 107 without checking oncoming traffic and collided onto rear right hand side portion of my vehicle (A). I wish to state that I have 3 passengers inside my vehicle (A).

Vehicle (A): GBB 4563G

Vehicle (B): SHD 7006Y

R. Sany



## SINGAPORE ACCIDENT STATEMENT

Accident Date: 20/06/2019		Time: 16:35		(hh:mm) 24 hr format	
Location Open carpark of BIK256 Jurong East Street 24					
Vehicle Number GBB4563G					
Insured Name Efficient Networks International (Singapore) Pte Ltd.					
NRIC / FIN 200803459R		Contact Number 6848 9318			
Make Nissan		Model Cabstar			
Are you claiming under your own insurance policy for repair to your vehicle?					
( ) Yes If No, Pls select: ( <input checked="" type="checkbox"/> ) Third Party ( ) Reporting					
Insurance Company Longac					
Type of Policy ( ) Comprehensive ( ) Third Party Fire & Theft ( <input checked="" type="checkbox"/> ) TP Only					
Policy Number 219VC05002719					
Name of Driver Rajadhesingu Sengathir ( ) Same as Insured					
NRIC / FIN G6567975U		Contact Number 8307 5227			
Date of Birth 02/06/1984					
Driving Pass Date 14/08/2018					
Occupation ( ) Indoor ( <input checked="" type="checkbox"/> ) Outdoor					
Gender ( <input checked="" type="checkbox"/> ) Male ( ) Female					
Email Address edwin.tan@efficient.sg / richard.gu@efficient.com ) NO EMAIL					
Address of Driver 10, Ubi Crescent, #01-63, Ubi Techpark, Singapore 408564					
Was driver an employee of the Insured's Company? ( <input checked="" type="checkbox"/> ) Yes ( ) No					
If No, Relationship of the Driver with the Insured					
( ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling					
Does the Driver Own Any Other Vehicle? ( ) Yes ( ) No					
If Yes, Vehicle Registration Number of Driver's Own Vehicle					
Insurance Company of Driver's Own Vehicle					
Weather Conditions ( ) Clear ( <input checked="" type="checkbox"/> ) Raining ( ) Others					
Road Surface ( ) Dry ( <input checked="" type="checkbox"/> ) Wet ( ) Others					
Was any foreign vehicle involved in this accident? ( ) Yes ( <input checked="" type="checkbox"/> ) No					
Was anybody injured in the accident? ( ) Yes ( <input checked="" type="checkbox"/> ) No					
If yes, injured detail -					
Was there any video captured by Car Camera? ( ) Yes ( <input checked="" type="checkbox"/> ) No					
Was the Accident reported to the Police? ( ) Yes ( <input checked="" type="checkbox"/> ) No If yes attach police report					
DETAILS OF 3 <sup>rd</sup> party		Name / Nric		Contact	
Veh B SHD 7006Y					
Veh C					
Veh D					
Veh E					
Veh F					

Passenger 1: Arif (male)

Passenger 2: Pandiya (male)

Passenger 3: Santhanam (male)

3 passenger + 1 Driver



# WORK PERMIT

Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer

EFFICIENT NETWORKS INTERNATIONAL (SINGAPORE) PTE. LTD.



Name

RAJADHESINGU SENGATHIR

Work Permit No

0 3457 105-

Spec

CONSTRUCTION



K1316441

For LKK/NAC Use Only



G3545639

driver

## VISIT PASS Immigration Regulations

22-04-2015

Name

RAJADHESINGU SENGATHIR

File

G8567975U

Date of Birth

02-06-1964

Nationality

INDIAN

Sex

M

Download SGWorkPass  
App to check status



For LKK/NAC Use Only

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED  
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: G6567975U

Name: RAJADHESINGU SENGATHIR

Birth Date: 02 Jun 1984

Issue Date: 09 Dec 2017

Valid Till: 17/01/2023

002751835E



For LKK/NAC Use Only

G6567975U  
driver

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

Class 3 Motor cars <= 3500 kg with <= 7 passengers, exclusive of the driver, and motor tractors/vehicles <= 2500 kg

EFFECTIVE DATE

14 Nov 2018

For LKK/NAC Use Only

G6567975U

S / No. 9000308654

NP 428A




**LONPAC INSURANCE BHD** (S98FC5635C)

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 199555.

Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-C

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE.  
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE).  
 ROAD TRANSPORT ACT 1987 (MALAYSIA).  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No.: Z19VC05002719

Type of Cover : THIRD PARTY

1. Index Mark and Vehicle Registration Number

 NISSAN CABSTAR 3.0 5M/T ABS 2DR 2WD 3.4T  
 - GBB4563G

2. Name of Policy Holder

 EFFICIENT NETWORKS INTERNATIONAL (SINGAPORE)  
 PTE LTD

 3. Effective Date of the Commencement of Insurance  
 for the purpose of the Act

17/06/2019

4. Date of Expiry of the Insurance

16/06/2020

5. Person To Drive

(A) THE POLICYHOLDER.

(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS/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

USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.

USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.

USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES.

THE POLICY DOES NOT COVER:-

USE FOR HIRE OR REWARD OR FOR RACING, PACEMAKING, RELIABILITY TRIAL OR SPEED TESTING.

USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

\* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

 CHIEF EXECUTIVE  
 (Singapore Branch)

User ID: HSLIM

Date Issued: 17/06/2019