

NATIONAL Assessment Centre Services [ver 1 Jan'09]

Date In: 21/06/2019 15:06	Job description	Date & Time Completed	Done by
Ref No: NA/TM19010996/h4	SAS e-filing		
Veh No: SLW 6769L	E-mail (within 2hrs, AIC 2hrs)		
DDA: 20/06/2019 14:40	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/WR511		

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

TP Particulars: Veh No: 85P289683 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 repairer.

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

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

Remarks: (INC 110/115/6708/6016)

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NA1904639

Comments Particulars	Invoice Particulars (Charged)	Am't (\$)	PAID (\$)	Add'l bill
Driver/Owner:	1) AR: Accident Reporting (\$30);	30.00		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$50)			
Damaged Portion:	3) TP: Towing Fee \$40/\$45			
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey \$120			
Auditors Comments:	5) PT: Follow-Through Survey (Resurvey) \$30			
Est. 1:	6) TR: Re-Inspection \$75			
Est. 2/3:	7) NI: Idan DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	OD:			
	*N5: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Coordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
	TE (N11): TP (Non INC) against INC \$20			
	9) N12: Idan Mobile \$0			
	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	21/06/2019 15:06
Date Of Accident	20/06/2019 14:40
Exact Location Of Accident	DRIVE WAY AT Ngee ANN CITY ENTRANCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW6709L
Insured/Policyholder	
Name Of Registered Owner	SUPREME LEASING & LIMOUSINE PTE LTD
Co Reg No	201710190R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-84066847

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	19-M1000894-R02
Cover Note Number	

Driver

Name of Driver	R GHAZALI BIN TALIB
NRIC No	S1777850A
Date Of Birth	01/09/1966
Occupation	OUTDOOR
Date Of Driving Pass	27/08/1994
Driving Experience	24 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84066847
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	APT 606 WOODLANDS RING ROAD #11-277
Postcode	730606
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE

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

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	SJP2968S
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

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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 lodging 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
Date & Time:

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

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

Pls email to
my3solution@gmail.com

SINGAPORE ACCIDENT STATEMENT

Accident Date:	20/6/19	Time:	14.42	(hh:mm) 24 hr format
Location	Driveway at Ngee Ann City entrance			
Vehicle Number	SLW 6709L			
Insured Name	SUPREME LEASING & LIMOUSINE PTE LTD			
NRIC/FIN	201710190R	Contact Number		
Make	TOYOTA	Model	WISH 1.8 CVT	
Are you claiming under your own insurance policy for repair to your vehicle?				
() Yes If No, Pls select: (/) Third Party () Reporting				
Insurance Company	TOKIO MARINE			
Type of Policy (/)	Comprehensive	()	Third Party Fire & Theft	() TP Only
Policy Number	19-M1000894-R02			
Name of Driver	R GHAZALI BIN TALIB () Same as Insured			
NRIC/FIN	S1777850A	Contact Number	840 66 847	
Date of Birth	01-09-1966			
Driving Pass Date	27-AUG 1994			
Occupation ()	Indoor	(/)	Outdoor	
Gender (/)	Male () Female			
Email Address	() NO EMAIL			
Address of Driver	BLK 606 WOODLANDS RING ROAD #11-277 S (730 606)			
Was driver an employee of the Insured's Company? () Yes () No				
If No, Relationship of the Driver with the Insured <u>Hirer</u>				
() 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 () Raining () Others				
Road Surface (/) Dry () Wet () Others				
Was any foreign vehicle involved in this accident? () Yes (/) No				
Was anybody injured in the accident? () Yes (/) No				
If yes, injured detail				
Was there any video captured by Car Camera? () Yes (/) No				
Was the Accident reported to the Police? () Yes (/) No If yes attach police report				
DETAILS OF 3 rd party Name / Nric Contact				
Veh B	SJP 29685			
Veh C				
Veh D				
Veh E				
Veh F				

Include Driver - female (passenger)
unknown.

Land Transport Authority



PDVL/TDVL
33 888 8888
283059



VOCATIONAL LICENCE
 Licence No : S1777850A
 Name : R GHAZALI BIN TALIB
 Issue Date : 14/5/2011
 Please visit www.lta.gov.sg to check the status of this vocational licence

Drive SLV 679L

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	14/06/2011



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1777850A



Name
R GHAZALI BIN TALIB

عزالي بن طاليب

Race
MALAY

Date of Birth 01-09-1966 Sex M

Country of Birth
SINGAPORE



Driver SLW 6709L

1815633



NRIC No. S1777850A



Blood Group A+ Date of issue 22-03-1994

BLK 606 WOODLANDS RING ROAD #11-277
SINGAPORE 730606

NRIC No: S1777850A Date: 04/01/2009 No: 6159061

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1777850A**
 Name: **R GHAZALI BIN TALIB**
 Birth Date: **01 Sep 1966**
 Issue Date: **09 Oct 2003**

000874962E



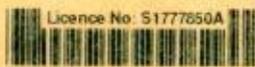
Driver SLW 6709L

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

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	20 Sep 1994
Class 2A	Motorcycles between 201 cc and 400 cc	14 Nov 1995
Class 2	Motorcycles exceeding 400 cc	10 Jan 1997
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	27 Aug 1994
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	03 Sep 1997

NP 428A

Licence No. S1777850A




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)**
Policy No.: 19-MI000894-R02 (Private Motor Car)

- | | | |
|---|--|---------------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SLW6709L | Chassis No.: JTDGG20W40J008803 |
| 2. Name of Policyholder | SUPREME LEASING & LIMOUSINE PTE LTD | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 25/05/2019 | |
| 4. Date of Expiry of Insurance | 14/10/2019 | |
| 5. Persons or Class of Persons entitled to drive* | Any person who is driving on the Policyholder's order or with their permission.
The hirer.
Any other person who is driving on the hirer'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. 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.

6. Limitations as to use*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.
 Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.
 The Policy does not cover:-
 1) Use for racing, pace-making, reliability trial or speed-testing.
 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost/destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION
Account: 2500DDA

Insurance Plan:	Comprehensive Approved Workshop Plan	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Excess - All Claims	SGD 1,800
	Windscreen Excess	SGD 100
Financial Interest:	SING INVESTMENTS & FINANCE LTD	

Tokio Marine Insurance Singapore Ltd.
Authorised Signature