

NATIONAL Assessment Centre Services

Form 1 (2019)

Date In: 25/06/2019 18:08	Job description	Date & Time Completed	Done by
Ref No: NA/INC19011234/K	SSAS e-illing		
Veh No: SJ54745L	E-mail (within 4hrs, AIC 2hrs)		
D.O.A: 28/03/2019 14:45	i-Motor Claim Form	MT/1049288-002	26/6/19 10/13
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: (Tel: (Fax: (
TP Particulars:	Veh No: SCR6811G	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

NA1904719	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
		Inc Bill	Add'l Bill
Claimant's Particulars:	1) AR: Accident Reporting (\$30)		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claimant against INC Only (wef 10 Jan 2019)		
QC Checked by (Engr-In-Charge):	6) TR: Re-inspection \$75		
	7) NI: Idan DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	(211)		
	*N3: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	*N11: TP (Non INC) against INC \$20		
	*N12: Idan Mobile \$0		
Cal 1:	Invoice dated	Pen Charged	
Cal 2/3:	Invoice dated	Ind Charged	

07-MAY-2019 16:39

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	25/06/2019 18:08
Date Of Accident	28/03/2019 14:45
Exact Location Of Accident	SENNETT AVENUE OUTSIDE UNIT 65
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ4745L
Insured/Policyholder	
Name Of Registered Owner	JAYAPALSARA75 SERVICES
Co Reg No	53350595W
Email Address	SARADHA75@GMAIL.COM
Mobile Phone No	(LOCAL) +65-84998835
Alternative Phone No	OFFICE-84998835

Vehicle Particulars

Manufacturer	HONDA
Model	ACCORD 2.0 A
Exact Purpose for which vehicle was being used at time of accident	WORK
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5086404225-01
Cover Note Number	

Driver

Name of Driver	SARATHA D/O JAYAPAL
NRIC No	S7507922B
Date Of Birth	19/02/1975
Occupation	OUTDOOR
Date Of Driving Pass	15/12/2007
Driving Experience	11 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-84998835
Fax Number	
Contact Number	OTHERS-84998835
Email Address	SARADHA75@GMAIL.COM

Address	BLK 315 BUKIT BATOK STREET 32 #05-101
Postcode	650315
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	CHAIN COLLISION
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	3
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?	YES
If Yes, Please state which Police Station	
Police Station Name	HONG KAH NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 370 BUKIT BATOK STREET 31 , POSTCODE: 650370 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5679999 - FAX NO: 65652508
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20190426/2046

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	SCR6811G
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

UNKNOWN

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

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. 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.

JAYAPALSARA75 SERVICES
REGN NO: 53350595W

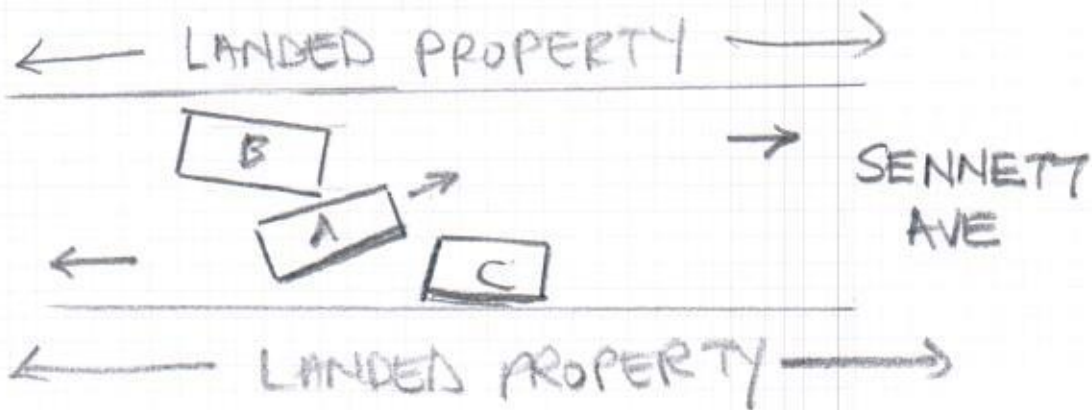
Policyholder's Signature
Date & Time:

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

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

25/6/2019

SKETCH PLAN



A - MY CAR (SJI4745L)

B - SCR 6811G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT C - UNKNOWN VEHICLE

P/S Refer to the Police Report
T/20190426/2046

DECLARATION

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

JAYAPALSARATHI SERVICES
REGN NO: 83360899W

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.:

28/6/2019

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Business) of JAYAPALSARA75 SERVICES (53350595W)

Date: 25/11/2016

Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position
SARATHA D/O JAYAPAL	S7507922B	SINGAPORE CITIZEN	315 BUKIT BATOK STREET 32 #05-101 SINGAPORE (650315)	ACRA	25/11/2016 Owner
S ANAND	S1735400J	SINGAPORE CITIZEN	99 CASHEW ROAD #09-05 CASHEW HEIGHTS SINGAPORE (679670)	ACRA	18/11/2016 Owner

Withdrawn Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position	Date of Withdrawal
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Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

PLEASE NOTE THE INFORMATION HEREIN CONTAINED IS EXTRACTED FROM FORMS/TRANSACTIONS FILED WITH THE AUTHORITY

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA161125152719

DATE : 25/11/2016

This is computer generated. Hence no signature required.

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Date: 25/11/2016

Business Profile (Business) of JAYAPALSARA75 SERVICES (53350595W)

The Following Are The Brief Particulars of :

Name of Business : JAYAPALSARA75 SERVICES

Former Name(s) if any :

Date of Change of Name :

Registration No. : 53350595W

Registration Date : 18/11/2016

Commencement Date : 18/11/2016

Status of Business : Live

Status Date : 18/11/2016

Renewal Date :

Expiry Date : 18/11/2019

Renewal via GIRO : NO

Constitution of Business : Partnership

Principal Place of Business : 99 CASHEW ROAD
#09-05
CASHEW HEIGHTS
SINGAPORE (679670)

Date of Change of Address :

Principal Activities

Activities (I) : PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERATOR AND TRISHAWS) (49219)

Description :

Activities (II) :

Description :

Particulars of Authorised Representative(s)

Name	ID	Nationality	Address	Address Source	Date of Appointment
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Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position
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Our Ref: MT/CA/TP/059/1049288-001/CQ/VU

17 Jun 2019

JAYAPALSARA75 SERVICES
99 CASHEW ROAD
#09-05 CASHEW HEIGHTS
SINGAPORE 679670

Dear Policyholder

CLAIM NUMBER: MT/1049288-001

ACCIDENT INVOLVING SJJ4745L / SCR6811G on 28 Mar 2019

We would like to inform you that a claim for S\$5,221.80 has been made against your motor policy.

We need to respond to this claim within seven days. We would appreciate it if you could provide us:

- a. additional evidence, if any, such as accident photographs, video clips or witnesses' statement
- b. information on whether you are making a claim against the other party

We wish to remind you that under this motor insurance policy, you are required to report the accident, whether there is damage or not, within 24 hours or the next working day after the accident at any of our reporting centres. If you have not done so, please report this accident to us immediately. Otherwise, we regret to inform you that we may not be able to handle the claim on your behalf.

You need not respond to us if you have already reported the accident and do not have any further information.

We wish to remind you not to admit liability, make offer or payment without informing us and getting our approval. If you are making a claim against another party or have instructed your workshop or lawyers to act on your behalf, please update us on the developments. This is important as any liability undertaken by you may have serious implication on the third party claim against you, and may result in us not being able to handle the claim for you.

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at motor@income.com.sg.

Yours sincerely



Goh Peng Hong
Manager
Motor Insurance



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 4883
www.police.gov.sg

Report No : TP/IP/23743/2019
Date : 3 June 2019

Saratha D/O Jayapal
Blk 315 Bukit Batok Street 32
#05-101
Singapore 650315

RECIPIENT'S COPY

STERN WARNING

1. Investigations against you, Saratha D/O Jayapal, S7507922B, into the following offence(s):

ALLEGED OFFENCE(S)				
S/No	Offence	Legislation	Date & time committed	Place
1	Careless Driving	Rule 29 of the Road Traffic Rules	28/03/2019 @ 1449 hrs	Sennett Avenue
2	Failing to stop after an accident	Section 84(1) of the Road Traffic Act Chapter 276		
3	Failing to report an accident within 24hours	Section 84(2) of the Road Traffic Act Chapter 276		

have been completed.

2. After careful consideration of the facts of the case, and with the concurrence of the Attorney-General's Chambers, you are warned to refrain from any criminal conduct. If you commit any offence in future, the same leniency may not be shown towards you.

3. If you have any clarification, you may contact the Investigation Officer, SSS Leslie Tan at office number: 6547 6144.


CHEW SOOK YENG, ASP
for HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE

3 June 2019
Date



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 4883
www.police.gov.sg

NOTE

1. This stern warning is issued to you because while an assessment that you have committed the offence(s) listed in paragraph 1 has been made, a decision has been taken not to prosecute you in court for the offence(s).
2. This stern warning:
 - (a) does not amount to a conviction for an offence or a finding of guilt by a court of law;
 - (b) does not mean that you now have a criminal record of the offence(s) listed in paragraph 1;¹
 - (c) will not be raised by the Prosecution as a criminal record against you in any future court matters for purposes of enhancing a sentence; and
 - (d) does not affect any of your legal rights, interests, or liabilities.

¹ As defined in the Registration of Criminals Act (Cap 268, 1985 Rev Ed.)



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 6144 ✓
Fax +65 6547 4883 ✓
www.police.gov.sg

Our Ref : TP/IP/23743/2019
Date : 24 April 2019

**REMINDER
(URGENT)**

**JAYAPALSARA75 SERVICES
99 CASHEW ROAD
#09-05
SINGAPORE 679670**

Dear Sir / Madam

**ALLEGED HIT-AND-RUN ACCIDENT INVOLVING A PARKED CAR SCR6811G & YOUR VEHICLE
SJJ4745L ALONG SENNETT AVENUE OUTSIDE UNIT 65 ON 28.03.2019 AT ABOUT 1449HRS**

Our investigations showed that you are the registered owner/ driver of **SJJ4745L**, which is alleged to have been involved in a **hit and run accident**.

2 You are required to provide the particulars of the driver on the above date and time within 14 days of receipt of this letter. Under the provisions of the Road Traffic Act, it is an offence not to provide the driver's particulars, and the owner can be liable to a fine of up to \$1,000/- or 6 months' imprisonment.

3 In addition, please inform the driver to lodge an online Police Report of a Traffic Accident (NP168) using SingPass via the SPF Electronic Police Centre ¹ (<http://www.police.gov.sg/epc>). Alternatively, the report may be lodged at any Police Post or Neighbourhood Police Centre. Do note that failure to lodge a report may have an adverse effect against the involved party.

4 The information given by the driver in the report will be carefully considered. The driver may not be called upon an interview if the information provided is sufficient for our investigation. If you have video evidence, you can send it to the Investigation Officer (IO) via email Leslie_JL_Tan@spf.gov.sg. If the file size is too big, you can make arrangements with the IO at her office number 65476144 during office hours for a convenient method of retrieval.

Yours faithfully,

**PUTEH BTE SHARIFF (DSP)
CHIEF INVESTIGATION OFFICER / TRAFFIC POLICE**

This is a computer-generated letter. No signature is required.

Particulars of the driver SJJ4745L on 28.03.2019 (TP/IP/23743/2019):-

Name :	NRIC / FIN / PP No.	Address :
Contact No :		

I affirm that the information I gave above is true and correct.

Name / Contact No of Registered owner Signature of Registered vehicle owner Date

*Please mail, fax or email a soft copy of the completed form, addressed to the Investigation Officer.

¹ For the purpose of lodging this report, please select 'Yes' for "Is this a Hit and Run accident?" under "Step 2: Accident Info", even if the driver is not aware of any accident".



SINGAPORE POLICE FORCE



T/20190426/2046

1 of 3

Report No. T/20190426/2046

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/04/2019 13:48	Vide Report No.:	Station Diary No.: 18
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Informant's Particulars

Name of Informant: SARATHA D/O JAYAPAL			Address: APT BLK 315 BUKIT BATOK STREET 32 #05-101 SINGAPORE 650315		
ID Type / ID No.: NRIC NO / S7507922B			Contact No.: Home/Office:		Mobile: 84998835
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 44	Date of Birth: 19/02/1975	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: PRIVATE HIRER (GRAB)			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/03/2019 14:45	Type of Location: Bend
Location: Along Road 1 SENNETT AVENUE ALONG SENNETT AVENUE OUTSIDE UNIT 65				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJJ4745L	Car	HONDA	ACCORD	Black	No Damage	0



**SINGAPORE
POLICE FORCE**



T/20190426/2046

2 of 3

Report No. T/20190426/2046

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

CONTINUATION OF REPORT

Brief Details.

I refer to TP/IP/23743/2019 date on 9 April 2019.

On 28/03/2019 at about 1445hrs, I accepted a Grab booking originating from Sennett Ave, Which I arrived at about 1500hrs. The road is a single carriageway road with two lanes, it is at a private estate and this is the first time I patronized this area. There were car parked at both side of the road, requiring drivers etiquette for giving way. As my passenger took a while and also there was a lorry my car waiting for road access, I navigated my car aside. However I do recall a car was parked slightly out of line with a bit of jerk out with another car parked in the opposite direction of this car. I am not certain if my car had accidentally scratched the stationery and unoccupied vehicle while trying to navigate through the limited space along the road.

When my passenger come, I did checked with her if the stationery car belong to her. However it does not belong to her and she was in a rush to her destination. I wanted to leave my contact number on the windscreen in case that there is any damage caused by my car. However when I returned to the location 10 minutes later the car is no longer parked there.

I did examine my car afterward, however I did not found out any new scratches on the left passenger side body on my car. I would also like to state that my car has already sustain scratched from a previous incident.



**SINGAPORE
POLICE FORCE**



T/20190426/2046

3 of 3

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

Report No. T/20190426/2046

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

J /

Sgt 2 JACKY ONG CHUN HENG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

26/04/2019 13:48

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt TAN JEOK LENG

Contact No.: 65476144

Classification Of Case:

Authentication Stamp

NP168

(Bukit Merah)

Reported on 24/6/2019
@ 1445 HRS

ACCIDENT STATEMENT

ACCIDENT DATE: 28.3.2019 (DD/MM/YYYY), TIME: 14.45 (HH:MM)

LOCATION: Sennett Avenue Outside Unit 65

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJJ 4745L
b) INSURANCE COMPANY: _____
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: _____
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
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: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 84998835
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* d) DATE OF BIRTH: (____/____/____) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS _____

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: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SCR 6811G MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: Unknown 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 = saradha75@gmail.com

VIDEO

saradha75@gmail.com ✓

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7507922B



Name
SARATHA D/O JAYAPAL



Race
INDIAN

Date of Birth
19-02-1975

Sex
F

Country of Birth
SINGAPORE

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Unique Number
S7507922B

Name
SARATHA D/O JAYAPAL

Birth Date
19 Feb 1975

Issue Date
15 Dec 2007




For LKK/NAC Use Only

2973744



NRIC No. S7507922B



Blood Group
A+

Date of Issue
05-08-1997

APT BLK 315 BUKIT BATOK STREET 32 #05-101
SINGAPORE 650315

NRIC No: S7507922B Date: 12/01/2013 No: 7312060

For LKK/NAC Use Only

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

CLASS DATE

Class 3 Motor Cars =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 15 Dec 2007

Licence No: S7507922B



NP 422A

For LKK/NAC Use Only

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 Number: 5086404225-01

Cover : drivo CLASSIC

- | | |
|---|--------------------------|
| 1. Index mark and Registration Number of Vehicle | : SJJ4745L |
| Chassis Number | : CL73304054 |
| 2. Name of Policyholder | : JAYAPALSARA75 SERVICES |
| 3. Effective Date of Insurance | : 15 Sep 2018 |
| 4. Expiry Date of Insurance | : 14 Sep 2019 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her 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# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business. | |

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) Use for any purpose in connection with the Motor Trade.
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : TELESales-DIRECT MARKETING (00000601661)
 Date of Issue : 09 Sep 2018 16:00 hrs
 Reprint : 09 Sep 2018 16:01 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="28/03/2019 14:45"/>							
Vehicle No.(For Motor)	<input type="text" value="SJJ4745L"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5086404225-01		JAYAPALSARA75 SERVICES	53350595W	GPC	drivo CLASSIC	SJJ4745L	SJJ4745L	15/09/2018	14/09/2019
<input type="button" value="Continue"/>										

Claim Handling

[Task Transfer](#) [Exit](#)

▼ Accident MT/1049288

LOS SAL SUB

Policy No.	5086404225-01	Vehicle No.	SJJ4745L	GST Registration No.	
Certificate No.					
Policyholder Name	JAYAPALSARA75 SERVICES			Policyholder NRIC	53350595W
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No. (Mobile)	NA	Contact No. (Office)		Contact No. (Home)	
Email Address		Special Remark		eCode	No ▼
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	50	Private Hire	Not available

▼ Accident Details

Report Date	17/06/2019 14:04	Accident Report Within 24 hrs	Yes	Accident Type	Hit and run
Date of Accident	28/03/2019	Time of Accident hh:mm	13:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	65 SENNETT AVENUE				

▼ Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	17/06/2019 14:05:38 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	99 CASHEW ROAD	Address 2	#09-05 CASHEW HEIGHTS	Address 3	SINGAPORE 679670
Address 4		Address Type	Singapore address	Post Code	679670
Unit No.	09-05	Related Policy Number	5086404225-01		

▼ OI Driver Info

Driver Name		Driver Type			
Unnamed driver Name		Driver NRIC		Driver DOB	
Register Date of Driver License		Driver Age		Driving Experience	
Contact No. (Mobile)		Contact No. (Office)		Contact No. (Home)	

Claim Handling

Accident MT/1049288

Policy No.	5086404225-01	Vehicle No.	SJJ4745L	GST Registration No.
Certificate No.				
Policyholder Name	JAYAPALSARA75 SERVICES			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	50	Private Hire

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GST Registration No.		GST Status Verified	Yes
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▼ Policyholder Mailing Address

Address 1	99 CASHEW ROAD	Address 2	#09-05 CASHEW HEIGHTS	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	09-05	Related Policy Number	5086404225-01	

▼ OI Driver Info

Driver Name		Driver Type		Driver DOB
Unnamed driver Name		Driver NRIC		Driving Experience
Register Date of Driver License		Driver Age		Contact No.(Home)
Contact No.(Mobile)		Contact No.(Office)		Address 3
Address 1		Address 2		Post Code
Address 4		Address Type	Foreign address	
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Com.

Modification History

Claim 002 OD-MX

New

Claim Type *	OD-MX	Insured Name	JAYAPA
Contact No.(Mobile)	98556606	Contact No. (Home)	
Email Address		OI Vehicle Number	SJJ4745L
Claim Description	SJJ4745L / SCR6811G ON 28 Mar 2019		
Preferred Workshop	Insured Liability	Partially at Fault	
Preferred No. Finalisation	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered	Received	Claim Close Date	26/06/2019 10:13
Report Taken By		Workshop Repairer	
<input checked="" type="checkbox"/> Print AK letter			

Save Submit

Attachment

Accident No. MT/1049288 Claim No. 002
 Last Doc. Received ☒ Yes ☐ No Upload Date 26/06/2019 10:10

Path *

Choose File No file chosen

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Message Read

Clear

Clear

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Category *

Confidential

Please Select NO

Please Select NO

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Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:13	NRIC/ Driving License	Normal	NRIC/ Driving 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:10	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:09	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:08	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:08	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:08	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:08	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:08	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:08	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jun 2019 10:08	Photos	Normal	Photos

Video List

Uploaded By/Date

Folder Date

File Name

