

NATIONAL Assessment Centre Services (wef: Jan 05)

Date In: 29/06/19	Job description	Date & Time Completed	Done by
Ref No: NA/INC19011539/13	SAS e-filing		
Veh No: 5653354B	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 28/06/19 1725	i-Motor Claim Form	MT/1051199-001	
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: SLQ9402H 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

Claimant's Particulars :-	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			1st Bill	Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);			
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)			
Damaged Portion:	3) TF: Towing Fee \$40/\$45			
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120			
Auditors' Comments :-	5) FT: Follow-Through Survey (Resurvey) \$30			
Cat 1:	For claiming against INC Only (wef 10 Jan 2005)			
Cat 2 / 3:	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			
	TP (N11): TP (Non-INC) against INC \$20			
	9) N12: Idac 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	29/06/2019 12:36
Date Of Accident	28/06/2019 17:25
Exact Location Of Accident	PIE B4 EUNOS FLYOVER TWDS CHANGI AIRPORT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGS3354B
Insured/Policyholder	
Name Of Registered Owner	NAZZERAH BEGUM BINTE MOHAMED RASIAH
NRIC No	S8541869F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81616922
Alternative Phone No	OTHERS-90268845

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 5
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5087811939-02
Cover Note Number	

Driver

Name of Driver	MOHAMMED FERAZ BIN IDRIS
NRIC No	S7930601J
Date Of Birth	30/09/1979
Occupation	OUTDOOR
Date Of Driving Pass	31/08/2001
Driving Experience	17 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90268845
Fax Number	
Contact Number	
EEmail Address	MACHAFER.1979@GMAIL.COM

Address	BLK 101 SIMEI STREET 1 #03-880
Postcode	520101
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	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	6
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

I WAS TRAVELLING STRAIGHT ALONG PIE B4 EUNOS FLYOVER TWDS CHANGI AIRPORT ON THE 2ND LANE. INFRT OF MY VEH STOP AND I FOLLOWED SUIT, SUDDENLY I FELT THE IMPACT FROM MY REAR. WHEN I CAME OUT MY VEH WAS INVOLVED IN A CHAIN COLLISION OF 6 VEHICLES.

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	SLQ9402H
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 GBG5425P
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
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 3

Vehicle Registration Number SKS4599H
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 4

Vehicle Registration Number SGU878M
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 5

Vehicle Registration Number SLM7078U
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode

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)**

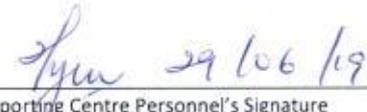
I understand, acknowledge, agree and consent that:

- (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.

Policyholder's Signature
Date & Time:

 29/06/19.

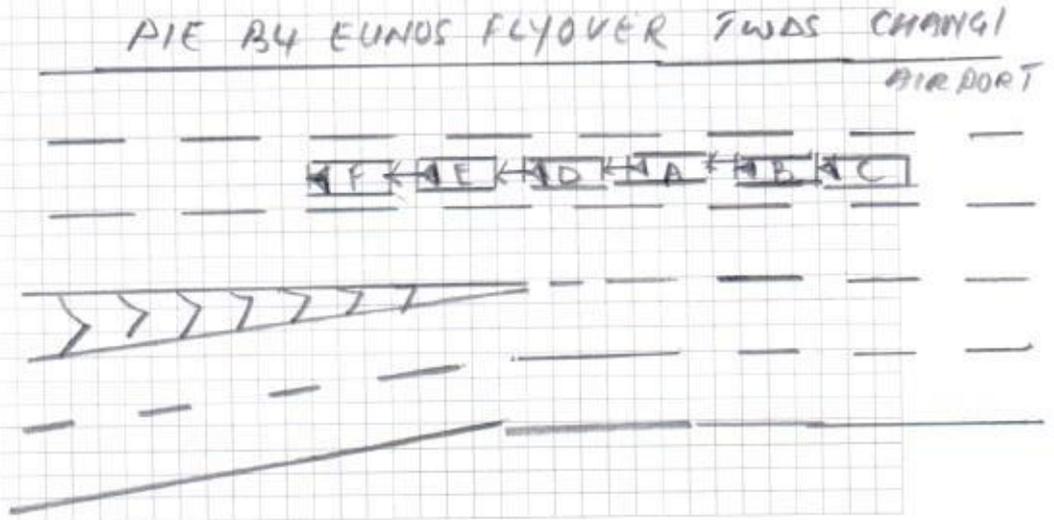
Driver's Signature
(If driver is not the policyholder)
Date & Time:

 29/06/19

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

SKETCH PLAN

- A - SGS 3354B
- B - SLQ 9402H
- C - QBG 5425P
- D - SKS 4599H
- E - SGU 878M
- F - SLM 7078U



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the statement

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.:

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. S7930601J



Name
MOHAMMED FERAZ BIN IDRIS

Race
MALAY

Date of birth Sex
30-09-1979 M

Country of birth
SINGAPORE

4503031

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number **S7930601J**

Name
MOHAMMED FERAZ BIN IDRIS

Birth Date **30 Sep 1979**

Issue Date **21 Aug 2003**

1030764765A



4503031



NRIC No. **S7930601J**



Date of issue
30-12-2009

APT BLK 101 SIMEI STREET 1 #03-880
 SINGAPORE 520101

NRIC No. **S7930601J** Date: **28/10/2018**

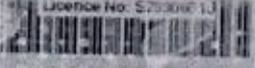
For LKK/NAC Use Only

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class 3	Motor cars and Motor Tractors the weight unladen does not exceed 2500 kg	31 Aug 2001
Class 4	Heavy Motor Cars and Motor Tractors the weight unladen exceeds 2500 kg	29 Oct 2003
Class 5	Motor Vehicles not constructed to carry any load and the weight unladen exceeds 7250 kg	26 May 2004

S7930601J S / No. 900028065

License No. S7930601J



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: 5087811939-02

Cover : Third Party, Fire & Theft

- | | |
|---|---|
| 1. Index mark and Registration Number of Vehicle | : SGS3354B |
| Chassis Number | : JM6CR10F100103350 |
| 2. Name of Policyholder | : NAZZERAH BEGUM BINTE MOHAMED RASIAH |
| 3. Effective Date of Insurance | : 12 Mar 2019 |
| 4. Expiry Date of Insurance | : 11 Mar 2020 |
| 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 business or profession. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) 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)	: N/A
EXCESS (SECTION 2)	: N/A
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
PRIMARY DRIVER	: NAZZERAH BEGUM BINTE MOHAMED RASIAH
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: AUTO LEASE (PTE) LTD
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)

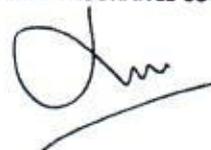
Agency : B.A.S. INSURANCE AGENCY (00000573236)
 Date of Issue : 11 Mar 2019 13:43 hrs
 Reprint : 11 Mar 2019 13:44 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Claim Handling

Accident MT/1051199

Policy No.	5087811939-02	Vehicle No.	SGS33548	GST Registration No.
Certificate No.				
Policyholder Name	NAZZERAH BEGUM BINTE MOHAMED RASJAD			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third Party, Fire & Theft	Loading
Contact No.(Mobile)	81616922	Contact No.(Office)	0	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	Yes	NCD Entitlement(%)	50	Private Hire

▼ Accident Details

Report Date	29/06/2019 17:30	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	28/06/2019	Time of Accident hh:mm	17:25	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	PIE B4 EUNOS FLYOVER TWDS CHANGI AIRPORT			

▼ Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess
Unnamed Driver Excess	500.00	Outside Singapore OD Excess	0.00	
Third Party Excess	0.00	Outside Singapore TP Excess	0.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	BLK 101 #03-880	Address 2	SIMEI STREET 1	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	03-880	Related Policy Number	5087811939-02	

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	MOHAMMED FEROUZ BIN IDRIS	Driver NRIC	S7930601J	Driver DOB
Register Date of Driver License	31/08/2001	Driver Age	39	Driving Experience
Contact No.(Mobile)	90268845	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 101	Address 2	SIMEI STREET 1	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#03-880			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Com.

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001 OD-MX **New**

Claim Type *	OD-MX	Insured Name	NAZZER
Contact No.(Mobile)		Contact No. (Home)	
Email Address		OI Vehicle Number	SGS33548
Claim Description	SGS33548 / SLQ9402H ON 28 Jun 2019		
Preferred Workshop	Preferred Repair Option	Insured Liability	Not at Fault
Finalisation	Yes	Preferred Workshop, Name unknown	GIA report
Date Registered		Received	
Report Taken By		Claim Close Date	29/06/2019 17:35
		Workshop Repairer	ROSLINDA

Print AK letter

Save Submit

Attachment

Accident No. MT/1051199 Claim No. 001
 Last Doc. Received Yes No Upload Date 29/06/2019 00:00

Path *

Category *

Confidential

- Choose File No file chosen
- Message Read

- Clear

Please Select	NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jun 2019 17:35	NRIC/ Driving License	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jun 2019 17:35	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jun 2019 17:35	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jun 2019 17:34	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jun 2019 17:34	Photos	Normal	Photos
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jun 2019 17:34	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jun 2019 17:34	Photos	Normal	Photos

Video List

Uploaded By/Date	Folder Date	File Name
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Display in New Window Scan and uploading