

NATIONAL Assessment Centre Services

Form 1 (April 2015)

MNA49087608

Date In: 05/07/2019 14:26	Job description	Date & Time Completed	Done by
Ref No: XBA/LPC/19019317	SAS e-illing		
Veh No: SUB 2274K	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 03/07/2019 07:15	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/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SKX 2846 G	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:	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	Am't (\$)	Am't (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100) INC (\$80)		
Damaged Portion:	3) TP: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claimant against INC Only (wef 10 Jan 2019)		
	6) TR: Re-inspection \$75		
	7) N1: Idm DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	121P		
	* N3: Courtesy Car / Tpl Allowance \$5		
	* N6: Repair Co-ordination \$10		
	* N7: Post Repair Inspection \$25		
	* N8: DV / Collect Excess Coordination \$5		
	TP (N11) - TP (N-in INC) against INC \$20		
	9) N12: Idm Mobile \$30		

Cal 2/3:

1/1/18

Invoice dated: _____ For Charged: _____

Invoice dated: _____ For 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	05/07/2019 14:26
Date Of Accident	03/07/2019 07:15
Exact Location Of Accident	TPE TOWARDS SLE AT 11.5KM
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB2274K
Insured/Policyholder	
Name Of Registered Owner	TAN CHOON YONG
NRIC No	S1713814F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97102914
Alternative Phone No	OTHERS-97102914

Vehicle Particulars

Manufacturer	MAZDA
Model	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	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z19VP05022560
Cover Note Number	

Driver

Name of Driver	TAN CHOON YONG
NRIC No	S1713814F
Date Of Birth	22/10/1965
Occupation	INDOOR
Date Of Driving Pass	30/11/1990
Driving Experience	28 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97102914
Fax Number	
Contact Number	OTHERS-97102914
Email Address	NOEMAIL

Address	BLK 338B ANCHORVALE CRESCENT #13-57
Postcode	542338
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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?	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 SKETCH PLAN

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	SKX2846G
Vehicle Make/Model/Colour	HONDA
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	SJX7447D
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Vehicle Make/Model/Colour

HIONDA FIX

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.
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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:


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


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

SKETCH PLAN

- (A) SLB 2274R
- (B) SKX 2846G
- (C) SJX 7447D.

TPE towards SLE (At 11.5km)




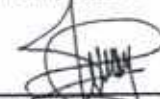
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 03/07/19 @ about 7.15 am, I am travelling along TPE towards SLE. There cars ahead of me (11.5km) slow down and stopped. I too slow down and stopped with safe keeping distance from the car ahead of me. When suddenly, I felt an impact on my rear portion. when I got down, I found myself in a 3 car chain collision. And I am the first vehicle. I felt my rear portion twice impact before I got down.

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.:

Date of Accident : 03/07/19 Accident Time: 7:15am (24-HR-FORMAT)
Accident Place : TPE towards SLE at 11.5km
Vehicle Reg. No (Car plate No.) : SLB 2274R
Vehicle Make/Model : maza S
Insurance Company : Lonpac Insurance Policy No. 219VP05022560
Owner or Company Names /IC NO: Tan chuan Yong /51713814F
Owner or Company Contact No. : 97602914 Owner's HP Company Tel
DRIVER'S Name & IC no. : Tan chuan Yong /51713814F
DRIVER'S Date of Birth : 22/10/1965 DRIVER'S License Pass Date 30 Nov 1990.
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner
DRIVER'S Address : Blk 338B Anchorvale Crescent #13-57(5) 542338
DRIVER'S Contact No./ Alt No. : 1) 97602914 2)
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc) Saf
Email Address : Regular
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Ins
Number of Passengers (including Driver): 1
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particulars (if any)

(B) Vehicle Reg No: SKX 2846 G
Vehicle Make/Model: Honda
Name DRIVER: _____
IC No. DRIVER: _____
DRIVER'S Contact & add: _____

(C) Vehicle Reg No: SJX 7447, D.
Vehicle Make/Model: Honda Fit
Name DRIVER: _____
IC NO. DRIVER: _____
DRIVER'S Contact & add: _____



SINGAPORE ARMED FORCES IDENTITY CARD

Name
TAN CHOON YONG

For LKK/NAC Use Only

NRIC No
S1713814F



This card is the property of the Singapore Armed Forces. Any person finding this card is requested to "hand" it without delay to Central Warehouse Base or any Police Station.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1713814F

Name:

TAN CHOON YONG

For LKK/NAC Use Only

Birth Date: 22 Oct 1965

Issue Date: 11 Jul 2018



002822503K

UD 008134185

12513289

For LKK/NAC Use Only

NRIC No/Colour
S1713814F / PINK
Date Of Birth
22/10/1965
Service Status
REGULAR

Race
CHINESE
Country Of Birth
SINGAPORE
Sex
M
Military Rank Status
MILITARY EXPERT M02098

1011 34 14 14 338B ANCHORVALE CRESCENT #13-57
SINGAPORE 542338 DATE: 22.11.2017 S1713814F



Use governed by GovCard
Terms & Conditions
111828102336714

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ 30 Nov 1990

For LKK/NAC Use Only



NP 428A



LONPAC INSURANCE BHD (598FC0635C)

ATX1

Singapore Office: 100 Beach Street #17-01/18 The Esplanade, Singapore 109955
Tel: +65 6502 7000 Fax: +65 6502 7001 Website: www.lonpac.com.sg
OSI Reg No. P0-0005635-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: Z19VP05022500

Type of Cover: COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

MAZDA 5 2.0
- SLB2274K

2. Name of Policy Holder

TAN CHOON YONG

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

30/03/2019

4. Date of Expiry of the Insurance

29/03/2020

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

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE

Excess: S\$ 1,000.00 (SECTION 1) INSURED / NAMED DRIVERS

S\$ 2,000.00 (SECTION 1) UNNAMED DRIVERS

S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS

S\$ 100.00 WINDSCREEN EXCESS

Condition: ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS

* 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

(WE hereby certify that this covering Note is issued in accordance with the provisions of Part 12 of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore)

H P. Owner: UNITED OVERSEAS BANK LIMITED

Amek

CHIEF EXECUTIVE
(Singapore Branch)

User ID: MRBLP0014
Date Issued: 05/03/2019