

NATIONAL Assessment Centre Services [wef 10 Jan 2005]

Date In: 17/07/19	Job description	Date & Time Completed	Done by
Ref No: NA/SM/19012623/13	SAS e-filing		
Veh No: SKZ 3016T	E-mail (w/ 8hrs, AIC 2hrs)		
D.O.A: 15/07/19 1910	i-Motor Claim Form		
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: **UNKNOWN** 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

NA1905373 Invoice Preparation Checklist

		Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TF : Towing Fee \$40/\$45		
Damaged Portion:	4) FT : Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT : Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 1:	6) TR : Re-inspection \$75		
Cat. 2 / 3:	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 30		

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	17/07/2019 12:47
Date Of Accident	15/07/2019 19:10
Exact Location Of Accident	MSCP OF WEST COAST PLAZA LVL 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ3016T
Insured/Policyholder	
Name Of Registered Owner	PRIME CAR LIMO PTE LTD
Co Reg No	201826883W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-99999999

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY
Exact Purpose for which vehicle was being used at time of accident	PARKED VEH
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	19-MK000375-R00
Cover Note Number	

Driver

Name of Driver	AMY TAN MEI LIN
NRIC No	S8010543F
Date Of Birth	17/04/1980
Occupation	OUTDOOR
Date Of Driving Pass	08/07/2011
Driving Experience	8 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-84989818
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 480 SEMBAWANG DRIVE #06-457
Postcode	750480
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	NO 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	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)	0

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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

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

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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's Signature
Date & Time:

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

17/07/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

MSCP of West Coast Plaza Level 3



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/07/2019 at about 1912 hrs at MSCP of West Coast Plaza Level 3. My vehicle was stationary parked at the above mentioned Car Park and when I return back to my vehicle, I saw a note at my windscreen stated that I had collided onto the Rear Portion of



Vehicle (B) parked at the Rear of my Vehicle (A). I had retrieved my vehicle CCTV footage and had saw no any evidence of the say collision. I am making this report for my Insurance awareness. (A) SKZ3016T (B) Unknown

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

DECLARATION

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



[Handwritten Signature]

[Handwritten Signature] 17/07/19

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.:

SINGAPORE ACCIDENT STATEMENT

Accident Date:	15/07/2019	Time:	1912 hrs	(hh:mm) 24 hr format
Location	MSCP of West Coast Plaza Level 3			
Vehicle Number	SKZ 3016T			
Insured Name	PRIME CAR LIMO PTE LTD			
NRIC/FIN	201926883W	Contact Number		
Make	NISSAN	Model	SILPHY 1.5L	
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-MK000375-R00			
Name of Driver	Amy Tan mei lin	() Same as Insured		
NRIC/FIN	S8010543F	Contact Number	8498 9818	
Date of Birth	17/04/1980			
Driving Pass Date	08/07/2011			
Occupation	() Indoor (/) Outdoor			
Gender	() Male (/) Female			
Email Address	(/) NO EMAIL			
Address of Driver	Blk 40 Sembawang drive #06-457 5(750480)			
Was driver an employee of the Insured's Company? () Yes (/) No				
If No, Relationship of the Driver with the Insured HIRER				
() 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	UNKNOWN			
Veh C				
Veh D				
Veh E				
Veh F				

0 persons including driver

duar

SHZ 3415T

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8010543F**



 Name
AMY TAN MEL LIN
陈美森

For LKK/NAC Use Only

Race
CHINESE

Date of Birth
17-04-1980

Sex
F

Country of Birth
SINGAPORE

***2485



IDENTITY NO. **S8010543F**

For LKK/NAC Use Only

Date of Issue
25-10-2010

Address
**APT BLK 480 SEMBAWANG DRIVE
#06-457
SINGAPORE 750480**

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

EFFECTIVE DATE

Class 2A Motor car's without clutch pedals (Auto) <= 2000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles without clutch pedals <= 2500kg 08 Jul 2011

For LKK/NAC Use Only



License No. S8010543F

NP 4204

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S8010543F

For LKK/NAC Use Only

Date of Birth 17 Apr 1980
Issue Date 08 Jul 2011



NP 4204



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-MK000375-R00 (Private Motor Car)

- | | | |
|--|------------------------|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SKZ3016T | Chassis No.: JN1BAAG11Z0110408 |
| 2. Name of Policyholder | PRIME CAR LIMO PTE LTD | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 29/05/2019 | |
| 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: Third Party Cover Only
Policy Excess: Excess-Third Party (Sect II) SGD 1,800

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

quire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company Cert No.: 201826883W
Owner ID Type: Company
Owner Name: PRIME CAR LIMO PTE. LTD.
Registered Address: 61 UBI AVENUE 2 #01-03 AUTOMOBILE MEGAMART SINGAPORE 408898
Mailing Address: -
Birth Date: -

Vehicle Particulars

Vehicle No.: SKZ3016T
Previous Vehicle No.: -
Effective Date of Ownership: 30 May 2019
Original Regn Date: 11 Nov 2009
Registration Date: 11 Nov 2009
Year of Manufacture: 2009
Vehicle Type: Private Hire (Chauffeur) Motor Car
Vehicle Scheme: -
Vehicle Attachment 1: No Attachment
Vehicle Attachment 2: -
Vehicle Attachment 3: -
Vehicle Make: NISSAN
Vehicle Model: SYLPHY 1.5L 4AT ABS D/AB 2WD 4DR
Primary Colour: Red
Secondary Colour: -
Passenger Capacity: 4
Chassis No.: JN1BAAG11Z0110408
Engine No.: HR15263289B
Engine Capacity / Power Rating: 1498 cc / -
Maximum Power Output: 80.0 kW (107 bhp)
Propellant: Petrol
Max Unladen Weight: 1175 kg
Maximum Laden Weight: 1520 kg
Open Market Value: \$17,877.00
PARF Eligibility: Yes
PARF Eligibility Expiry Date: 10 Nov 2019
Minimum PARF Benefit: \$8,938.00
No. of Transfers: 2
IU Label No.: 1123483496
COE No.: 2009100101002471N
COE Expiry Date: 10 Nov 2019
COE Category: A - Car (1600cc & below)
COE Registration Category: A - Car (1600cc & below)
Quota Premium (QP) / Prevailing Quota Premium: \$15,589.00 / -
Actual QP Paid: \$15,589.00
QP (Regn Cat): \$15,589.00
OPC Cash Rebate Eligibility: No
QP during COE Bidding Exercise: \$15,589.00
Additional Registration Fee Rate: 100.00 %
Actual ARF Paid: \$17,877.00
Vehicle Lifespan Expiry Date: No Lifespan
CO2 Emission: -
CO Emission: -
HC Emission: -
NOx Emission: -
PM Emission: -
Message: To renew the COE, the Prevailing Quota Premium payable is that of Category A. This is a public service vehicle.