

# NATIONAL Assessment Centre Services

[Print / Export]

NA/19094122

Date In: 18/07/2019 15:12	Job description	Date & Time Completed	Done by
Ref No: NA/19094122	SAS e-filing		
Veh No: FBFS1431	E-mail (within 3hrs, AIG 2hrs)		
D.O.A: 17/07/2019 20:45	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/Wkap		

Preferred Wkap / INC Assign Wkap / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SLG4182C	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

NA/1905286	Invoice Preparation Checklist		Amo (\$)	Amo (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30)		Inc Bill	Adj Bill
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		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey)	\$30		
	For claims against INC Only (wef 10 Jan 2019)			
	6) TR: Re-inspection	\$75		
	7) N1: (dx DA + SMRT Survey	\$160		
	8) NTUC Additional Services:			
	* 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	\$0		
	Invoice dated	Pen Charged		
		Fee 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	18/07/2019 15:12
Date Of Accident	17/07/2019 20:45
Exact Location Of Accident	TRAFFIC JUNCTION OF KEPPEL ROAD/CANTONMENT LINK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBF5143H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SINNAYAH MANIAM
NRIC No	S1155118A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86557719
Alternative Phone No	OTHERS-86557719

### Vehicle Particulars

Manufacturer	HONDA
Model	ANF125MSS A-125CC
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	MOTORCYCLE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/18-386171-CA
Cover Note Number	

### Driver

Name of Driver	SINNAYAH MANIAM
NRIC No	S1155118A
Date Of Birth	25/01/1955
Occupation	INDOOR
Date Of Driving Pass	07/07/2005
Driving Experience	14 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86557719
Fax Number	
Contact Number	OTHERS-86557719
Email Address	NOEMAIL

Address	BLK 101 BUKIT PURMEI ROAD #05-06
Postcode	090101
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	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?	YES
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	BUKIT MERAH EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX BLOCK A , POSTCODE: 088762 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2369999 - FAX NO: 62268438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190718/2011

#### 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 Witness 1

Name	MELANIE TAN
Phone Number	96180999
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLG4182C
Vehicle Make/Model/Colour	TOYOTA COROLLA ALTIS
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 INJURED PERSON 1

Name SINNAYAH MANIAM

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? FBF5143H

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

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: 18/07/19

Driver's Signature

(If driver is not the policyholder)

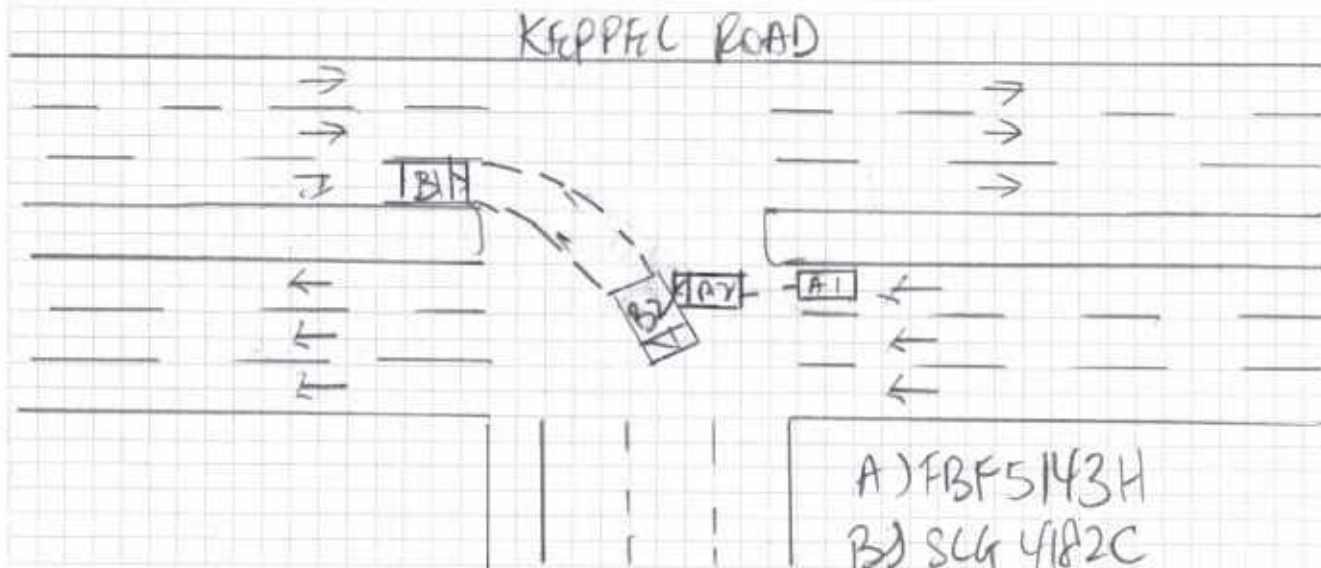
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT CANTONMENT LINK

Q18 REF no to Police Report  
1/20190718/2011

## DECLARATION

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

Policyholder's Signature  
Date & Time: 18/07/19

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

Reporting Centre Personnel's Signature  
Name: 18/07/2019  
NRIC/FIN No.: Rose Loo





Police Station Of Origin:  
Bukit Merah East N.P.C  
A 391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No: 1800-2369999

Report No. T/20190718/2011

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/07/2019 01:37	Vide Report No.:	Station Diary No.: 14
--------------------------------------------	------------------	--------------------------

## Informant's Particulars

Name of Informant: SINNAYAH MANIAM			Address: APT BLK 101 BUKIT PURMEI ROAD #05-06 SINGAPORE 090101	
ID Type / ID No.: NRIC NO / S1155118A			Contact No.: Home/Office:	Mobile: 86557719
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 64	Date of Birth: 25/01/1955	Type of Informant: Rider	
Race: Indian			Language: English	Institution / School Name:
Occupation: Private security officer			Driving Licence Information: Class: 2,3	Date of Expiry:

## General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 17/07/2019 20:45	Type of Location: Straight Road
Location: Along Road 1 KEPPEL ROAD				
Traffic light junction of Keppel Road & Cantonment Link				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF5143H	Motorcycle	HONDA	ANF125MSS A	Blue	Slightly Damaged	0
SLG4182C	Car	TOYOTA	Altis Classic 1.6 CVT	Silver	Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBF5143H	MSIG INSURANCE (SINGAPORE) PTE. LTD.	MSDTMT18386171	11/08/2018	10/08/2019



Police Station Of Origin:  
Bukit Merah East N.P.C  
A 391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No: 1800-2369999

Report No. T/20190718/2011

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	SINNAYAH MANIAM	ID No.	S1155118A
Related Vehicle	FBF5143H (Motorcycle)	Contact No.	86557719
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

**Brief Details.**

On the above mentioned date, time and place, at the traffic light junction, when the traffic light turned green in my favour, I rode forward my motorcycle FBF5143H. Suddenly, a car SLG4182C beat the red light and as it was too near to me, I could not avoid it. My motorcycle hit onto the back of the car and I fell down. The said driver of the car did not help me. He parked his car a distance away and after I got up on my own, I went to him. The driver was a Chinese male subject. He told me that he did not see the red light. He then told me that he wanted to settle with me in private. He said that he would be going to Tanjong Pagar Plaza and withdraw some cash (S\$200/-) and then passed it to me. I told him that if the damage to my motorcycle was more than S\$200/-, I would have to inform him and asked him for more money. He acknowledged. He then said that he would follow me from behind to Tanjong Pagar Plaza. Upon reaching there, he was nowhere to be found. I looked around but he was gone. Earlier, just after the accident, a female person (Ms Melanie Tan) came to me and passed her contact details. She said she had witnessed the accident. I wish to state that my right leg is injured and my left leg is swollen due to the accident. The accident had also caused damage to the alignment and brakes of my motorcycle. That is all.





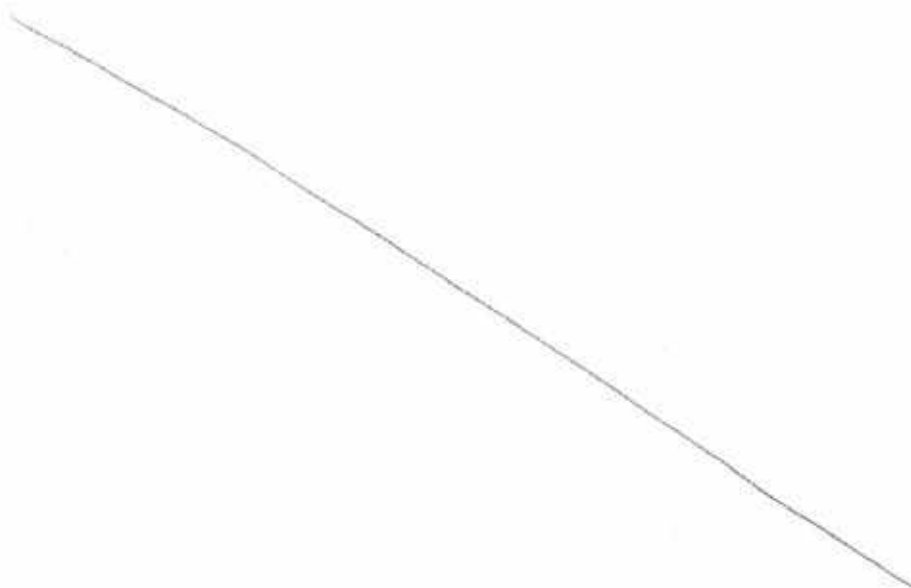
Police Station Of Origin:  
Bukit Merah East N.P.C  
A 391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No: 1800-2369999

Report No. T/20190718/2011

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:  
A /  
Sr Staff Sgt MUHAMMAD SHAHED BIN MOHD  
RASID

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
Staff Sgt WONG SIEU LUI  
Contact No.: 65476151

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
18/07/2019 01:37

Classification Of Case:

# ACCIDENT STATEMENT

ACCIDENT DATE: 17/07/19 (DD/MM/YYYY), TIME: 8:45 PM (HH:MM)

LOCATION: JUNCTION of KAPAL ROAD / CAMPONMAN LANE

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBF 5143 H  
 b) INSURANCE COMPANY: MSIG  
 c) POLICY NUMBER: MSD/VM7/18-386171-CN A0074-001/10001  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: HONDA  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE  
 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: SINNAYAH MANIAM (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 51155118/H CONTACT: 86557719  
 c) ADDRESS: BLK 161 Bukit Punggol Road #05-06  
Singapore 090101

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: M ABOL (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 25/01/1955 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 07 Jul 2005

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

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: SLG 4182C MODEL: \_\_\_\_\_

b) DRIVER'S NAME: \_\_\_\_\_

c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_

e) DRIVER'S NAME: \_\_\_\_\_

f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

WITNESS Michael Jari 96180999

email =

VIDEO



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1155118A



For LKK/NAC Use Only

SINNAYAH MANIAM

சிள்ளையா மணியம்

Race  
INDIAN

Date of birth  
25-01-1955

Country/Place of birth  
SINGAPORE

Sex  
M



REPUBLIC OF SINGAPORE DRIVING LIC



License Number S1155118A

SINNAYAH MANIAM

For LKK/NAC Use Only

Birth Date 25 Jan 1955

Issue Date 07 Jul 2005

001253571C

6162205



NPIC No. S1155118A



For LKK/NAC Use Only

Date of issue  
02-04-2019

Address  
APT BLK 101 BUKIT PURMEI ROAD  
#05-06  
SINGAPORE 090101

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

PASS DATE

Class 2B	Motorcycles <= 200 cc
Class 2A	Motorcycles between 201 cc and 400 cc
Class 2	Motorcycles > 400 cc
Class 3	Motor cars <= 3000 kg with <= 7 f exclusive of the driver; and motor vehicles <= 2500 kg

8655

7719

For LKK/NAC Use Only

NP 128A

License No. S1155118A





CA 509935

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)  
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6827 7800  
msig.com.sg

**CERTIFICATE OF INSURANCE**

Road Transport Act, 1987 (Malaysia)  
The Motor Vehicles (Third Party Risks) Rules, 1959 (Federation of Malaysia)  
The Motor Vehicles (Third Party Risks and Compensation) Act (CAP. 189 of the Revised Edition) (Republic of Singapore)  
The Motor Vehicles (Third Party Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)  
Or any Amendment, Act or Acts passed in substitution thereof.

CERTIFICATE NO : MSD/VMT/18-386171-CA A0074-001/10001

SUM INSURED : TPL  
EXCESS : NIL

1. Index mark and Registration Number of Vehicle : FBF5143H 125 c.c.  
HONDA  
2. Name of Policyholder : SINNAYAH MANJAM

3. Effective date of the Commencement of Insurance  
for the purposes of the Act : 1201AM 11/08/2018  
4. Date of Expiry of Insurance : 10/08/2019

5. Persons or Classes of Persons entitled to drive  
a. The Policyholder.

b. AMBA ALAGAN S/O R. SINAYAH ONLY  
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 and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitation as to Use

Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

7. The Policy does not cover

1. Use for hire or reward.
2. Use for racing, pace-making, reliability trial or speed-testing.
3. Use for the carriage of goods (other than samples) in connection with any trade or business.
4. Use for any purpose in connection with the Motor Trade.

\* 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.

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 the Road Transport Act, 1987 (Malaysia).

COMMERCIAL AGENCY PTE. LTD.  
Underwriting Agent  
For MSIG Insurance (Singapore) Pte. Ltd.

21/07/2018 (KS)  
CA/C1-03 (05/13)