

NATIONAL Assessment Centre Services

[Unit 1 Jan 2019]

NA19095202

Date In: 22/07/2019 09:35	Job description	Date & Time Completed	Done by
Ref No: NA19095202	SAS e-filing		
Veh No: SLA 5761G	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 22/07/2019 09:35	I-Motor Claim Form	MP1105435-001	22/07/2019
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:

SLF 325P

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: (\$

)

Landing: \$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:	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		
Auditors Comments:	5) FT: Follow-Through Survey (Resurvey) \$30		
Cal. 1:	For claimant against INC Only (wef 10 Jan 2019)		
Cal. 2/3:	6) TR: Re-inspection \$75		
	7) NI: Idm DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	9) NI: Idm Mobile		
	10) NI: Idm Mobile		
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	100) NI: Idm Mobile		

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	22/07/2019 09:35
Date Of Accident	20/07/2019 09:55
Exact Location Of Accident	ALONG NORTH BUONA VISTA ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA5761G
Insured/Policyholder	
Name Of Registered Owner	TAN KOK BOON
NRIC No	S1596599A
Email Address	GUOWEN@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96523024
Alternative Phone No	OTHERS-96523024

Vehicle Particulars

Manufacturer	BMW
Model	318i
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088138126-02
Cover Note Number	

Driver

Name of Driver	TAN KOK BOON
NRIC No	S1596599A
Date Of Birth	15/11/1963
Occupation	INDOOR
Date Of Driving Pass	26/09/1984
Driving Experience	34 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96523024
Fax Number	
Contact Number	OTHERS-96523024
Email Address	GUOWEN@SINGNET.COM.SG

Address	15 WEST COAST WALK #03-28
Postcode	127162
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	SIDE SWIPE
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)	3
Passenger 1	NAME: : WIFE GENDER: : FEMALE
Passenger 2	NAME: : DAUGHTER GENDER: : FEMALE

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	SLF325P
Vehicle Make/Model/Colour	HONDA VEZEL
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	IVAN LIM
NRIC/Passport Number	S7416648B
Contact Number	87380325
Address	
Postcode	

Insurance Company Name:

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :


SKETCH PLAN

IMPORTANT NOTICE

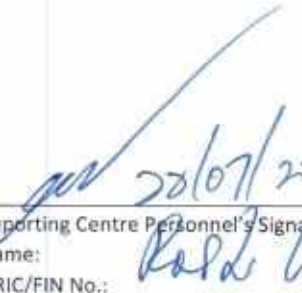
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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:

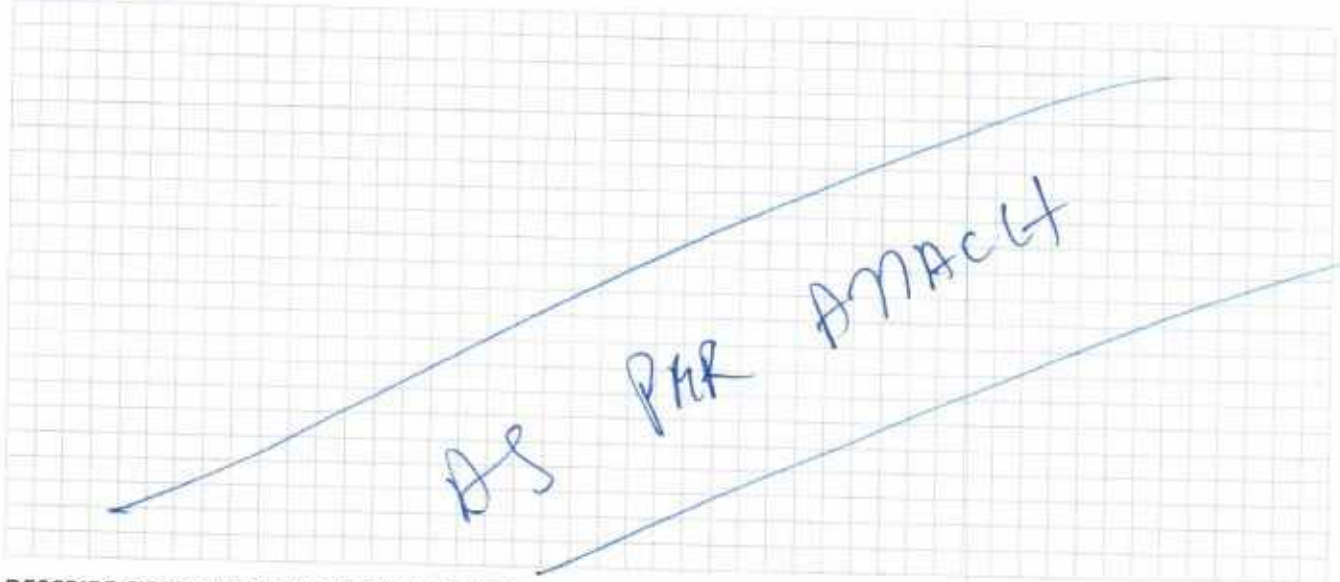
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

 22/7/19
09:40am
Policyholder's Signature
Date & Time:

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

 22/07/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in the description box: "Refer to ANACLT?"

DECLARATION

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

Policyholder's Signature [Signature] 22/7/19
Date & Time: 09:40am

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

Reporting Centre Person's Signature [Signature] 22/07/2019
Name: ROSA. LUTHER
NRIC/FIN No.:

Report of cars collision on 20 July 2019

On 20 July 2019 at about 9:55am, I, driver of car (SLA 5761G) was driving along North Buona Vista Rd.

I stopped my car at the traffic junction of North Buona Vista Rd and North Buona Vista Dr when the traffic light turned red. There was a car stopped on my right, the lane to the right of my lane was turn-right only.

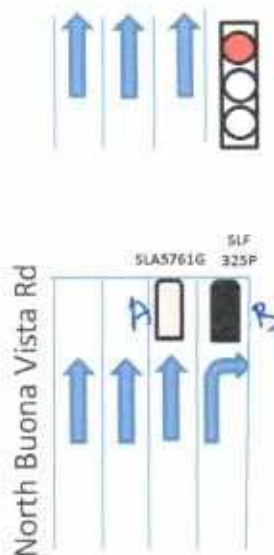
When the traffic light turned to green, I drove along my lane and continued forward straight. Suddenly, I heard a loud bang on the right side of my car, I looked back to see that a car had hit the right rear door of my car. After stopping at the side of the road, I got out to assess the damage. The driver of the car involved (SLF 325P) passed his particulars to me for follow up.

See attached for diagrams of how the incident occurred.

John Tan Kok Boon
22/7/19 09:40am
S1596599A

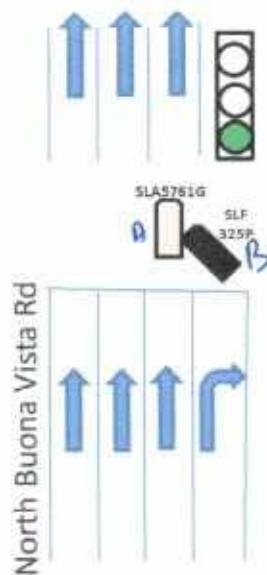
22/07/2019
Rosh Winton

Cars position prior
to collision
20/7/2019, ~9:55am



North Buona Vista Dr

Cars position
immediately after
collision



North Buona Vista Dr

A) SLA5761G

B) SLF 325P

22/07/2019
Rashid Watson

22/7/19
09:40 am
Tan Kok Boon
S1596599A

Claim Handling

Accident HT/1024335

Policy No.	508138126-02	Vehicle No.	SLA5761G	GST Registration No.	
Certificate No.					
Policyholder Name	TAN KOK BOON			Policyholder NRIC	S1596599A
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive PREMIUM	Leading	0
Contact No.(Mobile)	96523024	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
NPK	Yes	TCA	Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	22/07/2019 10:22	Accident Report Within 24 hrs	Yes	Accident Type	Side swipe
Date of Accident	22/07/2019	Time of Accident hh:mm	09:58	Country of Accident	Singapore
Reporting Centre		Orange Force		ICH No.	
Accident Location	ALONG NORTH BUDNA VISTA ROAD				

Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

Coverage		Sum Insured	9999999.95
Excess Waiver			

GST Registered Information

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

Policyholder Mailing Address

Address 1	15 WEST COAST WALK	Address 2	#01-28 THE PARC CONDOMINIUM	Address 3	SINGAPORE 127162
Address 4		Address Type	Singapore address	Post Code	127162
Unit No.		Related Policy Number	508138126-02		

OI Driver Info

Driver Name	Tan kok boon	Driver Type	Main Driver	Driver NRIC	S1596599A
Unnamed driver Name		Driver NRIC		Driver DOB	15/11/1963
Register Date of Driver License	26/09/1994	Driver Age	55	Driving Experience	34
Contact No.(Mobile)	96523024	Contact No.(Office)		Contact No.(Home)	
Address 1	15 WEST COAST WALK	Address 2	#01-28 THE PARC CONDOMINIUM	Address 3	SINGAPORE 127162
Address 4		Address Type	Singapore address	Post Code	127162
Unit No.					
Does he own a Singapore Registered car?	Yes	Driver Vehicle No.	SLA5761G	Driver Insurer Company	NTUC

Declaration	
Breathalyser or Blood Test Reading?	0 mg
Any injury?	Yes

Modification History

Claim 001 New

Claim Type *	DD-MX	Injured Name	TAN KOK BOON	Injured NRIC	S1596599A
Contact No.(Mobile)	96523024	Contact No.(Home)	66933831	Contact No.(Office)	65921180
Email Address	kuowen@singnet.com.sg	Vehicle Number	SLA5761G	Vehicle Number	SLF325P
Claim Description	SLA5761G / SLF325P On 20 Jul 2019			Name of Preferred Workshop	
Preferred Workshop	Insured Liability	Not at Fault			
CONTACT No.	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Finalisation Date Registered				Claim Close Date	22/07/2019 10:24
Report Taken By				Date Received	22/07/2019 00:00

Print AIC letter

Save Submit

Attachment

Accident No.	HT/1024335	Claim No.	001
Last Doc. Received	Yes No	Upload Date	22/07/2019 10:25
Path *		Category *	
Choose File	No file chosen	Clear	Please Select
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Message Read		Clear	Please Select

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_BUKIT_MERAH_800476(NATIONAL ASSESSMENT CENTRE SERVICE S (BUNGT MERAH)) on 22 Jul 2019 10:25	Photos	Normal	Photos 2019-7-22	
	NAC_BUKIT_MERAH_800476(NATIONAL ASSESSMENT CENTRE SERVICE S (BUNGT MERAH)) on 22 Jul 2019 10:25	Photos	Normal	Photos 2019-7-22	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Jul 2019 10:25	Photos	Normal	Photos 2019-7-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Jul 2019 10:25	Photos	Normal	Photos 2019-7-22
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Jul 2019 10:24	Photos	Normal	Photos 2019-7-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Jul 2019 10:24	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Jul 2019 10:24	SAS	Normal	SAS 2019-7-22

Video List

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

ACCIDENT STATEMENT

ACCIDENT DATE: 20/07/2019 (DD/MM/YYYY). TIME: 09:55 (HH:MM)

LOCATION: Traffic Junction of North Buona Vista Rd and North Buona Vista Dr

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLA5761G
 b) INSURANCE COMPANY: Income
 c) POLICY NUMBER: 5088138126-02
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: Bmw/318i
 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) (NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: TAN KOK BOON (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1596599A CONTACT: 96523024
 c) ADDRESS: 15 WEST COAST WALK
#03-28 The PARC CONDOMINIUM S(127162)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

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

* d) DATE OF BIRTH: 15/11/1963 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) DATE OF DRIVING PASS: 26/09/1984

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

7. a) REPORTED TO POLICE (YES/NO) (NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLF 325P MODEL: VEZEL HONDA
 b) DRIVER'S NAME: IVAN LIM
 c) NRIC/FIN/PASSPORT: S7416648B CONTACT: 87380325

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
(including driver)
(3)

* No of passenger
(including driver)
(2)

* No of passenger
(including driver)
()

email = guowen@singnet.com.sg

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1596599A



Name
TAN KOK BOON

陳國文

Race
CHINESE

Date of birth
15-11-1963

Country/Place of birth
SINGAPORE

Sex
M



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S1596599A

Name
TAN KOK BOON

Birth Date: 15 Nov 1963

Issue Date: 06 Sep 2003



NRIC No: S1596599A



For LKK/NAC Use Only

Date of issue
02-01-2015

Address
15 WEST COAST WALK
#03-28
SINGAPORE 127162

5405975

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE
26 Sep 1994

For LKK/NAC Use Only



NP 428A

Hello, NAC_BUKIT_MERAH_800676

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

Policy Query

Policy No. Date of Accident
Vehicle No. (For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5088138126-02		TAN KOK BOON	S1596599A	GPC	drive PREMIUM	SLA5761G	SLA5761G	07/03/2019	06/03/2020