

NATIONAL Assessment Centre Services (cont. 1 Jan 2015) **MANA19095820**

Date to: 22/07/2019 17:05	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NBA/NA190/28974	E-mail (within Hrs. A/C Hrs):		
Veh No: 88B 8042H	i-Motor Claim Form: M/1054537001	23/07/2019	
D.O.A: 21/07/2019 15:30	i-Motor W/O (Within: OD 2hrs TP 4hrs):	10:05	
OD: TP & Reporting Only	i-Photo Uploaded:		
TP Insurer:	Assessment/Survey Report:		
	Ass't Report by Fax / Hand to Owner/Wksn:		

Preferred Wksp /MNC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Veh No: SLD 1642C 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:

NA1905522

Customer's Particulars:	Invoice Preparation Checklist:	Am't (\$) In Bill:	Am't (\$) Add. Bill:
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) PT: Follow-Through Survey (Resurvey) \$30		
Est. J:	For claiming against INC Only (w/ef 10 Jan 2015)		
Est. 2/3:	6) TR: Re-inspection \$75		
	7) NI: Idm DA + SMRT Survey \$100		
	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		
	* N11: TP (Non-INC) against INC \$20		
	* N12: Idm Mobile \$0		
	Invoice date:	Fee Charged	
		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	22/07/2019 17:05
Date Of Accident	21/07/2019 15:30
Exact Location Of Accident	CITY SQUARE MALL CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGB8042H
Insured/Policyholder	
Name Of Registered Owner	LIM SIEW TUAT
NRIC No	S0143326A
Email Address	WOSING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98594733
Alternative Phone No	OTHERS-62980609

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
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	REPORTING ONLY
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	5025427879-11
Cover Note Number	

Driver

Name of Driver	KOH WO SING (XU YUSHENG)
NRIC No	S7533242D
Date Of Birth	01/11/1975
Occupation	INDOOR
Date Of Driving Pass	20/05/2008
Driving Experience	11 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98594733
Fax Number	
Contact Number	OTHERS-62980609
Email Address	WOSING@GMAIL.COM

Address	16 JALAN MANIS
Postcode	329251
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	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	SLD1642C
Vehicle Make/Model/Colour	BMW
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NIKOLE TAN
NRIC/Passport Number	S9624387A
Contact Number	91720532
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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:



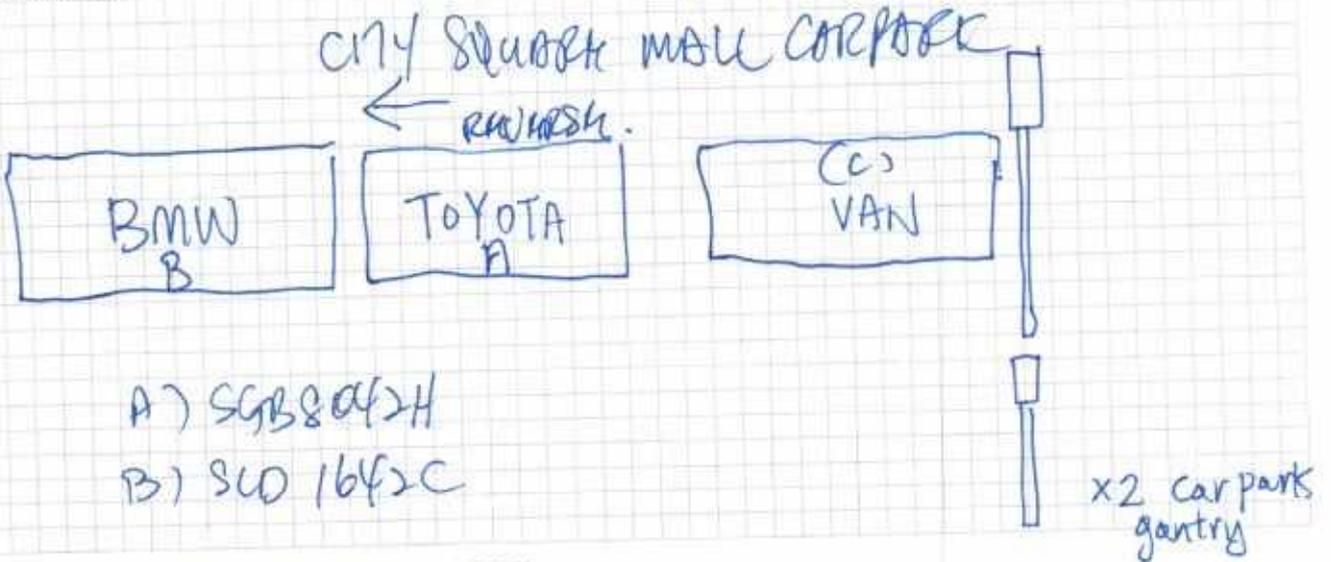
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

TOP VIEW



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

1 (TOYOTA) DRIVER, WAS BEHIND A VAN AND REVERSED INTO THE BMW, CAUSING A SMALL CRACK ON THE BONNET/BMW AND LOGO DROP.

DECLARATION

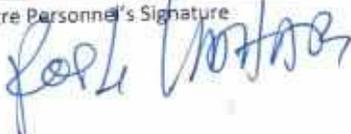
I/We declare the foregoing particulars are true in every respect.

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.:


 22/07/2019


Claim Handling

Accident HT/1054537

Policy No.	5025427879-11	Vehicle No.	5088042H	GST Registration No.	
Certificate No.					
Policyholder Name	LIM SEW TIAK			Policyholder NRIC	50143326A
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third Party, Fire & Theft	Leading	0
Contact No.(Mobile)	98394733	Contact No.(Office)	62980609	Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPI	<input type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	23/07/2019 09:59	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	23/07/2019	Time of Accident hh:mm	19:30	Country of Accident	Singapore
Reporting Centre		Orange Force		IDM No.	
Accident Location	CITY SQUARE MALL CARPARK				

Excess

Own Damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Unnamed Driver Excess	0.00	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	18 JALAN MARIS	Address 2	SINGAPORE 329751	Address 3	
Address 4		Address Type	Singapore address	Post Code	329211
Unit No.		Related Policy Number	5025427879-11		

DI Driver Info

Driver Name	KOH WO SENG	Driver Type	Named Driver		
Unnamed Driver Name		Driver NRIC	575332410	Driver DOB	01/11/1975
Register Date of Driver License	01/01/2000	Driver Age	43	Driving Experience	19
Contact No.(Mobile)	98394733	Contact No.(Office)	62980609	Contact No.(Home)	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Driver Vehicle No.	5088042H	Driver Insurer Company	NTUC

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Modification History

Claim 001 **View**

Claim Type * Insured Name Insured NRIC

Contact No.(Mobile) Contact No. (Home) Contact No. (Office)

Email Address Vehicle Number TP Vehicle Number

Claim Description Name of Preferred Workshop

Preferred Workshop Name No. Finalisation Insured Liability Repair Option CSA report

Date Registered Claim Close Date Date Received

Report Taken By

Print Acknowledgement

Save Submit

Attachment

Accident No.	HT/1054537	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	23/07/2019 10:05
Path *			
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	Category * <input type="text" value="Please Select"/>
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	Confidential <input type="text" value="NO"/>
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	Urgency * <input type="text" value="Normal"/>
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	Description * <input type="text" value=""/>
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	
<input type="button" value="Choose File"/>	No file chosen	<input type="button" value="Clear"/>	
<input type="button" value="Message Read"/>			<input type="button" value="Send Message"/>

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CO)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:05	Photos	Normal	Photos 2019-7-23	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:05	Photos	Normal	Photos 2019-7-23	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:05	Photos	Normal	Photos 2019-7-23	



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:05	Photos	Normal	Photos 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:05	Photos	Normal	Photos 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:05	Photos	Normal	Photos 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:05	Photos	Normal	Photos 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:05	Photos	Normal	Photos 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:04	Photos	Normal	Photos 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:04	Photos	Normal	Photos 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:04	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:04	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:04	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:04	SAS	Normal	SAS 2019-7-23

Video List

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

DRIVER LICENSE

ACCIDENT STATEMENT

ACCIDENT DATE: 24/07/2019 (DD/MM/YYYY), TIME: 15:30 (HH:MM)

LOCATION: CITY SQUARE MALL CAR PARK

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SGB8042H
- b) INSURANCE COMPANY: NTUC INCOME
- c) POLICY NUMBER: _____
- d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
- e) MAKE & MODEL: TOYOTA VIOS
- 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: LIM SIEW TUAJ (MALE / FEMALE) MALE
- B) NRIC/FIN/PASSPORT: S0143326A CONTACT: 62980609
- C) ADDRESS: 16 JALAN MANIS, S(329251)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: KOH WO SING (MALE / FEMALE) MALE
- b) NRIC/FIN/PASSPORT: S1533242D CONTACT: 98594733
- c) ADDRESS: 16 JALAN MANIS, S(329251)

No of passenger (including driver) (1)

*d) DATE OF BIRTH: 01/11/1975 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS _____

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) NO
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: SON

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: SLD 1642C MODEL: BMW
- b) DRIVER'S NAME: NIKOLE TAN
- c) NRIC/FIN/PASSPORT: S9624387A CONTACT: 91720532

No of passenger (including driver) (1)

9. THIRD PARTY VEHICLE

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

No of passenger (including driver) ()

email = wosing@gmail.com
VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7533242D



KOH WO SING
(XU YUSHENG)

许毓升

Race

CHINESE

Date of birth

01-11-1975

Sex

M

Country of birth

SINGAPORE



3952186



NRIC No. S7533242D

For LKK/NAC Use Only

Date of issue

31-10-2006

Address

15 JALAN MANIS
SINGAPORE 329251

REPUBLIC OF SINGAPORE

DRIVING LICENCE

Licence Number: **S 7 5 3 3 2 4 2 D**

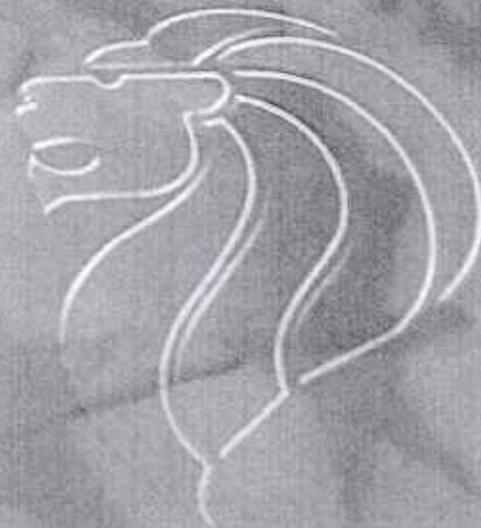
Name:

**KOH WO SING
(XU YUSHENG)**

For LKK/NAC Use Only

Birth Date: **01 Nov 1975**

Issue Date: **20 May 2008**



001604545C

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

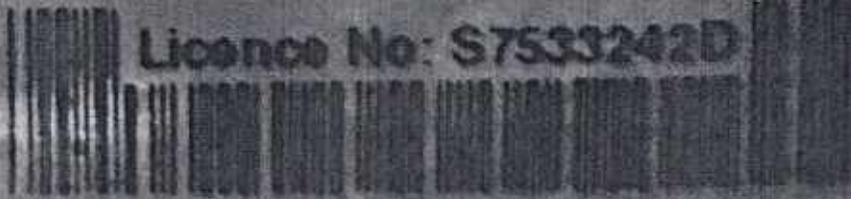
PASS DATE

**Class 3A Motor cars without clutch pedals (Auto) =< 3000kg
with =< 7 passengers, exclusive of the driver; and
other motor vehicles without clutch pedals =< 2500kg**

20 May 2008

For LKK/NAC Use Only

Licence No: S7533242D



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

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5025427879-11		LIM SIEW TUAT	S0143326A	GPC	Third Party, Fire & Theft	SGB8042H	SGB8042H	30/12/2018	29/12/2019

Continue