

NATIONAL Assessment Centre Services

Date In: 23/08/19	Job description	Date & Time Completed	Done by
Ref No: NA/INC19014901/13	SAS e-filing		
Veh No: SJ87787M	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 02/08/19 1325	i-Motor Claim Form	MT/1059212 - 001	
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: SLL75364 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

NA1906341

Invoice Preparation Checklist

Amt (\$) Amt (\$) 1st Bill Add Bill

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2/3:

- 1) AR: Accident Reporting (\$30);
- 2) DA: Damage Assessment (\$100); INC (\$80)
- 3) TF: Towing Fee \$40/\$45
- 4) FT: Follow-Through Survey \$120
- 5) FT: Follow-Through Survey (Resurvey) \$30
- For claiming against INC Only (wef 10 Jan 2005)
- 6) TR: Re-inspection \$75
- 7) NI: Idac DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- 9) NI2: 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	23/08/2019 11:24
Date Of Accident	02/08/2019 13:25
Exact Location Of Accident	JUNC OF LOWER DELTA RD & BUKIT MERAH
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJB7787M
Insured/Policyholder	
Name Of Registered Owner	TAN HOCK CHUAN
Co Reg No	53358312L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98283381
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER EX
Exact Purpose for which vehicle was being used at time of accident	GRAB
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5097551075-01
Cover Note Number	
Driver	
Name of Driver	TAN HOCK CHUAN
NRIC No	S1308096H
Date Of Birth	12/01/1958
Occupation	OUTDOOR
Date Of Driving Pass	14/02/1978
Driving Experience	41 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98283381
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 109A EDGEDALE PLAINS #04-109
Postcode	821109
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)	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

ON 02/08/2019 AT ABT 1324 HRS, I WAS DRIVING MY VEH ALONG LOWER DELTA RD ON THE 2ND LANE AND AFT WHICH I NOTICED A VEH B DRIVING CLOSER TO MY LANE. AS SUCH I DROVE NEARER TO MY LEFT A LITTLE AND OUT OF A SUDDEN VEH B LEFT SIDE MIRROR KNOCKED ONTO MY VEH RIGHT SIDE MIRROR. AFT WHICH, WE GOT DOWN TO TAKE PICTURES AND NO ONE WAS INJURED.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	HAVEN'T RETRIEVE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL7536U
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

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:

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

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

SKETCH PLAN

A - SJB 7787M
B - SLL 7536U

SCENE 2



SCENE 1

BUKIT MERAH
CENTRAL



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the statement.

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.:

CONFIDENTIAL

CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that Tan Hock Chuan,

NRIC/FIN S1308096H has reported to the Police a non-injury traffic accident

which occurred at Lower Delta Road nearing to cross junction of lower delta road and bukit merah on 02/08/2019 at around 1324hrs am/pm involving the following vehicles:

Complainant:

Tan Hock Chuan

S1308096H

HP: 98283381

Address: Blk 109A Edgedale Plains #04-109

SJB7787M



Punggol NPC
21A Tebing Lane
S (828837)
Tel: 1800-604-9999

CONFIDENTIAL

CONFIDENTIAL

Brief Details

BUKIT MERAH CTAL

On 02/08/2019 at about 1324hrs, I was driving my vehicle(SJB7787M) along lower delta-road on the second lane and after which I noticed a vehicle(SLL7536U) driving closer to my lane, as such I drove nearer to my left a little and out of a sudden vehicle(SLL7536U)'s left side mirror knocked onto my vehicle right side mirror. After which, we got down to take pictures. No one is injured. That is all.

If this accident was reported to the Police within 24 hours of its occurrence,

Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT(1) Darrel Choo

Date: 18/08/2019

Time: 2250hrs

S/D Ref: 116

Police Post/Unit: Punggol Neighbourhood Police Centre

Original – to be issued to informant

Duplicate – to be submitted to Traffic Police

CONFIDENTIAL

Version as of 15 Jan 2002


7180061
Punggol NPC
21A Tebing Lane
S (828837)
Tel: 1800-604-9999

CONFIDENTIAL

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1308096H



Name
TAN HOCK CHUAN
陈福泉
Race
CHINESE
Date of Birth
12-01-1958
Country of Birth
SINGAPORE

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1308096H

Name
TAN HOCK CHUAN

For LKK/NAC Use Only

Birth Date: 12 Jan 1958
Issuing Date: 04 Feb 2003




2446377



NRIC No. S1308096H

For LKK/NAC Use Only

Blood Group: B+ Date of issue: 04-10-1994

APT BLK 109A EDGE DALE PLAINS #04-109
SINGAPORE 821109

NRIC No: S1308096H Date: 08/01/2008 No: 5843530



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

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

PASS DATE
14 Feb 1973

For LKK/NAC Use Only

Licence No: S1308096H



NP 428A

Land Transport Authority

PDVL/TDVL
33 888 8888
251569

VOCATIONAL LICENCE
Licence No : S1308096H
Name : TAN HOCK CHUAN

For LKK/NAC Use Only

Please visit www.lta.gov.sg to check the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	05/07/2018

For LKK/NAC Use Only



Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="02/08/2019 13:25"/>							
Vehicle No. (For Motor)	<input type="text" value="SJB7787M"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5097551075-01		TAN HOCK CHUAN	53358312L	GPC	drivo CLASSIC	SJB7787M	SJB7787M	24/01/2019	23/01/2020
<input type="button" value="Continue"/>										

michaeltan2u@yahoo.com

Claim Handling

Accident MT/1059212

Policy No.	5097551075-01	Vehicle No.	SJB7787M	GST Registration No.
Certificate No.				
Policyholder Name	TAN HOCK CHUAN			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	98283381	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

▼ Accident Details

Report Date	24/08/2019 10:33	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	02/08/2019	Time of Accident hh:mm	13:25	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	JUNC OF LOWER DELTA RD & BUKIT MERAH			

▼ Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00	
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	24/08/2019 10:37:29 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	BLK 109A #04-109	Address 2	EDGEDALE PLAINS	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	04-109	Related Policy Number	5097551075-01	

▼ O1 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	TAN HOCK CHUAN	Driver NRIC	S1308096H	Driver DOB
Register Date of Driver License	14/02/1978	Driver Age	61	Driving Experience
Contact No.(Mobile)	98283381	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 109A	Address 2	EDGEDALE PLAINS	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#04-109			
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Com.

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	TAN HOCK CHUAN
Contact No.(Mobile)	98283381	Contact No.(Home)	
Email Address	michaeltan2u@yahoo.com	O1 Vehicle Number	SJB778
Claim Description	SJB7787M / SLL7536U ON 2 Aug 2019		
Preferred Workshop	Insured Liability	Not at Fault	
Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	24/08/2019 10:39	Claim Close Date	
Report Taken By	ROSILINDA	Workshop Repairer	

✓ Print AK letter

Save

Submit

Attachment



Accident No.	MT/1059212	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	24/08/2019 00:00

Path *		Category *	Confidential	
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO

Message Read

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Des.
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:39	NRIC/ Driving License	Y	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:39	NRIC/ Driving License	Y	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:39	SAS		Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:39	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:39	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:39	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:38	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:38	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:38	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:38	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:38	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Aug 2019 10:38	Photos		Normal	Photos

Video List

Uploaded By/Date

Folder Date

File Name



Display in New Window

Scan and uploading