

NATIONAL Assessment Centre Services. [wef 1 Jan'03] **MMA 11911665**

Date In: 3/9/19 14:37	Job description	Date & Time Completed	Done by
Ref No: NA/ C7319015559164	SAS e-filing		
Veh No: SLD 36J	E-mail (vehicle 3hrs, AIG 2hrs)		
Time: 3/9/19 09:00	I-Motor Claim Form		
UD: 0 Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wk312		

Profound Wisp / INC Assign Wisp / QW: ()		Tel: () Fax: ()	
TP Particulars:	Veh No: SKS 2607G	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%; P: 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 repaler.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Reminders: (INC 11911665)

1) Apply for Transport Allowance () / Courtesy Car ()	
2) QC Check / Post Repair Inspection ()	
3) Upload Resurvey Photo [Repair Cost > \$3000] ()	

Injury:

Date/Time	Actions

MA1906554		Invoice	Am't (\$)	Am't (\$)
Claimants Particulars:		1) AR: Accident Reporting (\$30)	30.00	
Driver/Owner:		2) DA: Damage Assessment (\$100) INC (\$80)		
Contact No:		3) TP: Towing Fee \$40/\$45		
Damaged Portion:		4) PT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):		5) PT: Follow-Through Survey (Resurvey) \$30		
Auditors Comments:		For claiming against INC Only (wef 10 Jan 2003)		
Adm. L:		6) TR: Re-inspection \$75		
		7) NI: Idao DA + SMRT Survey \$160		
		8) NTUC Additional Services:		
		ON*		
		*NS: Courtesy Car / Tpt Allowance \$5		
		*NG: Repair Co-ordination \$10		
		*NJ: Post Repair Inspection \$25		
		*NB: DV / Collect Excess Coordination \$5		
		TP (NI1): TP (Non INC) against INC \$20		
		9) NI2: Idao Mobile \$0		
		Invoice dated	Fax Charged	
		Invoice dated	Fax 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	03/09/2019 14:37
Date Of Accident	03/09/2019 09:00
Exact Location Of Accident	AYE TWDS CITY B4 ALEXANDRA EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD36J
Insured/Policyholder	
Name Of Registered Owner	NG PUEH TAT
NRIC No	S0631607G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97586339
Alternative Phone No	OFFICE-97586339

Vehicle Particulars

Manufacturer	BMW
Model	216D
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1728661902
Cover Note Number	-

Driver

Name of Driver	NG CHUN KAI (HUANG JUNKAI)
NRIC No	S8725818A
Date Of Birth	07/08/1987
Occupation	INDOOR
Date Of Driving Pass	03/07/2006
Driving Experience	13 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81214991
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 878B TAMPINES AVE 8 #04-27
Postcode	522878
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?	
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

REFER TO STATEMENT.

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	SKS2607G
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.:

A hand-drawn diagram on graph paper showing a road layout. The road is divided into four vertical lanes by vertical lines. From left to right:

- Lane 1: A left-turn arrow pointing left.
- Lane 2: An arrow pointing straight up.
- Lane 3: An arrow pointing straight up.
- Lane 4: An arrow pointing straight up.

 To the left of the road, there are two small house-like shapes, one labeled 'A' and one labeled 'B'. To the right of the road, the text 'AYE To City' is written. Further to the right, there are two lines of text: 'A=SLD 36J' and 'B=SKS 26076'.

I was travelling on the 3rd lane of AYE (towards city) and vehicle B (SKS 2607 G) changed lane from 4th lane to my lane without seeing me. That caused its front of the car to collide with my rear bumper. After accident vehicle B (SKS 2607 G) park behind me.

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

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

Accident Report Information

Accident Date	03/09/2019	Accident Time	09.00
Location Of Accident	AYE to City (before Alexandra Exit)		
Vehicle Registration No	SLD 36J		

INSURED/POLICYHOLDER (OWN VEHICLE)

Registered Owner Name	Ng Peh Tatt
NRIC No/ ROC No	S06316076
Mobile Phone No	9758 6339
Email Address	

VEHICLE INFORMATION

Manufacturer/ Model	BMW 216D Gran Tourer 1.5u		
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?	Own Damage
	COMMERCIAL USE		Third Party
	HIRER USE		Reporting Only
Vehicle Category	PRIVATE USE	TAXI	TANKER
	COMMERCIAL USE	BUS	PRIVATE HIRER
	MOTORCYCLE	MOTOR TRADE	GOVERNMENT

INSURANCE COMPANY (OWN VEHICLE)

Insurance Company	China Taiping Insurance	Fleet Policy	Yes / <u>No</u>
Policy Number	DMDCSA 1728661902	Type Of Coverage	Comprehensive
Cover Note Number			Third Party Only
			Third Party Fire or Theft

DRIVER IDENTIFICATION

Driver Name	Ng Chun Kai (Huang Junkai)	Driver NRIC	S8725818A
Date Of Birth	07/08/1987	Occupation	Indoor / Outdoor
Driving Date Pass	03/07/2006	Gender	Male / Female
Mobile Phone No	81214991	Email Address	
Address	Blk 878B Tampines Avenue 8 #04-27		Postcode 522878
Relationship	Employee Owner	Relative Friend	Children Sibling Hirer Parent

GENERAL INFORMATION OF THE ACCIDENT

Type Of Accident	Head to rear
Weather Condition	Clear / Raining / Others:
Road Surface	Dry / Wet / Others:

OTHER INFORMATION

Injured	<u>No</u> / Yes	Was there any other vehicle or property damaged?	No / <u>Yes</u>
Was any injured conveyed to hospital by ambulance?	<u>No</u> / Yes	Was any foreign vehicle involved in this accident?	No / <u>Yes</u>
Foreign Vehicle Registration Number		Foreign Vehicle Category	
Police Report	<u>No</u> / Yes		
Number of Passengers (Including Driver)	1		
Passenger Details	Male / Female - 1.		
	Male / Female - 2.		
	Male / Female - 3.		
	Male / Female - 4.		
	Male / Female - 5.		
Car Camera ?	<u>No</u> / <u>Yes</u>		

DETAILS OF OTHER VEHICLE 1

Vehicle Registration No	SKS 2607 G		
Name of Driver	Singhal		
Driver's NRIC		Contact Number	91334636

DETAILS OF OTHER VEHICLE 2

Vehicle Registration No			
Name of Driver			
Driver's NRIC		Contact Number	

DETAILS OF OTHER VEHICLE 3

Vehicle Registration No			
Name of Driver			
Driver's NRIC		Contact Number	

DETAILS OF WITNESS

Name of Witness			
Witness 's NRIC		Contact Number	
Address Line			
Email			

MOTOR PRIVATE CAR

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)

PLM 328004

ORIGINAL

CERTIFICATE No.

DMPCSN1728661902

Engine No : 36699519B37C15A

ChasNo: WBA2E320105B44894

1. Index Mark and Registration
Number of Vehicle

SLD36J

2. Name of Policy Holder

NG PUEN TAT

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

03 May 2019

Named Drivers Ex Sect. I S\$500.00

Additional Ex Other than Named Drivers:

4. Date of Expiry of Insurance

02 May 2020

Ex Sect. I - Age <= 25 S\$3,000.00

Ex Sect. I - Age >= 26 S\$500.00

* Age as at date of accident

EX ON WINDSCREEN S\$100.00

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his 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.

6. Limitations as to use.*

Use for social, domestic and pleasure purposes and for the Policyholder's business.
The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : DBS BANK LTD AS HP OWNER

* 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 Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

Authorised Officer

Authorised Signatory