

NATIONAL Assessment Centre Services.

[ver 1 Jan 2005]

17/04/2009

Date In: 05/09/2009 17:48	Job description	Date & Time Completed	Done by
Ref No: 104/INC/90/5159/4	SAS e-Milling		
Veh No: 4V 1376E	E-mail (to John Blue, AIC 2hrs)		
DOA: 04/09/2009 14:50	I-Motor Claim Form	11/06/2009	06/09/2009
OD: TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		09:33
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

SGT 7951M

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 repairer.

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

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

Remarks: ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time: ()

Actions: ()

Comments: ()

Signature: ()

Stamp: ()

Initials: ()

Notes: ()

Driver/Owner: ()

Contact No: ()

Damaged Portion: ()

QC Checked by (Engr-In-Charge): ()

Auditor's Comments: ()

Date: ()

Page: ()

Invoice: ()

Fee Charged: ()

Invoice dated: ()

Fee Charged: ()

Invoice dated: ()

Fee Charged: ()

Invoice dated: ()

Fee Charged: ()

Invoice dated: ()

Fee Charged: ()

Invoice dated: ()

Fee Charged: ()

Invoice dated: ()

Fee Charged: ()

Invoice dated: ()

Fee Charged: ()

Invoice dated: ()

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	05/09/2019 17:48
Date Of Accident	04/09/2019 14:50
Exact Location Of Accident	OUTSIDE 44 ONE TREE HILL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GV1376K
Insured/Policyholder	
Name Of Registered Owner	TAN AH CHWEE
NRIC No	S1434816F
Email Address	HANCARREPAIRS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97306447
Alternative Phone No	OFFICE-97306447

Vehicle Particulars

Manufacturer	NISSAN
Model	D/CAB PICK UP
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5060125603-06
Cover Note Number	

Driver

Name of Driver	TAN AH CHWEE
NRIC No	S1434816F
Date Of Birth	22/10/1960
Occupation	OUTDOOR
Date Of Driving Pass	06/07/1982
Driving Experience	37 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97306447
Fax Number	
Contact Number	OFFICE-97306447
EMail Address	HANCARREPAIRS@GMAIL.COM

Address	BLK 26A JALAN MEMBINA #17-212
Postcode	162026
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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	SLG7931M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	96353385
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:

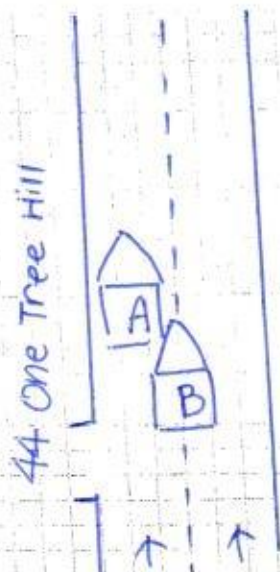
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

 05/09/2019
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

SKETCH PLAN



Vehicle A: GV1376K
Vehicle B: SLG7931M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle (A) was parked ~~at~~ outside 44 One Tree Hill on 04/09/19

at about 1450Hrs.

When I got back to my vehicle, I found a note from vehicle B that it had hit onto my vehicle A and asked me to call her.

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.:

05/09/2019

Wed 4 Sep 2019

I hit your car
when I was driving
pass this road.

Sorry about that.

Please call me.

9635 3385

Kuo.

2.50 pm

gn/05/09/2019
Rosh Winters

Claim Handling

Accident MT/1061212

Policy No.	9060125603-06	Vehicle No.	GV1376K	GST Registration No.	
Certificate No.					
Policyholder Name	TAN AH CHWEE			Policyholder NRIC	S1434816F
Product Code	COMMERCIAL VEHICLE INSURAT	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	97306447	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	No

Accident Details

Report Date	06/09/2019 09:29	Accident Report Within 24 hrs	Yes	Accident Type	Damaged whilst parked
Date of Accident	04/09/2019	Time of Accident hh:mm	14:50	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	OUTSIDE 44 ONE TREE HILL				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	0.00		
OD Standard Excess	0.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Covered
Additional Excess					
Total OD Excess Applicable	0.00	Total TP Excess Applicable	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	BLK 26A #17-212	Address 2	JALAN MEMBINA	Address 3	SINGAPORE 162026
Address 4		Address Type	Singapore address		
Unit No.	17-212	Related Policy Number	5060125603-06	Post Code	162026

DI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TAN AH CHWEE	Driver NRIC	S1434816F	Driver DOB	22/10/1960
Register Date of Driver License	06/07/1982	Driver Age	58	Driving Experience	37
Contact No.(Mobile)	97306447	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 26A #17-212	Address 2	JALAN MEMBINA	Address 3	SINGAPORE 162026
Address 4		Address Type	Singapore address		
Unit No.	17-212			Post Code	162026
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	GV1376K	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No
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Modification History

Claim 001 New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop Rollback No. Finalisation

Date Registered

Report Taken By

Print AK letter

Insured Name

Contact No. (Home)

TP Vehicle Number

Name of Preferred Workshop

Insured NRIC

Contact No. (Office)

Vehicle Number

Insured Liability

Preferred Repair Option

Preferred Workshop, Name unknown

GIA report

Received

Claim Close Date

Data Received

Save

Submit

Attachment

Upload

Accident No.	MT/1061212	Claim No.	001
Last Doc. Received	Yes No	Upload Date	06/09/2019 09:33

Path *

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Message Read

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

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 06 Sep 2019 09:33	Photos	Normal	Photos 2019-9-6	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:33	Photos	Normal	Photos 2019-9-6	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:33	Photos		Normal	Photos 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:33	Photos		Normal	Photos 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:33	Photos		Normal	Photos 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:33	Photos		Normal	Photos 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:32	Photos		Normal	Photos 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:32	Photos		Normal	Photos 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:32	Photos		Normal	Photos 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:32	Photos		Normal	Photos 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:32	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2019-9-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Sep 2019 09:32	SAS		Normal	SAS 2019-9-6

Video List

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

PERSONAL PARTICULARS

Date of Accident: 04/09/2019 Time of Accident: 14:50 (24Hrs)
Vehicle No: GVI376K Vehicle Make/Model: Nissan PUP D/CAB (2664cc)
Exact Location of Accident: Outside 44 One Tree Hill
Owner's Name/NRIC: Tan Ah Chwee / S1434816F
Driver's Name/NRIC: Tan Ah Chwee / S143816F
Driver's Contact: 97306447 Insurance Co & Policy No: NTUC Income
Driver's Email Address: hancarepairs@gmail.com
Relationship between Owner & Driver: Spouse/Children/Friend/Parents/Others specify: -

What do you wish to claim (Please circle one only)

1) Own Insurance 2) Other Vehicle The one you want to claim against 3) Reporting (For Recording Purposes)

Exact Purpose for which the vehicle was being used at time of accident? (Please circle one only)

Private Use / Work Purpose

Weather Condition & Road Conditions?

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet

Occupation

Indoor / Outdoor

Any Injuries? (MC of 3 Days or more, police report is required)

Yes / No If Yes, which police station? _____

The Other Party (Vehicle B) Details

Driver's Name/IC: _____

Vehicle No: SLG 7931M

Insurance Company: _____

Driver's Contact: 96353385

(If more than 2 vehicles involved, please indicate the other party vehicle numbers below)

Other Vehicle (Vehicle C): _____

Independent Witness (If Any): _____ Contact: _____

Preferred Workshop (If Any): _____ Contact: _____

* If no proper document are produced, IDAC should not file the report.

* Information will be discarded after one week.

Hello, NAC_BUKIT_MERAH_800676

Change Language Change Password Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.

Date of Accident

04/09/2019 17:47

Vehicle No.(For Motor)

GV1376K

Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5060125603-06		TAN AH CHWEE	S1434816F	GCV	Third Party	GV1376K	GV1376K	08/06/2019	07/06/2020

Continue