

# NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: <b>06/09/19</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA/INC19015816/13</b>	SAS e-filing		
Veh No: <b>SKF269E</b>	E-mail (Within 8 hrs, AIC 2hrs)		
D.O.A: <b>05/09/19 0330</b>	i-Motor Claim Form	<b>MT/1061332 - 001</b>	
OD <b>(TP)</b> Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: (		Tel:	Fax:
TP Particulars:	Veh No: <b>SKJ6080X</b>	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

<b>NA1906752</b>	<b>Invoice Preparation Checklist</b>	<b>Amt (\$)</b> 1st Bill	<b>Amt (\$)</b> Add Bill
<b>Claimant's Particulars :-</b>	1) AR : Accident Reporting (\$30);		
<b>Driver/Owner:</b>	2) DA : Damage Assessment (\$100); INC (\$80)		
<b>Contact No:</b>	3) TF : Towing Fee \$40/\$45		
<b>Damaged Portion:</b>	4) FT : Follow-Through Survey \$120		
<b>QC Checked by (Engr-In-Charge):</b>	5) FT : Follow-Through Survey (Resurvey) \$30		
<b>Auditors' Comments :-</b>	<i>For claiming against INC Only (wef 10 Jan 2005)</i>		
<b>Cat. 1:</b>	6) TR : Re-inspection \$75		
<b>Cat. 2 / 3:</b>	7) N1 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11) : TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
	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	06/09/2019 15:03
Date Of Accident	05/09/2019 03:30
Exact Location Of Accident	ALONG BEACH RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF269E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	FABIAN HEW WEN GUANG
NRIC No	S9443536F
Email Address	FABIANHEW94@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92731030
Alternative Phone No	OTHERS-92731030

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E250
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	5111191813
Cover Note Number	

### Driver

Name of Driver	FABIAN HEW WEN GUANG
NRIC No	S9443536F
Date Of Birth	25/11/1994
Occupation	INDOOR
Date Of Driving Pass	02/01/2014
Driving Experience	5 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92731030
Fax Number	
Contact Number	OTHERS-92731030
Email Address	FABIANHEW94@GMAIL.COM

Address	BLK 577 HOUGANG AVE 4 #15-660
Postcode	530577
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	COLLISION - CHANGE/CROSS LANE
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?	YES
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)	4
Passenger 1	NAME: : ROGER LOO GENDER: : MALE
Passenger 2	NAME: : DERRICK LOO GENDER: : MALE
Passenger 3	NAME: : LORAIN HEW 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

I WAS TRAVELLING STRAIGHT ALONG BEACH ROAD ON THE EXTREME RIGHT LANE OF A3-LANES RD. SUDDENLY VEH(B) BEARING REG NO SKJ6080X FROM MY LEFT LANE CUT INTO MY LANE AND HIT ONTO MY FRT LEFT SIDE PORTION OF MY VEH. DUE TO THE IMPACT MY VEH PUSHED TO THE RIGHT AND HIT THE KERB.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	NOT RECORDED
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKJ6080X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver	BEN
NRIC/Passport Number	
Contact Number	87144404
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	FABIAN HEW WEN GUANG
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SKF269E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

#### DETAILS OF INJURED PERSON 2

Name	DERRICK LOO
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SKF269E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

#### DETAILS OF INJURED PERSON 3

Name	ROGER LOO
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SKF269E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

#### DETAILS OF INJURED PERSON 4

Name	LORAIN HEW
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SKF269E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	



## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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:

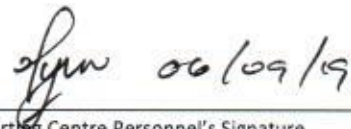
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 06/9/19

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



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AS PER ATTACHED

pls refer to the statement.

Policyholder's Signature \_\_\_\_\_  
Date & Time: 06/09/19

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

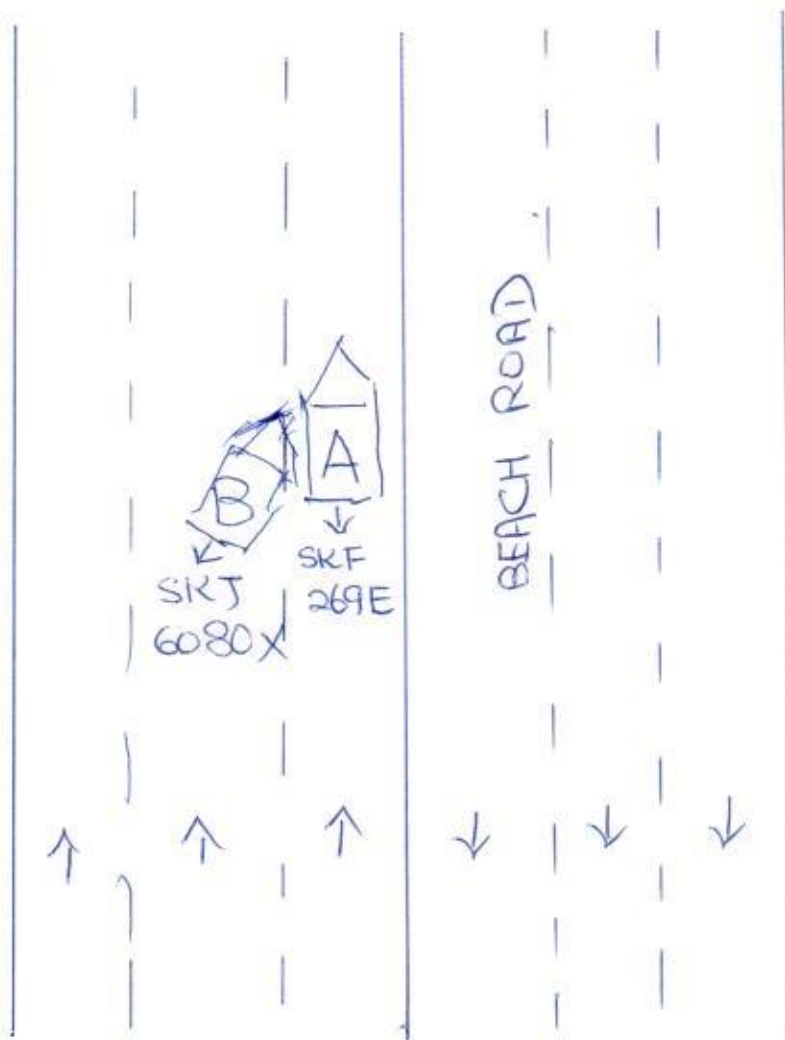



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Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

HP 92731030

5/9/2019  
03:30 AM  
SKF 269E





## 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)

Certificate Number: 5111191813

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SKF269E**  
Chassis Number : **WDD2073472F055185**
2. Name of Policyholder : **FABIAN HEW WEN GUANG**
3. Effective Date of Insurance : **19 Jul 2019**
4. Expiry Date of Insurance : **21 Jul 2020**
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/her 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#  
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: FABIAN HEW WEN GUANG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: KENSO LEASING PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : B.A.S. INSURANCE AGENCY (00000573236)  
Date of Issue : 19 Jul 2019 10:50 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



## Enquire Vehicle Registration Details

## Owner Particulars

NRIC/Passport/Company Cert No.: S9443536F  
Owner ID Type: Singapore NRIC  
Owner Name: FABIAN HEW WEN GUANG  
Registered Address: APT BLK 577 HOUGANG AVENUE 4 #15-660 SINGAPORE 530577  
Mailing Address: -  
Birth Date: 25 Nov 1994

## Vehicle Particulars

Vehicle No.: SKF269E  
Previous Vehicle No.: -  
Effective Date of Ownership: 19 Jul 2019  
Original Regn Date: 22 Jul 2010  
Registration Date: 22 Jul 2010  
Year of Manufacture: 2010  
Vehicle Type: Passenger Motor Car  
Vehicle Scheme: -  
Vehicle Attachment 1: No Attachment  
Vehicle Attachment 2: -  
Vehicle Attachment 3: -  
Vehicle Make: MERCEDES BENZ  
Vehicle Model: E250 CGI A  
Primary Colour: Black  
Secondary Colour: -  
Passenger Capacity: 3  
Chassis No.: WDD2073472F055185  
Engine No.: 27186030079485  
Engine Capacity / Power Rating: 1796 cc / -  
Maximum Power Output: 150.0 kW ( 201 bhp )  
Propellant: Petrol  
Max Unladen Weight: 1575 kg  
Maximum Laden Weight: 2045 kg  
Open Market Value: \$50,804.00  
PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 21 Jul 2020  
Minimum PARF Benefit: \$25,402.00  
No. of Transfers: 3  
IU Label No.: 1123799794  
COE No.: 2010080103000470D  
COE Expiry Date: 31 Aug 2029  
COE Category: B - Car (1601cc & above)  
COE Registration Category: B - Car (1601cc & above)  
Quota Premium (QP) / Prevailing Quota Premium: \$35,909.00 / -  
PQP Paid: \$39,936.00  
QP (Regn Cat): \$35,909.00  
OPC Cash Rebate Eligibility: No  
QP during COE Bidding Exercise: \$35,909.00  
Additional Registration Fee Rate: 100.00 %  
Actual ARF Paid: \$50,804.00  
Vehicle Lifespan Expiry Date: No Lifespan  
CO2 Emission: -  
CO Emission: -  
HC Emission: -  
NOx Emission: -  
PM Emission: -  
Message: To renew the COE, the Prevailing Quota Premium payable is that of Category B.

Print

OK

Save as PDF

Claim Handling

Accident MT/1061332

Policy No.	5111191813	Vehicle No.	SKF269E	GST Registration No.
Certificate No.				
Policyholder Name	FABIAN HEW WEN GUANG			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	92731030	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input 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	06/09/2019 19:20	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	05/09/2019	Time of Accident hh:mm	03:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG BEACH RD			

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00	
OD Standard Excess		TP Standard Excess	0.00	
YIED OD Excess		YIED TP Excess	0.00	Driver is Covered?
Additional Excess				
Total OD Excess Applicable		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 577 #15-660	Address 2	HOUGANG AVENUE 4	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5111191813	

▼ OI Driver Info

Driver Name	FABIAN HEW WEN GUANG	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S9443536F	Driver DOB
Register Date of Driver License	02/01/2014	Driver Age	24	Driving Experience
Contact No.(Mobile)	92731030	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 577	Address 2	HOUGANG AVENUE 4	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#15-660			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Com.

Declaration

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

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	FABIAN
Contact No.(Mobile)	92731030	Contact No. (Home)	
Email Address	FABIANHEW94@GMAIL.COM	OI Vehicle Number	SKF269
Claim Description	SKF269E / SKJ6080X ON 5 Sept 2019		
Preferred Workshop		Insured Liability	Not at Fault
Repair Option	Yes	Preferred Workshop, Name unknown	
Date Registered	06/09/2019 19:24	GIA report	Received
		Claim Close Date	



Print AK letter

Save Submit

Attachment

Accident No. MT/1061332

Claim No. 001

Last Doc. Received ☒ Yes ☐ No

Upload Date 06/09/2019 00:00

Path \*

Category \*

Confidential

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

Choose File No file chosen

Message Read

Clear

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NO

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NO

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NO

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NO

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NO

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NO

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NO

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Desi
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	NRIC/ Driving License	Y	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	SAS		Normal	SAS
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:23	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:22	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:22	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:22	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:22	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:22	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:22	Photos		Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Sep 2019 19:22	Photos		Normal	Photos

Video List

Uploaded By/Date	Folder Date	File Name
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Scan and uploading