

# NATIONAL Assessment Centre Services.

[ver 1 Jan'05]

Nov 18/2024

Date In: 13/09/2024 10:59	Job description	Date & Time Completed	Done by
Ref No: 238/1001901622/4	SAS e-illing		
Veh No: SLP 5861K	E-mail (to John Shee, AIC 2hrs)		
QOA: 1109/2024 08:15	I-Motor Claim Form		
OID: TP (Reporting Only)	I-Motor W/O (Withlet OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SLP 5861K	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: ( )

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

Injury: \_\_\_\_\_

Date of Incident:	Location:

Driver/Owner:	1) AIL: Accident Reporting (\$30)	
Contact No:	2) DA: Damage Assessment (\$100) INC (\$10)	
Damaged Portion:	3) TP: Towing Fee \$40/\$45	
	4) PT: Follow-Through Survey \$120	
	5) PT: Follow-Through Survey (Resurvey) \$30	
	For claiming against INC Only (ver 10 Jan 2003)	
	6) TR: Re-inspection \$75	
	7) NI: Ideal DA + SMRT Survey \$160	
	8) NTUC Additional Services:	
	ON:	
	* NS: Courtesy Car / Tpl Allowance \$3	
	* N6: Repair Co-ordination \$10	
	* N7: Post Repair Inspection \$25	
	* N8: DV / Collect Excess Coordination \$5	
	TE (NI): TP (Non INC) against INC \$20	
	* N12: Ideal Mobile \$0	
QC Checked by (Engr-In-Charge):	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	13/09/2019 10:59
Date Of Accident	11/09/2019 08:15
Exact Location Of Accident	OPEN CARPARK INFRONT OF NO. 16A SUNGEI KADUT WAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD5861K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN HAN PENG
NRIC No	S7735231G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96888084
Alternative Phone No	OTHERS-96888084

### Vehicle Particulars

Manufacturer	NISSAN
Model	X-TRAIL-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00010023
Cover Note Number	

### Driver

Name of Driver	TAN HAN PENG
NRIC No	S7735231G
Date Of Birth	06/12/1977
Occupation	OUTDOOR
Date Of Driving Pass	10/10/1996
Driving Experience	22 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96888084
Fax Number	
Contact Number	OTHERS-96888084
Email Address	NOEMAIL

Address	BLK 278A COMPASSVALE BOW #16-547
Postcode	541278
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?	YES
If Yes, Please state which Police Station	
Police Station Name	WHAMPOA NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 29 JALAN BAHAGIA , POSTCODE: 320029 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2507999 - FAX NO: 63554314
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190912/2111

#### 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	SLR3091E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	


## 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: Kas L. Lim  
NRIC/FIN No.:



A diagram showing a rectangular block labeled 'A' resting on a horizontal surface. A string is attached to the right side of block 'A', passes over a pulley at the edge of the surface, and then hangs vertically down to a smaller rectangular block labeled 'B'. Block 'B' is suspended in the air. The surface is indicated by a horizontal line with diagonal hatching below it. The pulley is represented by a small semi-circle at the edge of the surface.

Vehicle A: SLD5861K  
vehicle B: SLR3091E

Carpark @ No. 16 Sungai Kadut Wang

Please Refer to the police Report attached .

1/20190912/2111

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

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

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

13/09/2019

Personnel's Signature *Ross Weston*



# SINGAPORE POLICE FORCE



T/20190912/2111

1 of 3

Police Station Of Origin:  
Whampoa NPP  
29 Jalan Bahagia #01-368 SINGAPORE  
320029  
Tel No: 1800-2507999

Report No. T/20190912/2111

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/09/2019 16:20		Vide Report No.:		Station Diary No.: 11	
<b>Informant's Particulars</b>					
Name of Informant: TAN HAN PENG			Address: APT BLK 278A COMPASSVALE BOW #16-547 SINGAPORE 541278		
ID Type / ID No.: NRIC NO / S7735231G			Contact No.: Home/Office:		Mobile: 96888084
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 41	Date of Birth: 06/12/1977	Type of Informant: Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Sales and marketing manager			Driving Licence Information: Class: 2B,2A,3		Date of Expiry:

## General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 12/09/2019 08:05	Type of Location: Car Park
Location: Along Road 1 SUNGEI KADUT WAY Open space carpark in front of No. 16A Sungei Kadut Way				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume:
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SLD5861K	Car	NISSAN	Xtrail	White	Slightly Damaged	0
SLR3091E	Car					0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLD5861K	FWD Singapore Pte. Ltd	PNPV2019-00010023	23/06/2019	22/06/2020



**SINGAPORE  
POLICE FORCE**



T/20190912/2111

Police Station Of Origin:  
Whampoa NPP  
29 Jalan Bahagia #01-368 SINGAPORE  
320029  
Tel No: 1800-2507999

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Report No: T/20190912/2111

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Vehicle Owner</b>			
Name	TAN HAN PENG	ID No.	S7735231G
Related Vehicle	NIL	Contact No	96888084
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the 11/09/2019, at about 8.15 am, I had parked my vehicle, SLD5861K, at the car park in front of No. 16A Sungei Kadut Way. As the car park was full at that time, I had parked it near the entrance. However there was still a lot of space for cars to pass through. I then went to purchase food at the coffee shop, for take away and left within 5 minutes. I did not notice anything amiss then as I did not make a check on my car. On the 12/09/2019, at about 8.15 am, I returned to the same car park. After alighting my vehicle, I went to the same coffee shop and was approached by one Chinese man who is a regular customer there. He told me that he had witnessed a car, SLR3091E, had grazed onto the passenger side front door of my vehicle on 11/09/2019, when I parked my vehicle at the same car park. He did not tell me at that time as he did not know who is the owner of the car. I then went to make a check on my car and noticed that there are scratches on the front passenger door. There were traces of red paint on it. I have an in car camera, however it is not recording when the engine is off. The Chinese man told me that he is willing to be a witness to the case.





**SINGAPORE  
POLICE FORCE**



T/20190912/2111

Police Station Of Origin:  
Whampoa NPP  
29 Jalan Bahagia #01-368 SINGAPORE  
320029  
Tel No: 1800-2507999

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Report No. T/20190912/2111

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E /

Sr Staff Sgt NURSYAIMA BINTE ABDUL AZIZ

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

12/09/2019 16:20

Officer In Charge Of Case:

TP / HRT /

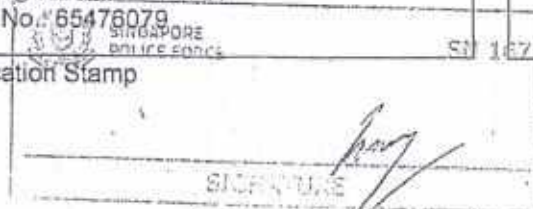
Sr Staff Sgt NEO ZHI YUAN

Contact No: 65478079

Classification Of Case:

Authentication Stamp

NP168





# SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 11.09.2019		TIME: 08:15hrs		(hh:mm) 24 hrs Format	
LOCATION: Carpark e 16A Sungei Kadut Way					
VEHICLE NUMBER: SLR 5861K					
INSURED NAME: Tan Han Peng					
NRIC/FIN: S77352316		CONTACT: 9688 8084			
MAKE: Nissan		MODEL: X-Trail 2.0 CVT ABS 4WD SR 7-STR			
Are you claiming under your own insurance policy for repair to your vehicle?					
( ) Yes, If No, Pls Select : ( <input checked="" type="checkbox"/> ) Third Party ( ) Reporting Only					
INSURANCE COMPANY: FMO					
TYPE OF POLICY ( ) COMPREHENSIVE ( ) THIRD PARTY ( ) TPFT					
POLICY NUMBER: YNPV 2014-00010023					
NAME DRIVER:				( <input checked="" type="checkbox"/> ) SAME AS INSURED	
NRIC / FIN		CONTACT:			
DATE OF BIRTH: 06.12.1977					
DRIVING PASS DATE: 10.10.1996					
OCCUPATION: ( ) INDOOR ( <input checked="" type="checkbox"/> ) OUTDOOR					
GENDER: ( <input checked="" type="checkbox"/> ) MALE ( ) FEMALE					
EMAIL ADDRESS: ( ) NO EMAIL					
ADDRESS OF DRIVER: 278A Compassvale Bow #16-547 (5412782)					
Number Of Passenger Include Driver: Stationary					
Was driver an employee of the Insured's Company? ( ) YES ( <input checked="" type="checkbox"/> ) NO					
If No, Relationship Of The Driver With The Insured					
( <input checked="" type="checkbox"/> ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling ( ) Others					
Does The Driver Own Any Other Vehicle?: ( ) YES ( <input checked="" type="checkbox"/> ) NO					
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:					
Insurance Company Of Driver's Own Vehicle					
Weather Conditions: ( <input checked="" type="checkbox"/> ) Clear ( ) Raining ( ) Drizzling ( ) Others					
Road Surface: ( <input checked="" type="checkbox"/> ) Dry ( ) Wet ( ) Others					
Was Any Foreign Vehicle Involved In This Accident? ( ) YES ( <input checked="" type="checkbox"/> ) NO					
Was Anybody Injured In The Accident? ( ) YES ( <input checked="" type="checkbox"/> ) NO					
If YES, Injured details:					
Convey By Ambulance: ( ) YES ( <input checked="" type="checkbox"/> ) NO					
Was There Any Video Capture By Car Camera? ( ) YES ( <input checked="" type="checkbox"/> ) NO					
Was There Accident Reported To The Police? ( ) YES ( <input checked="" type="checkbox"/> ) NO If Yes Attach Police Report					
Police Report Number (if any)					
Details Of 3rd Party		Name / NRIC		No.of Paxs (incl'driver)	
Veh B		SLR 3091E		( ) / Not Sure ( )	
Veh C				( ) / Not Sure ( )	
Veh D				( ) / Not Sure ( )	
Veh E				( ) / Not Sure ( )	
Veh F				( ) / Not Sure ( )	
Veh G				( ) / Not Sure ( )	



## CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance  
if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

**POLICY NUMBER:** PNPV2019-00010023 (Comprehensive - Classic Plan)

**Car plate number:** SLD5861K

**Your name (As the policyholder):** Tan HanPeng

**Coverage start date:** 23/06/2019

**Coverage end date:** 22/06/2020

**Covered geographical area:** Singapore, West Malaysia and Southern Thailand

**Who is insured to drive:**

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

**Important things to know:**

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

**Finance company:** HL Bank

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

**Issued on:** 31/05/2019

**Abhishek Bhatia**  
Chief Executive Officer  
FWD Singapore Pte Ltd

Please immediately inform us at +65-6820-8888  
or email us at [contact.sg@fwd.com](mailto:contact.sg@fwd.com) if any details  
in this Certificate of Insurance need to be changed.



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 231G

### Vehicle Details

Vehicle No.: SLD5861K  
Vehicle to be Exported: No  
Intended Deregistration Date: 30 Sep 2019  
Vehicle Make: NISSAN  
Vehicle Model: X-TRAIL 2.0 CVT ABS 4WD S/R 7-STR  
Primary Colour: White  
Manufacturing Year: 2016  
Engine No.: MR20868499B  
Chassis No.: JN1JANT32Z0002112  
Maximum Power Output: 106.0 kW (142 bhp)  
Open Market Value: \$22,572.00  
Original Registration Date: 23 Jun 2016  
First Registration Date: 23 Jun 2016  
Transfer Count: 0  
Actual ARF Paid: \$23,601.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 22 Jun 2026  
PARF Rebate Amount: \$17,700.00

### Intended COE Rebate Details

COE Expiry Date: 22 Jun 2026  
COE Category: B - Car above 1600cc or 97kW (130bhp)  
COE Period(Years): 10  
QP Paid: \$56,000.00  
COE Rebate Amount: \$37,675.00  
**Total Rebate Amount: \$55,375.00**

The information contained herein is correct as at 13 Sep 2019

OK