

# NATIONAL Assessment Centre Services. [part 1 Jan'08]

NA/19129084

Date In: 30/09/2019 13:25	Job description	Date & Time Completed	Done by
Ref No: N/A/C11/90/1141/Y	SAS e-filing		
Veh No: PC 8014C	E-mail (4/4) 8hrs, A/C 2hrs		
D.O.A: 30/09/2019 08:10	1-Motor Claim Form		
OD (TP) Reporting Only	1-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/Whan		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SHB 5168E	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 repolior.

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

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

Reminders:

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

2) QC Check / Post Repair Inspection ( )

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

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

Date: \_\_\_\_\_

NA/1907284	1) All: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$10)	
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	
Author's Comments:	For claiming against INC Only (over 10 Jan 2005)	
Ref: 1:	6) TR: Re-inspection \$75	
	7) NI: 1 day DA + SMRT Survey \$160	
	8) NTUC Additional Services:	
	OR:	
	*NS: Courtesy Car / Tpl Allowance \$3	
	*N6: Repairs Co-ordination \$10	
	*N7: Post Repair Inspection \$25	
	*N8: DV / Collect Excess Coordination \$3	
	TP (Nil): TP (Sua INC) against INC \$20	
	9) NI: 1 day 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	30/09/2019 13:25
Date Of Accident	30/09/2019 08:10
Exact Location Of Accident	ALONG TANJONG PENJURU
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC8014C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	IEXPRESS
Co Reg No	53049525B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96988118
Alternative Phone No	OFFICE-83218997

### Vehicle Particulars

Manufacturer	GOLDEN DRAGON
Model	XML6772J18 AUTO
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	BUS

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMB1SN30044821900
Cover Note Number	

### Driver

Name of Driver	HENG HUA HOE
NRIC No	S1582606A
Date Of Birth	02/01/1963
Occupation	OUTDOOR
Date Of Driving Pass	01/02/1989
Driving Experience	30 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96988118
Fax Number	
Contact Number	OTHERS-83218997
EEmail Address	NOEMAIL

Address	BLK 903 TAMPINES AVENUE 4 #07-310
Postcode	520903
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	WET

#### 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

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	SHB5768E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM KEANG PENG
NRIC/Passport Number	S1217340G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



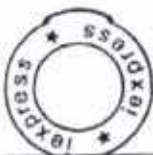
## SKETCH PLAN

### 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.

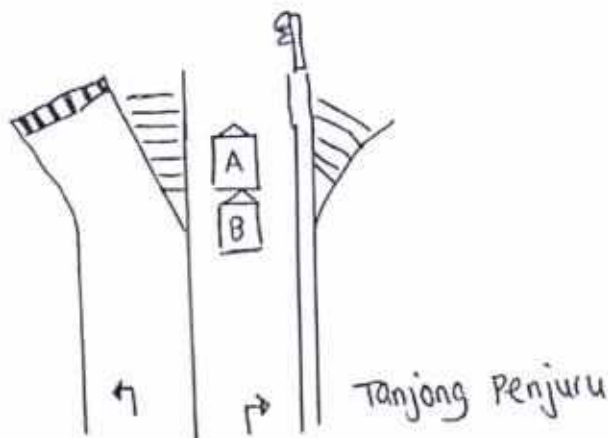


Policyholder's Signature  
Date & Time:

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

30/09/2015  
Reporting Centre Personnel's Signature  
Name: *Pasha Khan*  
NRIC/FIN No.:

SKETCH PLAN



A= PC8014C

B= SHB5768E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30/09/19 @ 08:10hrs, my bus PC8014C was stationary @ Tanjong Penjuru due to red light when a taxi SHB5768E hit my bus rear from behind.

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.:

Road surface: Dry Wet  
Weather condition: Clear Raining  
Speed: \_\_\_\_\_

Usage of veh during of accident: \_\_\_\_\_

Does driver own a vehicle: yes no  
if yes, veh number plate: \_\_\_\_\_  
veh insurance co: \_\_\_\_\_

Relationship with insured: Employee & Employer  
Witness (if any): yes no  
Witness name: \_\_\_\_\_  
Witness hp: \_\_\_\_\_  
Witness email (if any): \_\_\_\_\_  
Witness add: \_\_\_\_\_  
Witness IC no: \_\_\_\_\_

Third party veh number: SHB5768E  
Name of third party driver: Lim Keang Peng  
IC of third party driver: S12173406  
HP of third party driver: \_\_\_\_\_  
Address of third party driver: \_\_\_\_\_  
Insured/Co name of third party vehicle: \_\_\_\_\_  
Contact number of insured/Co: \_\_\_\_\_  
Insurance co of third party vehicle: \_\_\_\_\_

Police report (if any): yes no  
Police report reported at which police station: \_\_\_\_\_  
Any intended prosecution given: yes / no  
if yes, against whom: veh A / veh B driver

Action taken: claiming third party claiming own damage / reporting only  
No of Pax: 01pax

Connect3 client vehicle no: PC8014C  
Owner contact no: 96988118  
Date of accident: 30/9/2019  
Location of accident: Tanjong Penjurut  
Time of accident: 08:10 hrs  
Any Injury: yes no (if yes, must have police report)





中国太平保險(新加坡)有限公司  
CHINA TAIPIING INSURANCE (SINGAPORE) PTE. LTD.

## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 109)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

MODEL  
N 24  
ANOS 9 1A  
COMPREHENSIVE  
AUTOS AVE

CERTIFICATE No

DMN15N3004821900

Engine No : 15F38E6C16876379 228

Chassis No: LL3RDAD66JA01194 0

1. Index Mark and Registration  
Number of Vehicle

PC8014C

2. Name of Policy Holder

M/S IEXPRESS

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

14 JANUARY 2019

EX SECT. I ..... S\$2,000.00

EX SECT. II ..... S\$3,000.00

4. Date of Expiry of Insurance

13 JANUARY 2020

EX ON WINDSCREEN ..... S\$500.00

5. Persons or Classes of Persons entitled to drive \*

ANY PERSON PROVIDED HE IS IN THE POLICYHOLDER'S EMPLOY AND IS DRIVING ON THEIR ORDER OR WITH THEIR 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 ONLY FOR THE CARRIAGE OF PASSENGERS OR GOODS IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS AS SPECIFIED IN THE SCHEDULE.

THE POLICY DOES NOT COVER

(1) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.

(2) USE WHILST DRAWING A TRAILER, EXCEPT THE TOWING (OTHER THAN FOR REWARD) OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

HIRE PURCHASE CO. : MAYBANK AS HP OWNER

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 109) 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 109) and Part IV of the Road Transport Act, 1987 (Malaysia). Please see reverse For CHINA TAIPIING INSURANCE (SINGAPORE) PTE. LTD.

SG MOTOR TRADER PTE LTD

Reg. No.: 201537467C

172 Sin Ming Drive

Singapore 575720

Tel: 6933 9400 Fax: 6456 0678

Countersigned By:

Authorised Officer

Authorised Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6359 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com

10 Sin Ming Drive Singapore 575701  
www.lta.gov.sg

14 Jan 2019

Our ref: 1401190101N029049373

1EXPRESS  
23 FARLEIGH AVENUE  
SERANGOON GARDEN ESTATE 000103  
SINGAPORE 557805



RECEIVED 18 JAN 2019

Dear Sir/Madam

**You Have Successfully Registered Vehicle PC8014C**

You have successfully transferred and used your Temporary COE 2019010105000382H to register vehicle PC8014C on 14 Jan 2019.

You can find the full details in the Annex. Please check that they are correct. You can also view these details when you login to [www.onemotoring.com.sg](http://www.onemotoring.com.sg).

Visit [www.onemotoring.com.sg](http://www.onemotoring.com.sg) for more information and to access a wide range of vehicle-related services. If you need a SingPass or CorpPass account, visit [www.singpass.gov.sg](http://www.singpass.gov.sg) or [www.corppass.gov.sg](http://www.corppass.gov.sg).

**What You Need To Do:**

- Check that the details in the Annex are correct.
- You can login to [www.onemotoring.com.sg](http://www.onemotoring.com.sg) to view these details and access a wide range of vehicle-related services.

Yours sincerely

Ng Lay Choo (Ms)  
Deputy Director, VRL Service Operations  
Vehicle Services Group  
Land Transport Authority

[This letter is computer-generated, no signature is required.]

From 01 Jun 2019, your hardcopy letters will be replaced with SMSes and e-letters in your OneMotoring inbox. Hardcopy letters will only be sent for letters mandated by law, such as summonses. If you wish to continue receiving hardcopy letters, please notify LTA by 31 May 2019 by logging in to [www.onemotoring.com.sg](http://www.onemotoring.com.sg) using your SingPass/CorpPass.



Transaction ref 20190114113045014403

Please check that the owner and vehicle details are correct:

1. Name	: IEXPRESS
2. Identification No. Type	: Business
3. Identification No.	: 53049525B
4. Country/Region	: -
5. Registered Address	: 23 FARLEIGH AVENUE SERANGOON GARDEN ESTATE SINGAPORE 557805
6. Mailing Address	: -
7. Vehicle Registration No.	: PC8014C
8. Effective Date of Ownership	: 14 Jan 2019
9. Original Registration Date	: 14 Jan 2019
10. First Registration Date	: 14 Jan 2019
11. Vehicle Type	: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
12. Vehicle Scheme	: Public Service Vehicle (Others)
13. Attachment 1	: Air-Conditioned
14. Attachment 2	: -
15. Attachment 3	: -
16. Vehicle Make	: GOLDEN DRAGON
17. Vehicle Model	: XML6772J18 AUTO
18. Year of Manufacture	: 2018
19. Primary Colour	: Multi-Colour
20. Secondary Colour	: -
21. Passenger Capacity	: 29
22. Chassis/Trailer Chassis No.	: LL3BDADE6JA011940 / -
23. Propellant/Emission Standard	: Diesel / Euro VI
24. Engine No./Motor No.	: ISF38E6C16876379298 / -
25. Engine Capacity(cc)/Power Rating(kW)	: 3759 / -
26. Maximum Power Output(kW/bhp)	: - / -
27. Unladen Weight(kg)	: 6100
28. Maximum Laden Weight(kg)	: 9000
29. Open Market Value	: \$76,510.00
30. PARF Eligibility	: No
31. PARF Eligibility Expiry Date	: -
32. Minimum PARF Benefit	: \$0.00

## Annex

Transaction ref 20190114113045014403

Please check that the owner and vehicle details are correct:

33. IU Label No.	: -
34. COE No.	: 2019010105000382H
35. COE Expiry Date	: 13 Jan 2029
36. COE Category	: C - Goods Vehicle & Bus
37. Quota Premium/Prevailing Quota Premium	: \$27,001.00
38. Actual Quota Premium/PQP Paid	: \$27,001.00
39. Actual ARF Paid	: \$3,826.00
40. CO2 Emission(g/km)	: -
41. CO Emission(g/km)	: -
42. HC Emission(g/km)	: -
43. NOx Emission(g/km)	: -
44. PM Emission(mg/km)	: -
45. Actual CEVS/VES Rebate Utilised	: -
46. CEVS/VES Surcharge Paid	: -
47. Actual Green Vehicle Rebate Utilised	: -
48. Vehicle Lifespan Expiry Date	: 13 Jan 2039
49. Road Tax Amount	: \$91.00
50. Road Tax Start Date	: 14 Jan 2019
51. Road Tax End Date	: 13 Jul 2019
52. Remarks	: This is a public service vehicle.

