

NATIONAL Assessment Centre Services.

[ver 1 Jan 05]

NAH4912508

Date In: 30/09/2009 17:23	Job description	Date & Time Completed	Done by
Ref No: N/A/2009/017196/Y	SAS e-filing		
Veh No: SJM 2656 H	E-mail (Upload 2hrs, A/C 2hrs)		
DOA: 28/09/2009 16:15	I-Motor Claim Form	01/10/2009 00:03	30/09/2009 17:41
OID: TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Pnx / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fac:

TP Particulars:

Veh No:

SKC 8825

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 repair.

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

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

Special Remarks: () Apply for Transport Allowance () / Courtesy Car ()

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

2) QC Check / Post Repair Inspection ()

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

Injury: ()

Date/Time: ()

NAH1907290

Driver/Owner:	1) Alt: Accident Reporting (\$30)	
Contract No:	2) DA: Damage Assessment (\$100) INC (110)	
Damaged Portion:	3) TP: Towing Fee \$40/\$45	
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey \$120	
	5) PT: Follow-Through Survey (Resurvey) \$70	
	For claiming against INC Only (ver 10 Jan 2005)	
	6) TR: Re-inspection \$75	
	7) NI: Idas DA + SMRT Survey \$160	
	8) NTUC Additional Services:	
	ON:	
	*N5: Courtesy Car / Tpl Allowance \$5	
	*N6: Repair Coordination \$10	
	*N7: Post Repair Inspection \$25	
	*N8: DV / Collect Excess Coordination \$5	
	TE (Nil): TP (Non INC) against IDG \$20	
	9) NI2: Idas Mobile \$0	
	Invoice dated	Fee Charged
	Invoice dated	Fee Charged

NAH1907290

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 17:23
Date Of Accident	28/09/2019 16:15
Exact Location Of Accident	PIE TOWARDS CHANGI AIRPORT(B/F BEDOK NORTH AVE 3)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM2656H
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD DANIAL BIN IDRIS
NRIC No	S9127627E
Email Address	DANNYIDS@OUTLOOK.COM
Mobile Phone No	(LOCAL) +65-81383404
Alternative Phone No	OTHERS-81383404

Vehicle Particulars

Manufacturer	HONDA
Model	FIT
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	5106875008
Cover Note Number	

Driver

Name of Driver	MUHAMMAD DANIAL BIN IDRIS
NRIC No	S9127627E
Date Of Birth	13/08/1991
Occupation	OUTDOOR
Date Of Driving Pass	31/08/2018
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81383404
Fax Number	
Contact Number	OTHERS-81383404
EMail Address:	DANNYIDS@OUTLOOK.COM

Address	BLK 182 RIVERVALE CRESCENT #03-295
Postcode	540182
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	CHAIN COLLISION
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	5
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?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190928/2158

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	SKC8832S
Vehicle Make/Model/Colour	MAZDA 3
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN NGEE CHIN
NRIC/Passport Number	S1175988B
Contact Number	91056598
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMD8472T
Vehicle Make/Model/Colour HYUNDAI ELANTRA
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) 1

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLU7141C
Vehicle Make/Model/Colour HONDA FREED
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) 1

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number FBP7649A
Vehicle Make/Model/Colour VESPA
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 1

SKETCH PLAN

IMPORTANT NOTICE


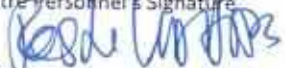
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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: 30/9/19

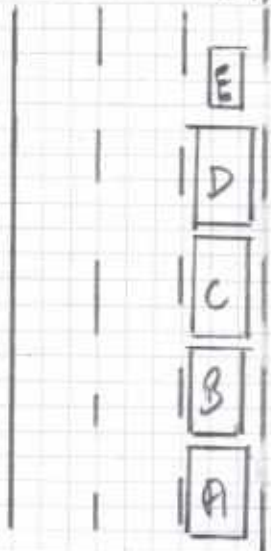
Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

SKETCH PLAN

Pin towards Chongli B/F Brook North Ave 3 Exit

- A) SSM 2656H
- B) SKC 8832S
- C) SMD 8472T
- D) SLU 7141C
- E) FBP 7649A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DIS REFUSE TO POLICE REPORT
7/20/19 0928/2158

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time: 30/9/19

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

30/09/2019
[Signature]
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20190928/2158

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

1 of 4

Report No. T/20190928/2158

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/09/2019 19:05		Vide Report No.:		Station Diary No.: 56	
Informant's Particulars					
Name of Informant: MUHAMMAD DANIAL BIN IDRIS			Address: APT BLK 182 RIVERVALE CRESCENT #03-295 SINGAPORE 540182		
ID Type / ID No.: NRIC NO / S9127627E			Contact No.: Home/Office: Mobile: 81383404		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 28	Date of Birth: 13/08/1991	Type of Informant: Driver		
Race: Javanese			Language: English		Institution / School Name:
Occupation: DESPATCH			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/09/2019 16:15	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY towards Changi, before Bedok North Ave 3 exit				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBP7649A	Motorcycle	VESPA		Red	No Damage	0
SJM2656H	Car A	HONDA	FIT 1.3 A	Silver	Slightly Damaged	0
SKC8832S	Car B	MAZDA	3	Silver	Slightly Damaged	0
SLU7141C	Car D	HONDA	FREED	Grey	Slightly Damaged	0
SMD8472T	Car C	HYUNDAI	ELANTRA	Grey	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20190928/2158

2 of 4

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20190928/2158

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJM2656H	NTUC Income Insurance Co-Operative Limited	5106875008	08/01/2019	07/01/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	MUHAMMAD DANIAL BIN IDRIS		ID No.	S9127627E
Related Vehicle	SJM2656H (Car)		Contact No.	81383404
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL
Driver				
Name	TAN NGEE CHIN		ID No.	S1175988B
Related Vehicle	SKC8832S (Car)		Contact No.	91056598
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

Brief Details.

On 28/09/2019 at around 1615hrs, I was travelling along PIE towards Changi, at 2nd lane from the right. The traffic is quite jam and the car in front of me did a sudden jam brake. I was unable to react in time and caused the front of my car to hit the rear of the car.

When I alighted the car to find out more, I discovered that I was involved in a chain of accident, mine being the fifth, and last vehicle. I found out from the 2nd vehicle that due to the motorcycle in front of him did a sudden jam brake, he also did the same and managed to avoid collision. However, the 3rd vehicle behind the 2nd vehicle couldn't brake on time and collided the 2nd vehicle. Subsequently, the 4th vehicle driver told me that he actually was able to stop in time, without hitting the vehicle in front. He further claimed that due to the impact that my car hit the rear of his car, his car collided to the 3rd car.

Traffic police came to scene. I was told to lodge a traffic accident report, but did not get any report number. I was only able to exchange particulars with the driver in front of me.



**SINGAPORE
POLICE FORCE**



T/20190928/2158

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

3 of 4

Report No. T/20190928/2158

CONTINUATION OF REPORT

My car has a in-car camera facing the front of the car. Maybe I can retrieve the footage as I am not familiar with the system.

The order from the front to the last car is:

FBP7649A
SLU7141C
SMD8472T
SKC8832S
SJM2656H (mine)



**SINGAPORE
POLICE FORCE**



T/20190928/2158

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

4 of 4

Report No. T/20190928/2158

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:

D /

Sgt 2 HAAFIZH BIN MOHD NOOR

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt YAN MINGSHENG DANIEL

Contact No.: 65476252

Authentication Stamp
NP158

SN 50

Signature Of Informant:

Date/Time:

28/09/2019 19:05

Classification Of Case:

Claim Handling

Accident MT/1064602

Policy No.	5106875008	Vehicle No.	53M2636H	GST Registration No.	
Certificate No.					
Policyholder Name	MUHAMMAD DANIAL BIN IDRIS			Policyholder NRIC	55127627E
Product Code	PRIVATE CAR INSURANCE	Cover Type	SRV CLASSIC	Leading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	NA
ATC	<input type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Not available
Accident Details					
Report Date	30/09/2019 18:52	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	28/09/2019	Time of Accident (hh:mm)	16:15	Country of Accident	Singapore
Reporting Centre		Orange Force		ICH No.	
Accident Location	PIE TWO CHANGE AIRPORT (NEAR BEDOK NORTH EXIT)				
Excess					
Own Damage Excess	600.00	Additional Excess	1500	Windscreen Excess	100.00
Uninsured Driver Excess	0.00	Outside Singapore OD Excess	500.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Data		GST Status Verified	Yes
GST Registration No.					
Notification History					
Policyholder Mailing Address					
Address 1	BLK 182 #01-295	Address 2	RIVERVALE CRESCENT	Address 3	SINGAPORE 540182
Address 4		Address Type	Singapore address	Post Code	540182
Unit No.	01-295	Related Policy Number	5106875008		
OI Driver Info					
Driver Name		Driver Type		Driver DOB	
Uninsured Driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 1	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered Car?	Yes - No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 003 **NEW**

Claim Type *	QD-MX	Insured Name	MUHAMMAD DANIAL BIN IDRIS	Insurer NRIC	55127627E
Contact No.(Mobile)	81393404	Contact No.(Home)		Contact No.(Office)	
Email Address		CI		TP	
Claim Description		Vehicle Number	53M2636H	Vehicle Number	53M2636H
Preferred Workshop		ETK2456H / SACB8125 ON 28 Sept 2019		Name of Preferred Workshop	
Preferred Repair Option	Preferred	Insured Liability	Fully at Fault		
Damage No. Registration	Yes	Preferred Workshop Name Unknown		GIA report	Received
Date Registered				Claim Close Date	30/09/2019 17:36
Report Taken By				Date Received	30/09/2019 00:00
<input type="button" value="Print As Letter"/>					
<input type="button" value="Save"/> <input type="button" value="Submit"/>					

Attachment

Accident No.	MT/1064602	Claim No.	003																												
Last Des. Received	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Upload Date	30/09/2019 17:41																												
<table border="1"> <thead> <tr> <th>Category *</th> <th>Confidential</th> <th>Urgency *</th> <th>Description *</th> </tr> </thead> <tbody> <tr> <td><input type="button" value="Choose File"/> No file chosen</td> <td><input type="button" value="Clear"/> Please Select</td> <td><input type="button" value="Normal"/> NO</td> <td></td> </tr> <tr> <td><input type="button" value="Choose File"/> No file chosen</td> <td><input type="button" value="Clear"/> Please Select</td> <td><input type="button" value="Normal"/> NO</td> <td></td> </tr> <tr> <td><input type="button" value="Choose File"/> No file chosen</td> <td><input type="button" value="Clear"/> Please Select</td> <td><input type="button" value="Normal"/> NO</td> <td></td> </tr> <tr> <td><input type="button" value="Choose File"/> No file chosen</td> <td><input type="button" value="Clear"/> Please Select</td> <td><input type="button" value="Normal"/> NO</td> <td></td> </tr> <tr> <td><input type="button" value="Choose File"/> No file chosen</td> <td><input type="button" value="Clear"/> Please Select</td> <td><input type="button" value="Normal"/> NO</td> <td></td> </tr> <tr> <td><input type="button" value="Choose File"/> No file chosen</td> <td><input type="button" value="Clear"/> Please Select</td> <td><input type="button" value="Normal"/> NO</td> <td></td> </tr> </tbody> </table>				Category *	Confidential	Urgency *	Description *	<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	<input type="button" value="Normal"/> NO		<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	<input type="button" value="Normal"/> NO		<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	<input type="button" value="Normal"/> NO		<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	<input type="button" value="Normal"/> NO		<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	<input type="button" value="Normal"/> NO		<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	<input type="button" value="Normal"/> NO	
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<input type="button" value="Message Read"/>																															

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 30 Sep 2019 17:41	NRIC/ Driving License	Y Normal	NRIC/ Driving License 2019-9-30	
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 30 Sep 2019 17:41	SAB	Normal	SAB 2019-9-30	
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 30 Sep 2019 17:41	Photos	Normal	Photos 2019-9-30	
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 30 Sep 2019 17:41	Photos	Normal	Photos 2019-9-30	
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 30 Sep 2019 17:41	Photos	Normal	Photos 2019-9-30	

S (BUKIT MERAH) on 30 Sep 2019 17:41

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 30 Sep 2019 17:41

Photos

Normal

Photos 2019-9-30

NAC_BUKIT_MERAH_800678(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 30 Sep 2019 17:40

Photos

Normal

Photos 2019-9-30

NAC_BUKIT_MERAH_800678(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 30 Sep 2019 17:40

Photos

Normal

Photos 2019-9-30

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 30 Sep 2019 17:40

Photos

Normal

Photos 2019-9-30

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 30 Sep 2019 17:40

Photos

Normal

Photos 2019-9-30

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 30 Sep 2019 17:40

Photos

Normal

Photos 2019-9-30

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 30 Sep 2019 17:40

Photos

Normal

Photos 2019-9-30

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 30 Sep 2019 17:38

Photos

Normal

Photos 2019-9-30

Video List

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Source

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ACCIDENT STATEMENT

ACCIDENT DATE: 28 / 09 / 2019 (DD/MM/YYYY), TIME: 16 : 14 (HH:MM)

LOCATION: PIE Towards Changi Airport, before Bedok North AVE 3

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJM 2656H
b) INSURANCE COMPANY: NTUC INCOME
c) POLICY NUMBER: Sl0675008
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Honda Fit
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: Muhammad Danial bin Idris (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S9127627E CONTACT: 8138 3404
c) ADDRESS: 182 RIVERVALE CRESCENT #03-295

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* d) DATE OF BIRTH: 13 / 08 / 1991 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 31/08/2018

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Queenstown NPC

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKC 8832S MODEL: MAZDA
b) DRIVER'S NAME: TAN NEE CHIN
c) NRIC/FIN/PASSPORT: S1175988B CONTACT: 91056598

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = dannyds@outlook.com

VIDEO

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Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="28/09/2019 15:26"/>
Vehicle No. (For Motor)	<input type="text" value="SJM2656H"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5106675008		MUHAMMAD DANTAL BIN IDRIS	S9127627E	GPC	drive CLASSIC	SJM2656H	SJM2656H	08/01/2019	07/01/2020