

NATIONAL Assessment Centre Services.

[ver 1 Jan'09]

MMA 119130025.

Date In	11/10/19 15:11	Job description	Date & Time Completed	Done by
Ref No	MA1 INC19017272164	SAS e-filing		
Veh No	SKX 5462K	E-mail (within 2hrs, AIC 2hrs)		
DDPA	2019/19 09:15.	I-Motor Claim Form	MT/1063814 ⁰⁰²	11/10/19 15:41
OD / TP / Reporting Only		I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
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: SMC 9960A.	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:	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

MA1907359	Invoice/Registration Charge	30.00
Claimant's Particulars:	1) AR: Accident Reporting (\$30);	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)	
Contact No:	3) TP: Towing Fee \$40/\$45	
Damaged Portion:	4) FT: Follow-Through Survey \$120	
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30	
For claiming against INC Only (ver 10 Jan 2003)	6) TR: Re-Inspection \$75	
7) NI: Idao DA + SMRT Survey \$160	8) NTUC Additional Services:-	
9) NI2: Idao Mobile	30	
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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	01/10/2019 15:11
Date Of Accident	20/09/2019 09:15
Exact Location Of Accident	ECP TWDS CITY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX5462K
Insured/Policyholder	
Name Of Registered Owner	PRESTIGE KARZ LEASING PTE. LTD.
Co Reg No	201917085E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-84818108

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5111021281
Cover Note Number	

Driver

Name of Driver	NG GUANG SOON
NRIC No	S9700879E
Date Of Birth	07/01/1997
Occupation	OUTDOOR
Date Of Driving Pass	21/04/2017
Driving Experience	2 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82885465
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 891 TAMPINES AVE 8 #10-86
Postcode	520891
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	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?	
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)	2
Passenger 1	NAME: : UNKNOWN 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

REFER TO STATEMENT.

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	SMC9960A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YEO ENG GUAN
NRIC/Passport Number	S7029576H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:
NRIC/FIN No.:

SKETCH PLAN

A = SKX 5462K
B = SMC 9960A

Ecp towards City.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Traveling along Ecp to CTE

As the CAR B Breaks and change lane to avoid collision with the car in front.

He change into the lane on the left and as i could witness the car in front of CAR B Stopping i followed Car B to avoid collision as well.

But while changing lane car B brakeed and i hit to his Rear.

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.:

Name: Ng Cheong Soon

NRIC: S9700879E

TEMPORARY PRIVATE HIRE CAR DRIVER'S VOCATIONAL LICENCE

1. You have passed the vocational licence competency test and have been granted a Private Hire Car Driver's Vocational Licence (PDVL).

PDVL Commencement Date: 16 JUL 2019

2. You must display this Temporary PDVL in your car at all times while driving a chauffeured private hire car.

3. LTA will subsequently inform you to collect your Vocational Licence Card that will replace this Temporary PDVL.
You must collect your Vocational Licence Card within 6 months of the PDVL Commencement Date and display it in your car thereafter. **Otherwise, your PDVL may be revoked.**

Kwan Mei Fong
Assistant Registrar of Vehicles
Land Transport Authority of Singapore



This Temporary PDVL is handed to you by _____ (centre officer name),
(centre officer designation), of _____ (centre name).

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: 5111021281

Cover : Third Party

- | | |
|--|---|
| 1. Index mark and Registration Number of Vehicle | : SKX5462K |
| Chassis Number | : JN1BAAG11Z0111157 |
| 2. Name of Policyholder | : PRESTIGE KARZ LEASING PTE. LTD. |
| 3. Effective Date of Insurance | : 06 Aug 2019 |
| 4. Expiry Date of Insurance | : 05 Aug 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 or Hirer's business. | |

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) 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)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : ASSURE (SINGAPORE) PTE. LTD. (00000615327)
Date of Issue : 07 Aug 2019 18:06 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Claim Handling

Accident MT/1063814

Policy No.	5111021281	Vehicle No.	SKX5462K	GST Registration No.	
Certificate No.	5111021281-000007				
Policyholder Name	PRESTIGE KARZ LEASING PTE, LTD.	Cover Type	Third Party	Policyholder NRIC	201917085E
Product Code	FLEET MASTER INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	nil	Special Remark		Contact No.(Home)	
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	No

▼ Accident Details

Report Date	24/09/2019 16:32	Accident Report Within 24 hrs	Non-Reporting	Accident Type	Collision - Head to Rear
Date of Accident	20/09/2019	Time of Accident hh:mm	09:15	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ECP TOWARDS CHINATOWN				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	0.00	Driver is Covered?	Not Applicable
OD Standard Excess	0.00	TP Standard Excess	1,500.00		
YIED OD Excess		YIED TP Excess			
Additional Excess		Total TP Excess Applicable	1,500.00		
Total OD 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	1 KAKI BUKIT AVENUE 6	Address 2	#01-44 AUTOBAY @ KAKI BUKIT	Address 3	SINGAPORE 417883
Address 4		Address Type	Singapore address	Post Code	417883
Unit No.	01-44	Related Policy Number	5112788221		

▼ O1 Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.		Driver Vehicle No.		Driver Insurer Company	
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No				

Modification History

Claim 002 New

Claim Type *	OD-MX	Insured Name	PRESTIGE KARZ LEASING PTE.	Insured NRIC	20191
Contact No.(Mobile)		Contact No. (Home)	NIL	Contact No. (Office)	NIL
Email Address		O1 Vehicle Number	SKX5462K	TP Vehicle Number	SMC99
Claim Description	SKX5462K / SMC9960A ON 20 Sept 2019			Name of Preferred Workshop	B
Preferred Workshop	0	Insured Liability	Partially at Fault		
Workshop No.		Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Finalisation	Yes				
Date Registered				Claim Close Date	01/10/2019 15:40
Report Taken By	LEW SHAN HUI			Date Received	01/10/
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.	MT/1063814	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	01/10/2019 15:41
Path *		Category *	Confidential
Choose File	No file chosen	Please Select	NO
Choose File	No file chosen	Please Select	NO
Choose File	No file chosen	Please Select	NO
Choose File	No file chosen	Please Select	NO
Choose File	No file chosen	Please Select	NO
Choose File	No file chosen	Please Select	NO
Message Read		Please Select	NO

▼ Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	M:
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o	01 Oct 2019 15:41	NRIC/ Driving License	Y	NRIC/ Driving License 2019-10-1	



NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o
01 Oct 2019 15:41

NRIC/ Driving License

Y

Normal

NRIC/ Driving License 2019-10-1

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o
01 Oct 2019 15:41

SAS

Normal

SAS 2019-10-1

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o
01 Oct 2019 15:41

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Video List

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Folder Date

File Name



Source

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