

NATIONAL Assessment Centre Services.

(Sat 1 Jan 00)

MA18419/3644

Date In: 14/01/2019 19:28	Job description	Date & Time Completed	Done by
Ref No: N8818619018106/Y	SAS e-filing		
Veh No: YP99507	E-mail (2 jobs 2hrs, AIC 2hrs)		
O.O.A: 14/01/2019 09:30	I-Motor Claim Form		
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/Writer		

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

() 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: ()

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

Injury: _____

Date/Time	Assign

1) AR: Accident Reporting (\$30)	
2) DA: Damage Assessment (\$100) INC (\$10)	
3) TP: Towing Fee \$40/\$45	
4) PT: Follow-Through Survey \$120	
5) PT: Follow-Through Survey (Resurvey) \$30	
6) TR: Re-inspection \$75	
7) NI: Idao DA + SMRT Survey \$160	
8) NTUC Additional Services:	
ON:	
*NS: Courtesy Car / Tpl Allowance \$3	
*NG: Repair Co-ordination \$10	
*NT: Post Repair Inspection \$25	
*ND: DV / Collect Excess Coordination \$3	
TP (Nil) / TP (Non INC) against INC \$20	
9) NI: Idao 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	14/10/2019 19:25
Date Of Accident	14/10/2019 09:30
Exact Location Of Accident	JUNCTION OF HARBOUR DRIVE/WEST COAST HIGHWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP9950T
Insured/Policyholder	
Name Of Registered Owner	FRESHDIRECT PTE LTD
Co Reg No	200005709Z
Email Address	SHAN.KUAH@FRESHDIRECT.COM.SG
Mobile Phone No	(LOCAL) +65-98927734
Alternative Phone No	OFFICE-98927734

Vehicle Particulars

Manufacturer	ISUZU
Model	NNR85UH4A
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 29112821 MKC
Cover Note Number	

Driver

Name of Driver	VINNCENTIO
NRIC No	G3318611N
Date Of Birth	24/07/1991
Occupation	OUTDOOR
Date Of Driving Pass	06/09/2017
Driving Experience	2 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98927734
Fax Number	
Contact Number	OTHERS-98927734
Email Address	SHAN.KUAH@FRESHDIRECT.COM.SG

Address	BLK 431 CLEMENTI AVENUE 3 #01-326
Postcode	120431
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	COLLIDED INTO PROPERTY
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	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
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	CLEMENTI NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8729999 - FAX NO: 67748639
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20191014/2123

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

SKETCH PLAN

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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.

5. 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.

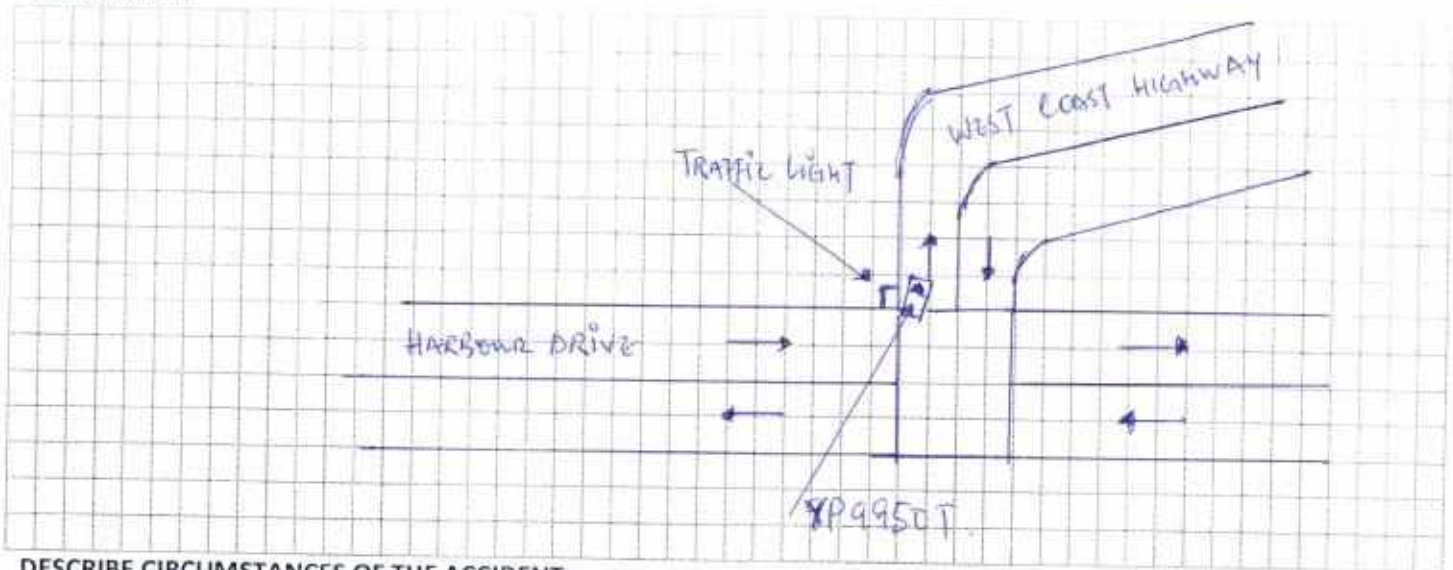


Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: *Resh*
NRIC/FIN No.: *16/16/2027*

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per Police Report 7/2019/1014/2122

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE** within the stipulated time frame from the day of the occurrence.

- Reporting Only
- Claim OD
- Claim TP
- Claim OD/ TP at other workshop

DECLARATION

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



Policyholder's signature

Date & Time

[Signature]

Driver's Signature

(if driver not the policyholder)

Date & Time

[Signature] 15/10/2019
Reporting Centre Personnel's Signature
Name: *[Signature]*
Nric/Fin No. *[Signature]*



**SINGAPORE
POLICE FORCE**



T/20191014/2123

1 of 3

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No. T/20191014/2123

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/10/2019 15:25		Vide Report No.:		Station Diary No.: 155	
Informant's Particulars					
Name of Informant: VINNCENTIO			Address: APT BLK 704 WEST COAST ROAD #02-415 SINGAPORE 120704		
ID Type / ID No.: FIN NO / G3318611N			Contact No.: Home/Office: Mobile: 98927734		
Nationality: MYANMAR			Email:		
Sex: Male	Age: 28	Date of Birth: 24/07/1991	Type of Informant: Driver		
Race: Others		Language:		Institution / School Name:	
Occupation: DRIVER		Driving Licence Information: Class: 3 Date of Expiry:			

General Information of the Accident				
Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 14/10/2019 09:30	Type of Location:
Location: Junction of Road 1 and Road 2 HARBOUR DRIVE WEST COAST HIGHWAY Junction of Harbour Drive and West Coast Highway				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YP9950T	Lorry				No Damage	0



**SINGAPORE
POLICE FORCE**



T/20191014/2123

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

2 of 3

Report No: T/20191014/2123

CONTINUATION OF REPORT

Brief Details.

On 14/10/2019 at about 0930hrs to 1000hrs, I was driving my company's vehicle bearing plate number YP9950T along Harbour Drive headed towards West Coast Highway.

As I was at the junction of Harbour Drive and West Coast Highway, I realised that I had forgotten to take several invoices that were left inside my company.

Thus, I intended to make a U-turn at the said location to head back to my company to retrieve the said items.

I stopped my vehicle at the junction of Harbour Drive and West Coast Highway while in the midst of turning left into West Coast Highway, intending to turn back into harbour drive. As I was making the maneuver, the left rear area of my vehicle collided onto the traffic light that was placed at the pavement on the left.

Part of the said traffic light was damaged.

As I did not know what to do, I did not call the Police. However, I had informed my company about the matter and was told to lodge a Police report regarding the incident.



**SINGAPORE
POLICE FORCE**



T/20191014/2123

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

3 of 3

Report No. T/20191014/2123

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 TING WEI YUAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
14/10/2019 15:25

Officer In Charge Of Case:
TP / AEIT /
SSI 2 YEO GEAK ENG CECILIA
Contact No.: 65476404

Classification Of Case:

Authentication Stamp
NP168



SIGNATURE

SINGAPORE ACCIDENT STATEMENT

Accident Date & Time: 14/10/2019 @ 9.30am.		
Accident Location: JUNCTION of HARBOUR DRIVE & WEST COAST HIGHWAY.		
Vehicle Number: YP 9950T.	Make/Model:	
Policy Holder Name: FRESHDIRECT PTE LTD.		
NRIC/ROC: 2000057092	Mobile:	
Email: INQUIRY@FRESHDIRECT.COM.SG		
Insurance Company: MSIG.		
Policy Number: B 29112821 MKE	Policy Period: 18/12/2018 - 17/12/2019.	
Policy Coverage: Comprehensive ()	Third Party ()	Third Party Fire & Theft ()
State Action Taken: Claim Own Policy ()	Claim Third Party ()	Reporting Only ()
Driver Name: VINNENJIO	Email: SHAN.KUAH@FRESHDIRECT.COM.SG	
NRIC: FIN NOS 63318611N	Mobile: 98927734	
Date Of Birth: 24/7/1991	Driving Pass Date: 6/9/2017.	
Gender: Male (✓) Female ()	Occupation: Indoor (✓) Outdoor ()	
Address: B1K431, CLEMENTI AVE 3, #01-326, SINGAPORE 120431		
Is driver an employee of the insured's company: Yes (✓) No ()		
If No, Relationship of the driver with the insured:		
Owner () Spouse () Parent () Friend () Relative () Children () Sibling () Hirer ()		
Weather Conditions: Clear (✓) Raining () Others ()		
Road Surface: Dry (✓) Wet () Others ()		
Was any foreign vehicle involved in this accident? Yes () No (✓)		
Was anybody injured in the Accident? Yes () No (✓)		
Was any injured conveyed to hospital by ambulance? Yes () No (✓)		
Was there any video captured by Car Camera? Yes () No (✓)		
Number of Passenger (Including Driver): 2.		
1)	2)	3) 4)
Was the accident reported to the police? Yes (✓) No () "attach Police Report, if any"		
3 rd Party Name:		
Vehicle Number:	Make & Model:	
NRIC:	Mobile No:	
Witness Details (if any):		
NAME:	NRIC:	Mobile No:
(other remark (if any))		



MSIG

MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

陳保險經紀私營有限公司
TAN INSURANCE BROKERS PTE LTD
3A/5A Aliwal Street, Chenn Leonn Building
Singapore 199896
www.lib.com.sg
Tel: (65) 6742 6766 Fax: (65) 6742 6669

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.Z.300
Goods Carrying Vehicle - Sch I

COMMERCIAL VEHICLE
Comprehensive

Certificate No. B 29112821 MKC

Excess : SGD800

1. Index-Mark and Registration Number of Vehicle

YP9950T

2. Name of Policyholder

Freshdirect Pte Ltd

3. Effective Date of the Commencement of Insurance for the purposes of the Act

18/12/2018

4. Date of Expiry of Insurance

17/12/2019

5. Persons or Classes of Persons entitled to drive*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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 in connection with the Policyholder's business.
Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
Use for social domestic and pleasure purposes.
The Policy does not cover

- (1) Use for hire or reward or for racing pace-making reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.
Approved Insurers

for Chief Executive Officer

Enquire Vehicle Registration Details

Owner Particulars	
NRIC/Passport/Company Cert No.:	200005709Z
Owner ID Type:	Company
Owner Name:	FRESHDIRECT PTE LTD
Registered Address:	17 WHOLESALE CENTRE #01-119 PASIR PANJANG WHOLESALE CENTRE SINGAPORE 110017
Mailing Address:	-
Birth Date:	-
Vehicle Particulars	
Vehicle No.:	YP9950T
Previous Vehicle No.:	-
Effective Date of Ownership:	18 Dec 2018
Original Regn Date:	18 Dec 2018
Registration Date:	18 Dec 2018
Year of Manufacture:	2018
Vehicle Type:	Goods (Open) Refrigerated Vehicle
Vehicle Scheme:	-
Vehicle Attachment 1:	No Attachment
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Make:	ISUZU
Vehicle Model:	NNR85UH4A
Primary Colour:	White
Secondary Colour:	-
Passenger Capacity:	2
Chassis No.:	JAANNR85HJ7100065
Engine No.:	4JJ13N9241
Engine Capacity / Power Rating:	2999 cc / -
Maximum Power Output:	-
Propellant:	Diesel
Max Unladen Weight:	2440 kg
Maximum Laden Weight:	4800 kg
Open Market Value:	\$38,299.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
Minimum PARF Benefit:	-
No. of Transfers:	0
IU Label No.:	1511002767
COE No.:	2019010105000210R
COE Expiry Date:	17 Dec 2028
COE Category:	C - Goods Vehicle & Bus
COE Registration Category:	C - Goods Vehicle & Bus
Quota Premium (QP) / Prevailing Quota Premium:	\$27,009.00 / -
Actual QP Paid:	\$27,009.00
QP (Regn Cat):	\$27,009.00
OPC Cash Rebate Eligibility:	No
QP during COE Bidding Exercise:	\$27,009.00
Additional Registration Fee Rate:	5.00 %
Actual ARF Paid:	\$1,915.00
Vehicle Lifespan Expiry Date:	17 Dec 2038
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-
Message:	-

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OK

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