

NATIONAL Assessment Centre Services.

[ver 1 Jan 2003]

NA1908162

Date In: 24/10/2018 11:27	Job description	Date & Time Completed	Done by
Ref No: NB91MS91901886814	SAS e-Milling		
Veh No: FV649D	E-mail (to Julia Sims, AIC 2hrs)		
D.O.A: 05/10/2018 09:10	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/Whse		

Preferred Wkep / INC Assign Wkep / QW: (

Tel:

Fax:

TP Particulars:

Veh No: FS294

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:	
Location:	
Weather:	
Other:	

NA1908162	Invoice	Amount	Amount
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100) INC (\$10)		
Damaged Portion:	3) TP: Towing Fee \$40/\$45		
QC Checked by (Bgr-In-Charge):	4) PT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	6) TR: Re-inspection \$75		
	7) NI: Idas DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON:		
	*NS: Courtesy Car / Tpt Allowance \$5		
	*NG: Repair Coordination \$10		
	*NT: Post Repair Inspection \$25		
	*ND: DV / Collect Excess Coordination \$5		
	TP (NI): TP (Non INC) against INC \$20		
	NI: Idas Mobile \$0		
	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	24/10/2019 11:27
Date Of Accident	05/10/2019 09:10
Exact Location Of Accident	SIN MING MOTOR PARKING LOT NO:338 (COMFORT DELGRO)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FV6149D
Insured/Policyholder	
Name Of Registered Owner	WEE YI MING
NRIC No	S9714212B
Email Address	WEEYIMING2@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96894832
Alternative Phone No	OTHERS-96894832

Vehicle Particulars

Manufacturer	HONDA
Model	CB400-399CC
Exact Purpose for which vehicle was being used at time of accident	BIKE 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	MOTORCYCLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/19-394632-CA
Cover Note Number	

Driver

Name of Driver	WEE YI MING
NRIC No	S9714212B
Date Of Birth	30/04/1997
Occupation	OUTDOOR
Date Of Driving Pass	24/01/2019
Driving Experience	0 YEAR AND 8 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96894832
Fax Number	
Contact Number	OTHERS-96894832
Email Address	WEEYIMING2@GMAIL.COM

Address	BLK 668A JURONG WEST STREET 64 #01-116
Postcode	641668
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	3
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?	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 POLICE REPORT T/20191023/2182

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FS29Y
Vehicle Make/Model/Colour	
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	FBG2527Z
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Vehicle Make/Model/Colour

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)

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: 23/10/2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

UNKNOWN BIKER WAS
PARKED

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFR TO POLICE REPORT
7/2019/023/2182

DECLARATION

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

Policyholder's Signature

Date & Time: 23/10/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20191023/2182

1 of 3

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20191023/2182

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/10/2019 20:39		Vide Report No.:		Station Diary No.: 499	
Informant's Particulars					
Name of Informant: WEE YI MING			Address: APT BLK 668A JURONG WEST STREET 64 #01-116 SINGAPORE 641668		
ID Type / ID No.: NRIC NO / S9714212B			Contact No.: Home/Office: Mobile: 96894832		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 22	Date of Birth: 30/04/1997	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SALES			Driving Licence Information: Class: 2B,2A		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 05/10/2019 09:10	Type of Location: Car Park
Location: Along Road 1 SIN MING DRIVE				
At a proper open-space motorcycle parking lot no. 383 (Comfort Delgro Building)				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
FV6149D	Motorcycle	HONDA	CB400SF2J	Blue	Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FV6149D	MSIG INSURANCE (SINGAPORE) PTE. LTD.	MSDTMT19394632	25/01/2019	24/01/2020



**SINGAPORE
POLICE FORCE**



T/20191023/2182

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20191023/2182

CONTINUATION OF REPORT

Brief Details.

On the 05/10/2019 at around 0800hrs, I had parked my silver colour motorcycle bearing registration no. FV6149D at No. 383 Sin Ming Drive (Comfort Delgro Building) open-space proper motorcycle parking lot. Situation was normal then, I then left to another location.

On the same day, I had glanced at my motorcycle from a distance and it was still at the same motorcycle parking lot.

At around 1615hrs, I returned to the said parking lot and noticed that my right side mirror broke. I further inspect my motorcycle and discovered that there is a large size dent and a leakage on my motorcycle's fuel tank and a notable crack on the tailboard area. There is a CCTV Camera facing the said carpark.

I contacted Comfort Delgro management and they informed me that there were two occasions whereby my motorcycle had toppled on the ground. Occurrence are as follow:

- 1.) On the 05/10/2019 at around 0912hrs, one motorcycle bearing registration no. FS29Y had parked beside my motorcycle. As the rider got up from his motorcycle, my motorcycle had toppled to the right side.
- 2.) On the 05/10/2019 at around 1440hrs, another motorcycle bearing registration no. FBG2527Z, had also parked beside my motorcycle. As the rider got up from his motorcycle, my motorcycle had toppled to the right side.

On both occasion, there parking lot is quite narrow and I believed both rider had collided onto my motorcycle and not one of the rider had left a courtesy note to me with regard to the collision. I was also informed by Comfort Delgro Management that that on a third occasion (timing was not mentioned), my motorcycle had toppled to the right on its own. There was an ongoing event at the nearby vicinity and there were a lot of motorcycle moving in and out from the said parking lot.

The estimated repair cost is not known yet.

I am lodging this report as advised my the Comfort Delgro Management to retrieve the CCTV Footage of both the accidents. That's all.



**SINGAPORE
POLICE FORCE**



T/20191023/2182

3 of 3

Report No. T/20191023/2182

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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:
J/
Staff Sgt MUHAMMAD HAFIZ BIN DARUS

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
23/10/2019 20:39

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
COP NO. 151 6547-6151

Classification Of Case:

Authentication Stamp
NP158

SIGNATURE

ACCIDENT STATEMENT

ACCIDENT DATE: (05 / 10 / 2019) (DD/MM/YYYY), TIME: (16 : 15) (HH:MM)

LOCATION: Comfort Delgro Sin. Army

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FV6149D
 b) INSURANCE COMPANY: MSIG
 c) POLICY NUMBER: MSD/UNT/19-394632-CA
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: CB400 Honda
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: ~~use~~ Bike was parked
 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: Wee Yi Min (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S971422B CONTACT: 96894832
 c) ADDRESS: Jvong West St 64 Block 668A #01-116
 641688

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: M ABRAH (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: CONTACT:
 c) ADDRESS:

* d) DATE OF BIRTH: (30 / 04 / 1997) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

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: Nanyang NPC

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: FS29Y MODEL: MSX 125
 b) DRIVER'S NAME:
 c) NRIC/FIN/PASSPORT: CONTACT:

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: FBG25272 MODEL: CBF 150
 b) DRIVER'S NAME:
 c) NRIC/FIN/PASSPORT: CONTACT:

No of passengers
 (including driver)
 (0)

No of passengers
 (including driver)
 ()

No of passengers
 (including driver)
 ()

email = weeyimng2@gmail.com
 VIDEO

09:12

14:40



CA 519624

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

CERTIFICATE OF INSURANCE

Road Transport Act, 1987 (Malaysia)
The Motor Vehicles (Third Party Risks) Rules, 1989 (Federation of Malaysia)
The Motor Vehicles (Third Party Risks and Compensation) Act (CAI) 189 of the Revised Edition (Republic of Singapore)
The Motor Vehicles (Third Party Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)
Or any Amendment, Act or Acts passed in substitution thereof,

CERTIFICATE NO : MSD/VMT/19-394632-CA A0074-001/10239

SUM INSURED : TPL
EXCESS : NIL

1. Index mark and Registration Number of Vehicle PV6149D

HONDA

399 c.c.

2. Name of Policyholder WEE YI MING

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

1232PM 25/01/2019

4. Date of Expiry of Insurance

24/01/2020

5. Persons or Classes of Persons entitled to drive

a. The Policyholder.

b. KHOO BENG YAN ONLY

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. And provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitation as to Use

Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

7. The Policy does not cover

1. Use for hire or reward.

2. Use for racing, pace-making, reliability trial or speed-testing.

3. Use for the carriage of goods (other than samples) in connection with any trade or business.

4. Use for any purpose in connection with the Motor Trade.

* 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.

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 the Road Transport Act, 1987 (Malaysia).

25/01/2019 (CG)
CA/CI-03 (05/13)

COMMERCIAL AGENCY PTE. LTD.
Underwriting Agent
For MSIG Insurance (Singapore) Pte. Ltd.

440-8x