

NATIONAL Assessment Centre Services.

(ver 1 Jan'00)

1/10/09/49536

Date In: 12/11/2009 11:21	Job description	Date & Time Completed	Done by
Ref No: N81908560	SAS e-illing		
Veh No: SDK 7378	E-mail P (by date 2hrs, AIC 2hrs)		
D.O.A: 10/11/2009 13:00	I-Motor Claim Form		
OID: 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/Wksn		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars: Veh No: SHA 74097	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%; F: 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: ()

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

2) QC Check / Post Repair Inspection ()

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

Injury: _____

Damage: _____

Claimant's Declaration:	1) AR: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$10)	
Contact No:	3) TP: Towing Fee \$40/\$45	
Damage Portion:	4) PT: Follow-Through Survey \$120	
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey) \$30	
For claiming against INC Only (ver 10 Jan 2003)	6) TR: Re-inspection \$75	
7) NI: Idas DA + SMRT Survey \$160		
8) NTUC Additional Services:		
ON:		
*N5: Courtesy Car / Tpl Allowance \$3		
*N6: Repair Co-ordination \$10		
*N7: Post Repair Inspection \$25		
*N8: DV / Collect Excess Coordination \$3		
TP (Nil) / TP (Non INC) against Inc \$30		
9) N12: Idas 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	12/11/2019 11:21
Date Of Accident	10/11/2019 13:00
Exact Location Of Accident	ALONG TAMPINES AVENUE 7
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDK7378J
Insured/Policyholder	
Name Of Registered Owner	TENG SWEE SNG
NRIC No	S1296550H
Email Address	TENGSWEEESNG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96385966
Alternative Phone No	OTHERS-96385966

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	S350
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	B 29118772 TMP
Cover Note Number	

Driver

Name of Driver	TENG SWEE SNG
NRIC No	S1296550H
Date Of Birth	02/07/1958
Occupation	OUTDOOR
Date Of Driving Pass	17/11/1978
Driving Experience	40 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96385966
Fax Number	
Contact Number	OTHERS-96385966
Email Address	TENGSWEEESNG@GMAIL.COM

Address	BLK 182 JELEBU ROAD #24-56
Postcode	670182
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	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?	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	SHD7449T
Vehicle Make/Model/Colour	MERCEDES BENZ E220
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.
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: 11/11/19
11:00 am

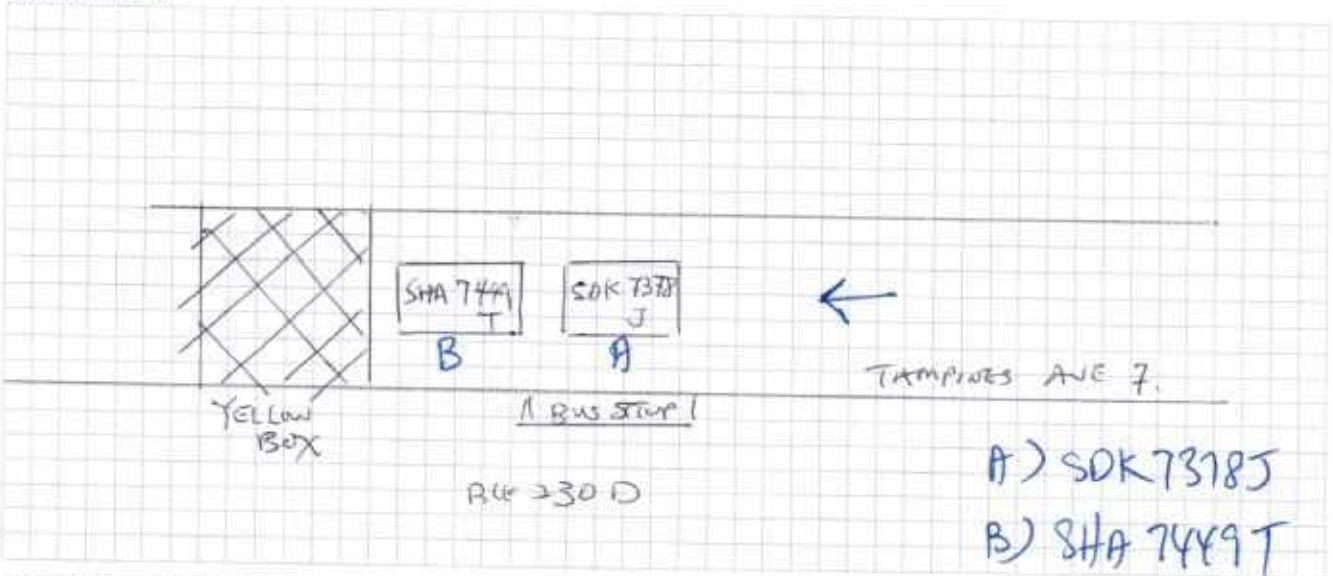
Driver's Signature

(If driver is not the policyholder)
Date & Time: 11/11/19
11 am

Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 10/11/19 AT ABOUT 1 PM. I WAS DRIVING ALONG TAMPINES AVE 7 AT ABOUT 50 KPH. THE TAXI SHA 7449 T STOP ABRUPTLY IN FRONT OF A YELLOW BOX. I COULD NOT STOP IN TIME DESPITE JAMMING BRAKE & COLLIDED WITH THE TAXI IN FRONT.

DECLARATION

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

Policyholder's Signature
Date & Time: 11/11/19
GIANNE SketchPlanForm_Y311am

Driver's Signature
(If driver is not the policyholder)
Date & Time: 11/11/19
11 am

Reporting Centre Personnel's Signature
Name: Keshi
NRIC/FIN No.: 12/11/2019

ACCIDENT STATEMENT

ACCIDENT DATE: (10/11/2019) (DD/MM/YYYY), TIME: (13:00) (HH:MM)

LOCATION: TAMPINES AVE 7

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SDK 7378J
 b) INSURANCE COMPANY: MSIG
 c) POLICY NUMBER: 829074992 GMY
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: MERCE S350
 f) TYPE (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: LEISURE
 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: TENG SWEE SNG (MALE / FEMALE)
 B) NRIC/FIN/PASSPORT: S1296550H CONTACT: 96385966
 C) ADDRESS: BLK 182 JELABU ROAD #24-56 S67082

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: TENG SWEE SNG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1296550H CONTACT: 96385966
 c) ADDRESS: BLK 182 JELABU ROAD #24-56 S67082

* d) DATE OF BIRTH: (02/07/1978) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 17/11/1978

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: SELF

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:

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SHA 7449T MODEL: MERCE E220 (TAXI)
 b) DRIVER'S NAME: NA
 c) NRIC/FIN/PASSPORT: NA CONTACT: NA

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: MODEL:
 e) DRIVER'S NAME:
 f) NRIC/FIN/PASSPORT: CONTACT:..

COMFORT DELICIOUS
 DRIVER REFUSE TO EXCHANGE INFO

NO Insurance

email = tengsweesng@gmail.com
 VIDEO



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

PRIVATE MOTOR CAR - TP

THE SCHEDULE

Policy Number	Period of Insurance	Place of Issue
B 29118772 TMP	28/04/2019 to 27/04/2020	SINGAPORE
Name and Address of Insured		Date of Issue
Teng Swee Sng 182 Jeleebu Road #24-56 Singapore 670182		13/03/2019
		Account Number
		212362
Premium	GST	Total Due
SGD882.18	SGD61.75	SGD943.93

RISK NUMBER 1

PRIVATE MOTOR CAR - TP

OCCUPATION

Real Estate Agent

SCOPE OF COVER Third Party

INTEREST INSURED

REGISTRATION NO. SDK7378J
 MAKE/MODEL Mercedes Benz S350L
 ENGINE NUMBER 27296530219372
 CHASSIS NUMBER WDD2211562A015802
 YEAR OF MFG 2005
 CAPACITY 3498 C.C.
 SEATING CAPACITY 5 (INCL. DRIVER)
 WINDSCREEN NIL

OFF-PEAK CAR NO
 NO CLAIM DISCOUNT 50.00% (or F/D)
 NCD PROTECTOR NOT COVERED
 EXCESS NIL
 ANNUAL PREMIUM SGD882.18

AUTHORISED DRIVERS

Teng Swee Sng
 Any other person provided he is driving on the Insured's order or with the Insured's permission.

LIMITATION AS TO USE

Use only for social domestic and pleasure purposes and for the Insured's business.
 The Policy does not cover use for hire or reward racing pace-making