

NATIONAL Assessment Centre Services

[wef 1 Jan'05] MHA 119 157510

Date In: 29/11/19-11:58	Job description	Date & Time Completed	Done by
Ref No: HA/INC 19-21104/24	SAS e-filing		
Veh No: GBA 4804	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 28/11/19-18:10	i-Motor Claim Form	M/1073545-201	29/11/19 12:43
OD / TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SM 967m	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:- (INC hotline: 6788 6616)	Date & Time Completed	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

HA 19-8985	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
Claimant's Particulars:-	1) AR : Accident Reporting (\$30);	1st Bill	Add Bill
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF : Towing Fee \$40/\$45		
Damaged Portion:	4) FT : Follow-Through Survey \$120		
	5) FT : Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR : Re-inspection \$75		
	7) N1 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):	Q1*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
Auditors' Comments:-	*N8: DV / Collect Excess Coordination \$5		
	TP (N11) : TP (N'n INC) against INC \$20		
Dat. 1:	9) N12: Idac Mobile \$0		
Dat. 2 / 3:	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	29/11/2019 11:58
Date Of Accident	28/11/2019 18:10
Exact Location Of Accident	PIE (CHANGI) AFTER BUKIT TIMAH RD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA4180H
Insured/Policyholder	
Name Of Registered Owner	NANO-TECH INTERNATIONAL PTE LTD
Co Reg No	200403967E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96753699
Alternative Phone No	OFFICE-96753699

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 MANUAL
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5110374961
Cover Note Number	

Driver

Name of Driver	RAMAMOORTHY VAITHEESHWARAN
Passport No/FIN	G7876505X
Date Of Birth	12/05/1987
Occupation	OUTDOOR
Date Of Driving Pass	19/04/2013
Driving Experience	6 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81855417
Fax Number	
Contact Number	OFFICE-81855417
EMail Address	NOEMAIL

Address	11 JALAN HOBORAN
Postcode	369078
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	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)	4
Passenger 1	NAME: : MANI GENDER: : MALE
Passenger 2	NAME: : JAYA GENDER: : MALE
Passenger 3	NAME: : PALANI GENDER: : MALE

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	SMM967M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	GASPAR MELVIN TERENCE
NRIC/Passport Number	
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

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:


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


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

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above said date & time, I was driving my vehicle A (GBA4180H) traveling along PTE tud's Changi on fifth lane of a 5-lanes, expressway. Somewhere after Bukit Timah Rd Exit, I wanted to filtered to lane 4. Out of sudden, vehicle B (SMM967M) ahead made a jam brake and I couldn't stop on time. As a result, the front portion of my vehicle collided onto the rear right of vehicle B.

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.:

Vehicle No.	G13A 4180H		Model / Make	Toyota Dyna
Date of Accident	28/11/19			
Time of Accident	1810	HRS		
Location of Accident	Along AE twds Changi After Bukit Timah Exit			
Exact purpose use during accident	Work			
Name of Owner	Nano-Tech International Pte Ltd			
Telephone No.	H/P: 96753699	Home :	Office :	
NRIC	200403967E			
Address	11 Jalan Hiberan S (369078)			
Claim type	OD	THIRD PARTY	REPORTING ONLY	
Insurance Company	NTUC			
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft	
Policy No.	5110374961			
Name of Driver	As Above If No, Ramamoorthy Vartheeshwaran			
NRIC	G7876505X	Any Passengers :	3	
Date of birth	12/5/1987		Mani (m)	
Occupation	Outdoor / Indoor		Jaya (m)	
Driving License Pass Date	19/4/2013		Palani (m)	
Gender	Male / Female			
Contact No.	H/P: 81855417	Home :	Office :	
Address	11 Jalan Hiberan S (369078)			
Driver have any own vehicle	No,	If yes, Reg No.		
Relationship	Employee,	If no, state		
Weather condition	Clear	Raining Other		
Road Surface	Dry	Wet Other		
Any Injuries	No,	If Yes, Who?		
Name And Contact No.				
Name And Contact No.				
Police Report	No,	If Yes, Where?		
Vehicle B No.	Smm 967M	Any Passengers :	1	
Name of Driver	Gaspar Melvin Terencio	Contact No. :		
Vehicle C No.		Any Passengers :		
Vehicle D No.		Any Passengers :		
Vehicle E no.		Any Passengers :		
Vehicle F No.		Any Passengers :		
Vehicle G No.		Any Passengers :		
Witness Name		Witness Contact :		
Accident Portion	Front portion			
Camera Recorder	Yes / No			
Email Address	project@nano-tech.com.sg			
PARTICULAR WORKSHOP	N-51 Automotiva Pte Ltd			
CONTACT NO.	6842 0051 / 6744 0510			
CONTACT PERSON	Zi Ting			
FAX NO	6741 0510			
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg			

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 : 5110374961

Cover : Third Party, Fire & Theft

- | | |
|---|-----------------------------------|
| 1. Index mark and Registration Number of Vehicle | : GBA4180H |
| Chassis Number | : JTFAT35Y003000999 |
| 2. Name of Policyholder | : NANO-TECH INTERNATIONAL PTE LTD |
| 3. Effective Date of Insurance | : 03 Jul 2019 |
| 4. Expiry Date of Insurance | : 02 Jul 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 business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |

This Policy does not cover

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

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)	: N/A
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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 : ELITE (L&G) ASSOCIATES (00000572855)

Date of Issue : 24 Jun 2019 15:06 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident

Vehicle No. (For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5110374961		NAND-TECH INTERNATIONAL PTE LTD	200403967E	GCV	Third Party, Fire & Theft	GBA4180H	GBA4180H	03/07/2019	02/07/2020

▼ Policy Information					
Policy No.	5110374961	Policyholder Name	NANO-TECH INTERNATIONAL P1	Policyholder NRIC	200403967E
Certificate No.					
Address	NIL				
Product Name	COMMERCIAL VEHICLE INSURAI	Plan		Group Policy Flag	N
Policy Issue Date	24/06/2019	Effective Date	03/07/2019 00:00	Expiry Date	02/07/2020 23:59
Excess Type	Per Accident	All Claims Excess			
Third Party Excess	0	Own damage Excess	0	Windscreen Excess	0
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess		Young/Inexperience Driver Excess	
Agent	ELITE (L&G) ASSOCIATES	Agent Tel.	63496237	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					
▼ Policyholder Mailing Address					
Address 1	NIL	Address 2		Address 3	
Address 4		Address Type	Singapore address	Post Code	999999
Unit No.		Related Policy Number	5102013422-01		
▶ Insured Object: GBA4180H					
▼ Endorsements					
Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content	
<div>Continue</div> <div>Cancel</div>					

Claim Handling

Accident MT/1073545

Policy No.	S110374961	Vehicle No.	GBA4180H	GST Registration No.	NA
Certificate No.					
Policyholder Name	NANO-TECH INTERNATIONAL PTE LTD			Policyholder NRIC	200403967E
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No. (Mobile)	96753699	Contact No. (Office)	0	Contact No. (Home)	0
Email Address		Special Remark		eCode	<input type="text"/>
KPK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No
Accident Details					
Report Date	29/11/2019 12:11	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	28/11/2019	Time of Accident hh:mm	18:10	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	PSE (CHANGI) AFTER BUKIT TIMAH RD EXIT				
Total Excess Applicable					
Excess Type	Per Accident	Windscreen Excess	0.00		
OD Standard Excess	0.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess		Driver is Covered?	
Additional Excess					
Total OD Excess Applicable	0.00	Total TP Excess Applicable			
Benefits					
GST Registered Information					
GST Registered	Yes	GST Registration Date	01/12/2006		
GST Registration No.	200403967E	GST Status Verified	Yes		
Modification History	29/11/2019 12:12:58 System changed GST Registration No. from NA to 200403967E 29/11/2019 12:12:58 System changed GST Registration Date from 01/01/2015 to 01/12/2006 29/11/2019 12:12:58 System changed GST Status Verified from No to Yes				
Policyholder Mailing Address					
Address 1	NIL	Address 2		Address 3	
Address 4		Address Type	Singapore address	Post Code	999999
Unit No.		Related Policy Number	S102013422-01		
Q1 Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	12/05/1987
Unnamed driver Name	RAMAMOORTHY VAITHEESHWAR	Driver NRIC	G7676505X	Driving Experience	6
Register Date of Driver License	19/04/2013	Driver Age	32	Contact No. (Home)	0
Contact No. (Mobile)	81855417	Contact No. (Office)	0	Address 3	
Address 1	11 JALAN HIBORAN	Address 2	SINGAPORE 369078	Post Code	369078
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Modification History

Claim 001 **New**

Claim Type *	QD-MX	Insured Name	NANO-TECH INTERNATIONAL P	Insured NRIC	200403967E
Contact No. (Mobile)		Contact No. (Home)		Contact No. (Office)	68418816
Email Address		Q1 Vehicle Number	GBA4180H	TP Vehicle Number	S9M967M
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	GBA4180H / S9M967M ON 28 Nov 2019				
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	29/11/2019 12:13	Claim Close Date		Date Received	29/11/2019 00:00
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.	MT/1073545	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	29/11/2019 12:14
Path *	Category *	Confidential	Urgency *
Browse... Clear	Please Select	<input type="checkbox"/>	Normal
Browse... Clear	Please Select	<input type="checkbox"/>	Normal
Browse... Clear	Please Select	<input type="checkbox"/>	Normal
Browse... Clear	Please Select	<input type="checkbox"/>	Normal
Browse... Clear	Please Select	<input type="checkbox"/>	Normal
Browse... Clear	Please Select	<input type="checkbox"/>	Normal

☐ Send Message

Attachment List						
Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:14	NRSC/ Driving License	Y	Normal	NRSC/ Driving License 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:14	SAS		Normal	SAS 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 29 Nov 2019 12:13	Photos		Normal	Photos 2019-11-29	

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
<div>Display in New Window</div> <div>Scan and uploading</div>				