

# NATIONAL Assessment Centre Services

Date In: 02/01/20	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA/NA620000039/13	E-mail (within 5hrs, A/D 2hrs):		
Veh No: FBF5847K	i-Motor Claim Form		
D.O.A: 01/01/20 0930	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OD TP Reporting Only	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: STOLEN	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 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

NAJ000314	<b>Invoice Preparation Checklist</b>		Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);			
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TP: 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):	OH*			
	*N5: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
Auditors' Comments :-	TP (N11): TP (Non INC) against INC \$20			
Cat 1:	9) N12: Idac Mobile 30			
Cat 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	02/01/2020 12:50
Date Of Accident	01/01/2020 09:30
Exact Location Of Accident	JLN TERATAI 8 TAMAN JOHOR JAYA
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBF5847K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHIN JUH KHOI
NRIC No	SXXXX437C
Email Address	JUHKHOI@HOTMAIL.COM
Mobile Phone No	(FOREIGN) 016-7919528
Alternative Phone No	OTHERS-90699896

### Vehicle Particulars

Manufacturer	YAMAHA
Model	135CC
Exact Purpose for which vehicle was being used at time of accident	PARKED VEH

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

Vehicle Category	MOTORCYCLE
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### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/19-503230-WTT
Cover Note Number	

### Driver

Name of Driver	CHIN JUH KHOI
NRIC No	SXXXX437C
Date Of Birth	21/09/1966
Occupation	OUTDOOR
Date Of Driving Pass	28/11/2003
Driving Experience	16 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(FOREIGN) 016-7919528
Fax Number	
Contact Number	OTHERS-90699896
Email Address	JUHKHOI@HOTMAIL.COM

Address	BLK 317B YISHUN AVE 9 #04-288
Postcode	762317
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	NO COLLISION
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 27 MARSILING DRIVE , POSTCODE: 730027 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-3689999 - FAX NO: 63682383
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT: L/20200101/2039

#### Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO



## 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:

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

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

AS PER ATTACHED  
LOCATIONAL

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the police report: C/20200101/2039

DECLARATION

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

*[Signature]* 02/01/2020  
Policyholder's Signature  
Date & Time:  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]* 02/01/20  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



## Google Maps Jalan Teratai 8



Image capture: Feb 2019 © 2020 Google

Johor Bahru, Johor

 Google

Street View





**SINGAPORE  
POLICE FORCE**



L/20200101/2039

1 of 2

**POLICE REPORT (NP299)**

Report No. L/20200101/2039

Police Station Of Origin  
Bukit Panjang North NPP  
27 Marsiling Drive #01-237 SINGAPORE  
730027  
Tel No: 1800-3689999

Date/Time Report Made 01/01/2020 12:47		Vide Report No.		Station Diary No. 8	
Name Of Informant CHIN JUH KHOI		Address APT BLK 317B YISHUN AVENUE 9 #04-288 SINGAPORE 762317			
ID Type / ID No. NRIC NO / S2703437C		Contact No. Home/Office Mobile 90699896			
Nationality MALAYSIAN		Email Address			
Occupation Other electrical line installers and repairers		Sex Male	Age 53	Date of Birth 21/09/1966	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 01/01/2020 09:30 - 01/01/2020 09:50		Location Of Incident AT THE VICINITY JALAN TERATAI 8 TAMAN JOHOR JAYA MALAYSIA			

**Brief details.**

On the 01/01/2020 at about 0930hrs , I was at the vicinity of No.8 Jalan Teratai Taman Johor Jaya . I park my motorcycle( FBF5847K) in front of the restaurant and proceeded to have my meal . At about 0950hrs , I exited the stall and discovered my motorcycle to be missing . I searched around the vicinity but to no avail . This is the first time such incident happen to me and I did not see who stole my motorcycle . I then lodged a police report in Malaysia , Malaysia Police report number J/JAYA/000015/20.

Signature Of Officer Recording The Report: L / Sgt 2 ELTON DE LAURE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 01/01/2020 12:47
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / ASP KOH JHAI LENG, SHAMMAH Contact No.: 64660000	Classification Of Case:

Authentication Stamp





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20200101/2039

Vehicle Information					
S/N	Vehicle Registration Number	Engine No.	Chasis No.	S'pore Car	Status
1	FBF5847K	5YP013213	5YP013213	Yes	Stolen Overseas

Signature Of Officer Recording The Report:

L / Sgt 2 ELTON DE LAURE

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
L / Woodlands Police Divisional Investigation Branch /  
ASP KOH JHAI LENG, SHAMMAH  
Contact No.: 64660000

Authentication Stamp

Signature Of Informant:

Date/Time:  
01/01/2020 12:47

Classification Of Case:





MSIG

W 718801  
 MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)  
 4 Shenton Way, # 21-01, SGX Centre2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 msig.com.sg

# CERTIFICATE OF INSURANCE

Road Transport Act 1987 (Malaysia), Road Transport (Amendment) Act 2019 (Malaysia)  
 The Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)  
 The Motor Vehicles (Third Party Risks and Compensation) Act (CAP. 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/VMS/19-503230-WTT A0633-001/W0857
- SUM INSURED : PMV
- EXCESS : \$300(FIRE&THEFT) \$600(ENDT 2K)
1. Index mark and Registration Number of Vehicle S2703437C  
 FBF5847K
2. Name of Policyholder YAMAHA 135 c.c.  
 CHIN JUH KHOI
3. Effective date of the Commencement of Insurance  
 for the purposes of the Act 0001AM 08/09/2019
4. Date of Expiry of Insurance 07/09/2020
5. Persons or Classes of Persons entitled to drive  
 a. The Policyholder.

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 Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof."

Repl CN: 60873570  
 27/08/2019 (L)  
 WTT-CI-04/04/14

WTT INSURANCE AGENCIES PTE LTD  
 Underwriting Agent  
 For MSIG Insurance (Singapore) Pte. Ltd.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of CHIN JUH KHOI

License Number: S2703437C

Name: CHIN JUH KHOI

Birth Date: 21 Sep 1966

Issue Date: 28 Nov 2003

Barcode: 0010193008

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S2703437C

Portrait of CHIN JUH KHOI

Name: CHIN JUH KHOI

曾 祝 开

Race: CHINESE

Date of Birth: 21-09-1966

Sex: M

Country of Birth: MALAYSIA

Barcode: 0010193008

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

Class	Description	Valid Until
Class 2B	Motorcycles <= 200 CC	28 Nov 2003
Class 2A	Motorcycles between 201 CC and 400 CC	27 Jan 2011
Class 3	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	28 Nov 2003

S2703437C

S/No. 9000137936

License No: S2703437C

MP 426A

8391936

Barcode: 8391936

Portrait of CHIN JUH KHOI

NRIC No: S2703437C

Nationality: MALAYSIAN

Blood Group: A+

Date of issue: 13-03-2003

APT BLK 317B YISHUN AVENUE 9 #04-288

SINGAPORE 762317

NRIC No: S2703437C

Date: 19/10/2014