

# NATIONAL Assessment Centre Services.

(last 1 Jan 05)

NA/20015171

Date In: 03/01/2020 16:20	Job description	Date & Time Completed	Done by
Ref No: 2001/20001282/4	SAS e-filing		
Veh No: 810 9666 S	E-mail (Wjda 2hrs, AIG 2hrs)		
D.O.A: 01/01/2020 16:10	1-Motor Claim Form		
OT: TP / Reporting Only	1-Motor W/O (Withfor OD 2hrs, TP 1hrs)		
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Vhsn		

Preferred Wicup / INC Assign Wicup / QW: (	Tel:	Fax:
TP Manipulator:	Veh No: SK7 1020	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 of Injury: ( )
Time of Injury: ( )
Location of Injury: ( )
Witness: ( )
Police Report: ( )

NA/20015171	Driver/Owner:	1) All Accident Reporting (\$30)	
Contact No:		2) DA: Damage Assessment (\$100) INC (10)	
Damaged Portion:		3) TP: Towing Fee \$120	
QC Checked by (Engr-In-Charge):		4) PT: Follow-Through Survey \$20	
		5) PT: Follow-Through Survey (Resurvey) \$20	
		6) TR: Re-inspection \$75	
		7) NI: IGeo DA + SMRT Survey \$160	
		8) NIUC Additional Services:	
		9) NIUC Additional Services:	
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		100) NIUC Additional Services:	

NA/20015171	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	03/02/2020 16:20
Date Of Accident	02/02/2020 16:10
Exact Location Of Accident	ALONG BAYFRONT AVENUE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU9666S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN KHEAN HONG PETER
NRIC No	SXXXX302D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90091816
Alternative Phone No	OTHERS-90091816

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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	THIRD PARTY
Vehicle Category	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MR000249
Cover Note Number	

### Driver

Name of Driver	TAN KHEAN HONG PETER
NRIC No	SXXXX302D
Date Of Birth	18/09/1950
Occupation	OUTDOOR
Date Of Driving Pass	27/02/1978
Driving Experience	41 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90091816
Fax Number	
Contact Number	OTHERS-90091816
Email Address	NOEMAIL

Address	BLK 506 JELAPANG ROAD #09-28
Postcode	670506
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?	YES
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 AND ATTACHMENT

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKT102D
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)	

#### DETAILS OF INJURED PERSON 1

Name	TAN KHEAN HONG PETER
Approximate Age	
Injuries Sustain	BODY PAIN
Injured person in which vehicle?	SLU9666S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	


## SKETCH PLAN


### IMPORTANT NOTICE

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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: ROS L. LUTARAS  
NRIC/FIN No.:



SKETCH PLAN

Raffles Avenue



A = SLU9666S

B = SKT 102 D

Bayfront Avenue

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attach

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.:

03/02/2022  
Rosh  
Wahid

On 02.02.2020 at about 16:10 hours along Bayfront Avenue. I was slow moving straight on lane 3, as the front vehicles were stopped and queueing along the slip road of Bayfront Avenue towards Raffles Avenue hence I slowed down and stopped.

Suddenly I heard a loud bang from behind. When I alighted I realised vehicle (B) had collided onto rear portion of my vehicle (A).

Vehicle (A): SLU 9666S

Vehicle (B): SKT 102D



02/02/2020  
Rashid

## SINGAPORE ACCIDENT STATEMENT

Accident Date: 02/02/2020	Time: 16:10	(hh:mm) 24 hr format
Location Bayfront Avenue.		
Vehicle Number SLU 9666S		
Insured Name Tan Khean Hung Peter.		
NRIC/FIN S2015302D.	Contact Number 90091816.	
Make Toyota	Model Corolla Altis	
Are you claiming under your own insurance policy for repair to your vehicle?		
( ) Yes If No, Pls select: ( <input checked="" type="checkbox"/> ) Third Party ( ) Reporting		
Insurance Company Tokio Marine.		
Type of Policy ( <input checked="" type="checkbox"/> ) Comprehensive ( ) Third Party Fire & Theft ( ) TP Only		
Policy Number MR000249		
Name of Driver ( <input checked="" type="checkbox"/> ) Same as Insured		
NRIC / FIN Contact Number		
Date of Birth 18/09/1950		
Driving Pass Date 27/02/1978.		
Occupation ( ) Indoor ( <input checked="" type="checkbox"/> ) Outdoor		
Gender ( <input checked="" type="checkbox"/> ) Male ( ) Female		
Email Address - No e-mail ( <input checked="" type="checkbox"/> ) NO EMAIL		
Address of Driver BLK 506 Jelapang Road		
#09-28 Singapore 670506		
Was driver an employee of the Insured's Company? ( ) Yes ( <input checked="" type="checkbox"/> ) No		
If No, Relationship of the Driver with the Insured		
( <input checked="" type="checkbox"/> ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling		
Does the Driver Own Any Other Vehicle? ( ) Yes ( ) No		
If Yes, Vehicle Registration Number of Driver's Own Vehicle		
Insurance Company of Driver's Own Vehicle		
Weather Conditions ( <input checked="" type="checkbox"/> ) Clear ( ) Raining ( ) Others		
Road Surface ( <input checked="" type="checkbox"/> ) Dry ( ) Wet ( ) Others		
Was any foreign vehicle involved in this accident? ( ) Yes ( <input checked="" type="checkbox"/> ) No		
Was anybody injured in the accident? ( <input checked="" type="checkbox"/> ) Yes ( ) No		
If yes, injured detail Tan Khean Hung Peter Body Pain		
Was there any video captured by Car Camera? ( <input checked="" type="checkbox"/> ) Yes ( ) No		
Was the Accident reported to the Police? ( ) Yes ( <input checked="" type="checkbox"/> ) No If yes attach police report		
DETAILS OF 3 <sup>rd</sup> party	Name / Nric	Contact
Veh B	SKT 102 D.	
Veh C		
Veh D		
Veh E		
Veh F		

Driver Only



**Tokio Marine Insurance Singapore Ltd.**

Company Reg. No. 1120001224 (SST Reg No. M21994120-1)

30 MacCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0095 E: [info@tokiomarine.com.sg](mailto:info@tokiomarine.com.sg) W: [www.tokiomarine.com.sg](http://www.tokiomarine.com.sg)

Authorized Signatory

Token for Insurance



**TOKIO MARINE  
INSURANCE GROUP**

**Certificate of Insurance**

FORM MX1-H

**MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 169)**

**MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960**

**ROAD TRANSPORT ACT, 1987 (MALAYSIA)**

**MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)**

Policy No.: MR000249 (Private Car)

1. Index Mark and Registration Number of Vehicle

SLU95669

Chassis No.: NKE1657143052

2. Name of Policyholder

TAN KHEAN HONG PETER

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

11/01/2020 (11:04:36)

4. Date of Expiry of Insurance

10/01/2021

5. Persons or Class of Persons entitled to drive\*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.  
Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.  
The Policy does not cover:-

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

\* 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 under the Road Traffic Act and its regulation under the Road Traffic Act has not been suspended at the time of the accident loss or damage.

6. Limitations as to use\*

\* Limitations rendered inoperative by Section 2 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169) and Section 25 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the Insurance.

**IMPORTANT NOTICE**

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost or destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 169).

ADDITIONAL INFORMATION		Account No: 2896DDA	
Insurance Plan:	Comprehensive:		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims:	SGD 2,500.00	(Original Excess : SGD 2,500.00)
	Additional Excess for Unnamed Driver(s)	SGD 500.00	
	Additional Excess for Young or Inexperience Driver(s)	SGD 1,500.00	
	WindScreen Excess	SGD 100.00	
	Excess-Third Party (Sect II)	SGD 2,500.00	
Financial Interest:	SHUN HENG CREDIT PTE LTD		
Additional Terms:	1. Unnamed Driver Excess is not applicable 2. Vehicle is licensed for private hire by LTA and can be used for private hire limousine services. 3. Only named drivers with private hire licences can use car for private hire. 4. YID excess applied on Section 1 & Section 2 separately. 5. Notwithstanding anything to the contrary in the policy, MC19 Waiver of Excess is NOT applicable. 6. Private Hire Usage Vehicle Endorsement is applicable. 7. Approved workshop plan only		

**TOKIO MARINE INSURANCE SINGAPORE LTD.**

Authorised Signature