NATIONAL Assessment Centre Services. (wef 1 Jan'05) . MNA4200/1885?

	Job description	Date &Time Completed	Done by
Date In: 13/02/2020 12:46			
Ref No: NBA/MG20002528/V	SAS e-filing		
Veh No: GBH 3119 G	E-mail (Ajaia 8hrs, AIC 2hrs)		
D.O.A: 11/02/2020 18:40	I-Motor Claim Form		
(OD) / TP / Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW: (Tel: Fax:)

TP Particulars: Veh No: SMK7051G 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: ( )

Customer Service		Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost> $3000] ( )		

Injury :

Date

MA200/464

Claimant Particulars

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors Comments:

Cal. 1:

Invoice			
1) AR : Accident Reporting ($30);			
2) DA : Damage Assessment ($100); INC ($30)	$40/$45		
3) TF : Towing Fee	$120		
4) FT : Follow-Through Survey	$30		
5) FT : Follow-Through Survey (Resurvey) For claiming against INC Only (wef 10 Jan 2005)	$75		
6) TR : Re-Inspection	$160		
7) N1 : Idea DA + SMRT Survey			
8) NTUC Additional Services:-			
OD:	$3		
*N5: Courtesy Car / Tpt Allowance	$10		
*N6: Repair Co-ordination	$25		
*N7: Post Repair Inspection	$3		
*N8: DV / Collect Excess Coordination	$20		
TP (N11) : TP (Non INC) against INC	30		
9) N12: Idea Mobile			
Invoice dated *Fee Charged*			
Invoice dated *Fee Charged*			

MNA420019857 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 13/02/2020 12:46
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 13/02/2020 14:22

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 witholding 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	13/02/2020 12:46
Date Of Accident	11/02/2020 18:40
Exact Location Of Accident	NO 1 ENGKU AMAN TURN TO WISMA GEYLANG SERAI
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBH3119G
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	2XXXXX651D
Email Address	ABDULRAZAKBIN.OMAR@ECOLAB.COM
Mobile Phone No	(LOCAL) +65-97302933
Alternative Phone No	OFFICE-97302933
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994313
Cover Note Number	
Driver	
Name of Driver	ABDUL RAZAK BIN OMAR
NRIC No	SXXXX871D
Date Of Birth	02/09/1961
Occupation	OUTDOOR
Date Of Driving Pass	20/01/2005
Driving Experience	15 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97302933
Fax Number	
Contact Number	OTHERS-97302933
EMail Address	ABDULRAZAKBIN.OMAR@ECOLAB.COM

Address	BLK 711 PASIR RIS STREET 72 #09-53
Postcode	510711
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	RAINING
Road Surface	WET

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?	YES
If Yes,Please state which Police Station	
Police Station Name	BEDOK POLICE DIVISIONAL HQ (G DIVISION)
Police Station Address	**ROAD**: 30 BEDOK NORTH ROAD , **POSTCODE**: 469676 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO**: 1800-2440000 - **FAX NO**: 64443009
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT G/20200212/7065

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	SMK7021G
Vehicle Make/Model/Colour	RENAULT SCENIC
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TENG NGAI GUAN
NRIC/Passport Number	SXXXX521I
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT PLAN

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 willful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability.**
4. The issue and acceptance of the 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association Of Singapore (GIA) for archiving and hiy copies of this report will be kept be made available upon available upon application by interested parties.
7. By the lodgement of this report to the insurers, I/we by consent to the archiving of this report at the centre and the copies of the report being made available above said.

8 **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that

(a) My insurer, workshop and General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my/insurer (collectively the "**Personal Information**") and any other personal information provided by me or who have insured vehicle(s) involved in the accident (all the aforesaid who have insured vehicle(s) involved in this accident shall be collectively referred to as the "**Insurers**"), the insurer 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 insurer's lawyer/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and

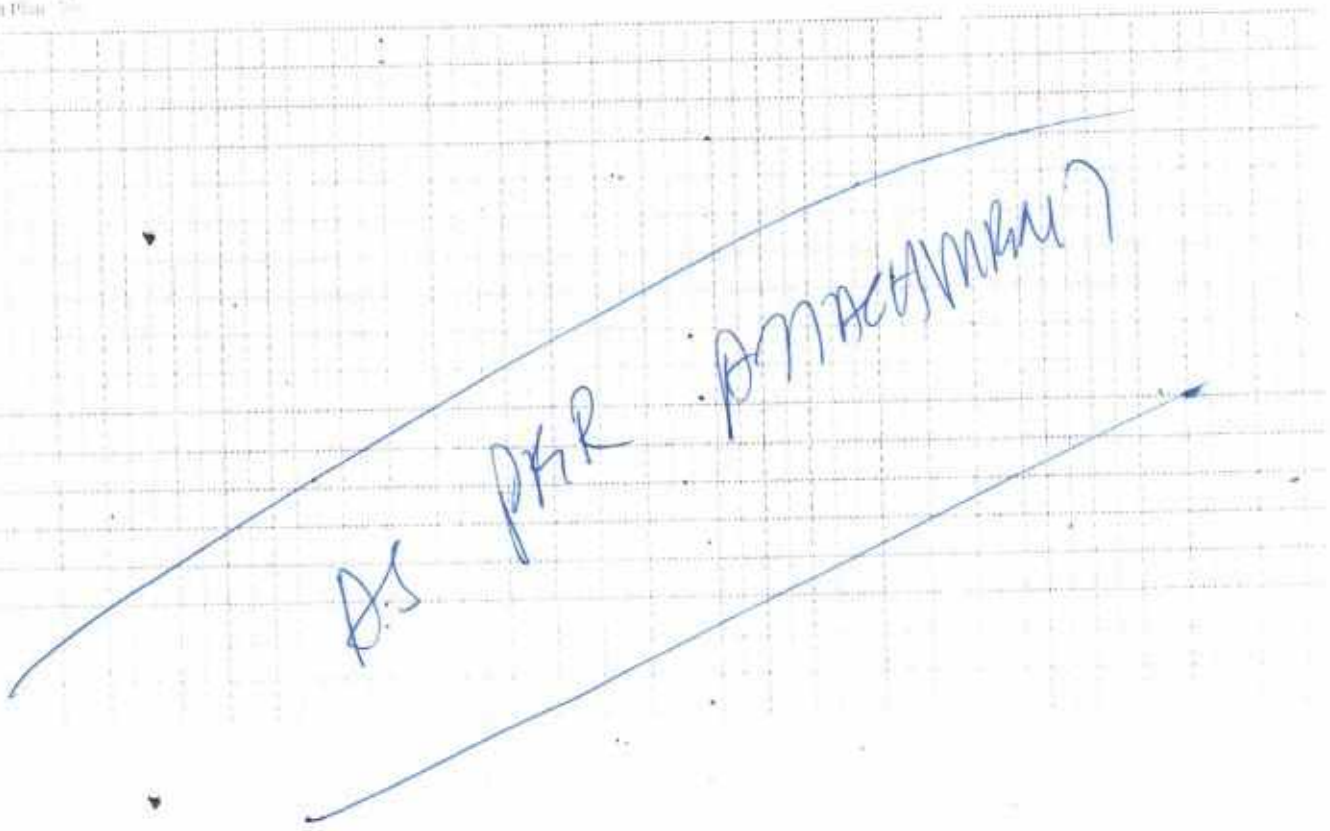
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

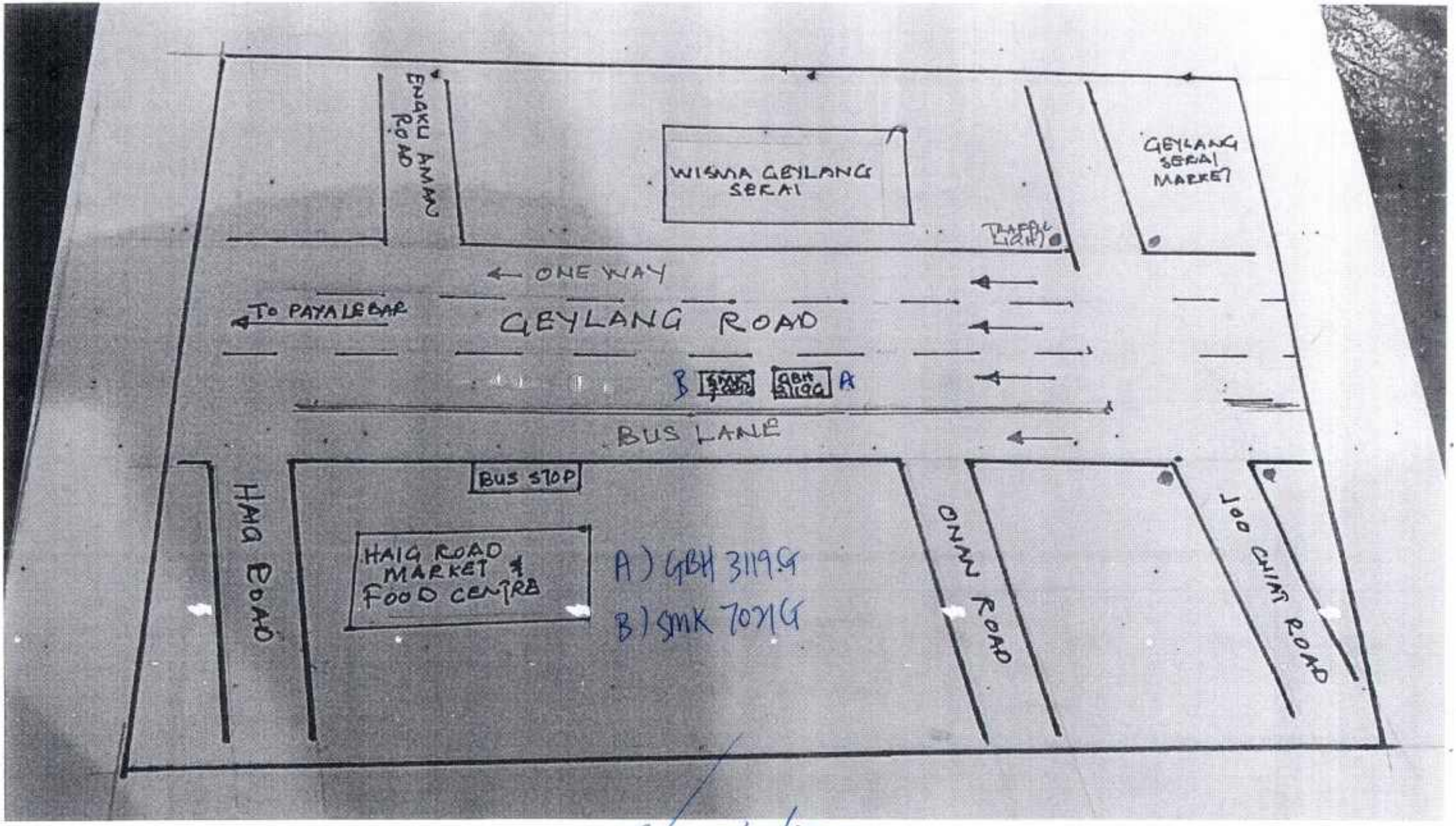
[redacted] 13/01/2020

[redacted]

[redacted]

Sketch Plan




ENAKU AMAN ROAD
WISMA GEYLANG SERAI
GEYLANG SERAI MARKET
TRAFFIC LIGHT
← ONE WAY
To PAYA LEBAR
GEYLANG ROAD
B
A
BUS LANE
BUS STOP
HAIG ROAD
HAIG ROAD MARKET & FOOD CENTRE
A) GBH 3119G
B) SMK 7071G
ONAN ROAD
JOO CHIAT ROAD

13/02/2020

Describe Circumstance of the Accident

I was driving my company van - GBH 3119G along Changi Road / Geylang Road near Nisma Geylang at about 6.40pm when I accidentally hit another local car in front. SMK 7031G. I hit the rear bumper of the car in front, which resulted in the front bumper of my company vehicle being damaged. Extensive repair will be required for the damage. No one was injured. No public property was damaged. It was still drizzling after a heavy downpour and the road was wet and slippery which might have.

Police REPORT G/20200212/7065

Declaration

13/02/2020

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Complete and submit this form to the Authorised Reporting Centre ("ARC") for efiling.
2. Please report **correctly** the details of the accident to speed up the claims process.
3. This Form must be **completed by the Policyholder and/or the Authorised Driver.**
4. 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.**
5. The issuance and acceptance of this Form by insurance companies is not an admission of the policy liability on the part of the insurance companies.
6. **Any false reporting may be referred to the Traffice Police Department for investigation.**

ACCIDENT STATEMENT	
Date and Time of Accident *	Date: 11 Feb 2020 Time: 17:40
Exact Location of Accident *	1 Engku Aman Turn Wisma Geylang Serai
DETAILS OF OWN VEHICLE	
Vehicle Registration Number *	GBH 3119G
INSURED / POLICYHOLDER (OWN VEHICLE)	
Name of Registered Owner (See Insurance Cert.)	
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
- Not Applicable	
VEHICLE PARTICULARS (OWN VEHICLE)	
Vehicle Make / Model	Manufacturer: _____ Model: NV 200
Type of Vehicle	○ Saloon ○ MPV ○ CRV ⊘ Van ○ Lorry ○ Bus ○ M/cycle ○ Others _____
Exact Purpose for which vehicle was being used at time of accident *	For Work Purpose
Are you claiming under own insurance policy for repair to your vehicle?	✓ Yes ○ No (If No, Pls select ○ Third Party ○ Reporting)
INSURANCE COMPANY (OWN VEHICLE)	
Name of Insurance Company	
Type of Policy	○ Comprehensive ○ Third Party ...re & Theft ○ TP Only
Fleet Policy	○ Yes ○ No
Policy Number	
Motor Cl	
DRIVER	○ **Same as Insured above**
Name of Driver *	Abdul Razak Bin Omar
Personal Identification - NRIC (Singaporean/PR) *	S1490871D
- FIN/Passport Number *	
Date of Birth *	02 /dd 09 /mm 1961 /yy
Driving Date Pass *	20 /dd 01 /mm 2005 /yy
Year of Driving Experience *	15 Year(s) Month(s) Month(s)
Occupation *	Pest Control Service Specialist ○ Indoor ⊘ Outdoor
Gender *	⊘ Male ○ Female
Contact Number / Mobile Phone / Fax No. *	9730 2933

Address of Driver	Apt Blk 753 Pasir Ris Street 71. # 04-118 Singapore 510753
Email Address	Abdulrazakbin.Omar@ecolab.com
Was Driver An Employee of the Insured's Company?	○ Yes ○ No
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own	○ Yes ○ No
Vehicel Registration Number of Driver's Own Vehicle (if applicable)	
Insurance Company of Driver's Own Vehicle (if applicable)	

GENERAL INFORMATION OF THE ACCIDENT

Type of Collision (Eg. Chain Collision, Head-On Collision, Side Swipe, Front to Rear)	Hit rear bumper of the car in front
Weather Conditions	○ Clear ⊘ Raining ○ Others _____
Road Surface	○ Dry ⊘ Wet ○ Others _____

OTHER INFORMATION

a. Was anybody injured in the accident?	○ Yes ⊘ No
b. Was any other vehicle or porperty damaged? (Including Witness)	⊘ Yes ○ No

DETAILS OF POLICE ACTION

Was the Accident reported to the Police?	⊘ Yes ○ No (If Yes, please state which Police Station.)
Police Station Name	Police Station of Origin
Police Station Address	Bedok Division HQ, 30 Bedok North Road, Singapore 469676
Police Station Contact	Tel No. 1800-3440000 Fax No.
Was notice of Intended Prosecution given?	○ Yes ○ No (If Yes, against whom?)

DETAILS OF OTHER VEHICLE / PROPERTY 1

Vehicle Registration Number	SMK 7021G
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	Teng Ngai Guan
Personal Identification - NRIC (Singaporean/PR)	S0214521I
- FIN/Passport Number	
Contact Number	
Vehicle Make/ Model/ Colour	
Address of Driver	
Name of Insurance Company	
No. of Passenger (Including Driver)	01

(Note - Please use page 6 if you need to add more vehicles)

SINGAPORE POLICE FORCE

G/20200212/7065

POLICE REPORT (NP299)

Report No. G/20200212/7065

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made	Vide Report No.	Station Diary No.
12/02/2020 21:31		

Name Of Informant ABDUL RAZAK BIN OMAR	Address APT BLK 753 PASIR RIS STREET 71 #04-118 SINGAPORE 510753			
ID Type / ID No. NRIC NO / S1490871D	Contact No. Home/Office: Mobile: 97302933			
Nationality SINGAPORE CITIZEN	Email Address Abdulrazak.omar@ecolab.com			
Occupation Technical/Engineering services manager (eg shipyard manager)	Sex Male	Age 58	Date of Birth 02/09/1961	Race Malay
Institution/School Name	Language English			
Date/Time Of Incident 11/02/2020 18:40 - 11/02/2020 19:00	Location Of Incident 1 ENGKU AMAN TURN WISMA GEYLANG SERAI SINGAPORE 408528			

Brief details.

I was driving my company van (local vehicle) GBH3119G along Changi Road/ Geylang Road bear Wisma Geylang at about 6.40pm when I accidentally hit another local car in front SMK7021G. I hit the rear bumper of the car in front, which resulted in the front bumper of my company vehicle being damaged. Extensive repair will be required for the damage. No one was injured. No public property was damaged. It was still drizzling after a heavy downpour and the road was wet and slippery which might have

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/02/2020 21:31
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

POLICE REPORT (NP299) **CONTINUATION OF REPORT**

Report No. G/20200212/7065

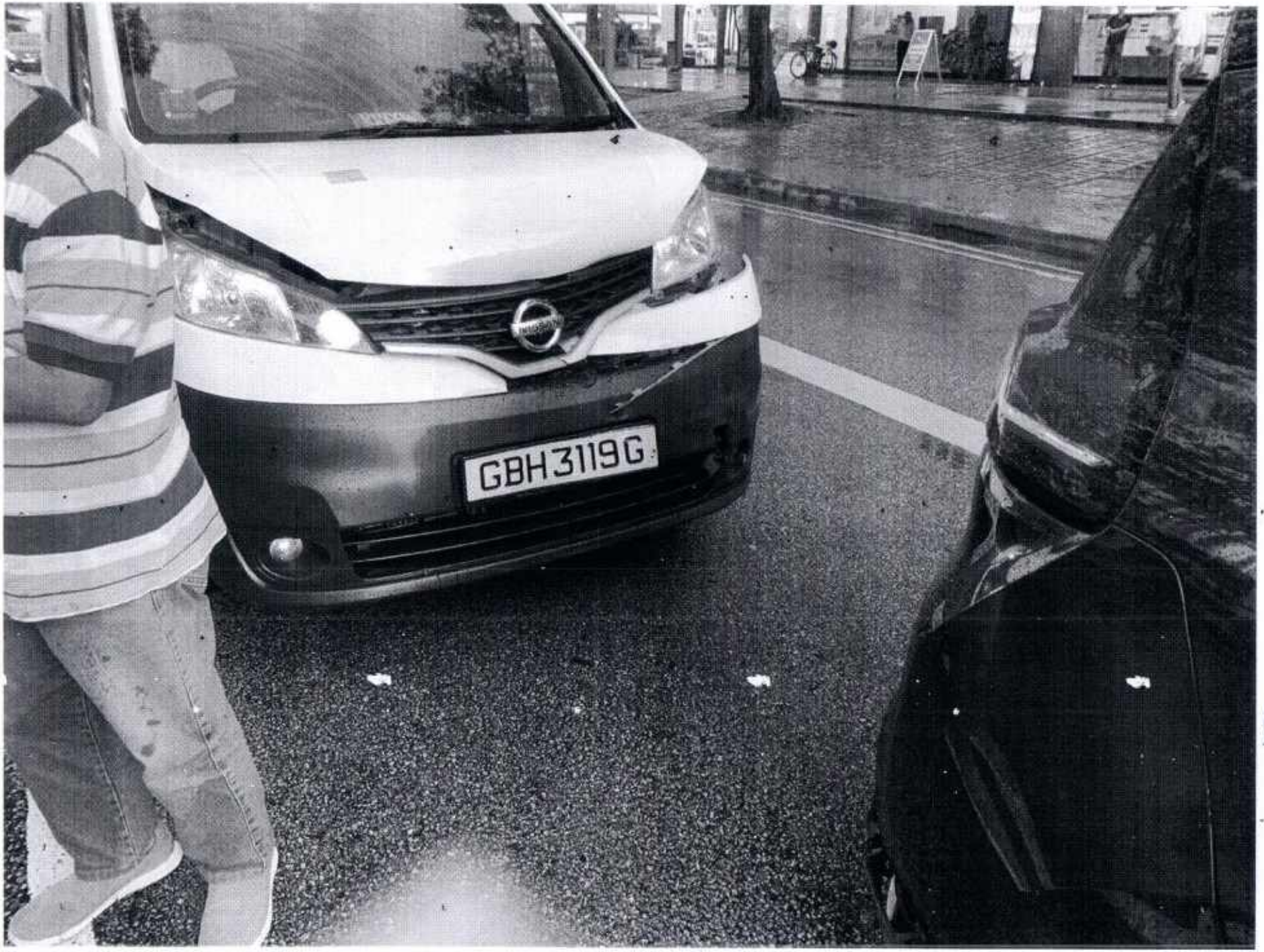
contributed to the cause of the accident.

A report is required by the insurance company to cover the cost of the damage of the company van.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/02/2020 21:31
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

13/07/2020



13/02/2020

AIG

HOTLINE TEL: (65) 6419-3000

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)

M.Z 400

(The below excess is subject to GST)

Comprehensive Commercial Auto Plus
CERTIFICATE NO. 999994313

POLICY EXCESS S$1,000.00 (I)
WINDSCREEN EXCESS S$100.00

SUM INSURED Market Value
INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO. GBH3119G

2) NAME OF POLICYHOLDER Goldbell Car Rental Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 01 January 2019

4) DATE OF EXPIRY OF INSURANCE 31 March 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.
Additional Excess of $3,000 applies to drivers between below 23 years of age and/or with driving experience f less than 12 months.
Additional excess of $500 applies to all claims for accident outside Singapore.

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) LIMITATION AS TO USE*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.

The Policy does not cover
1) Use for driving tuition, driving test, racing, pace-making, reliability trial or speed-testing;
2)) use whilst drawing a trailer except the towing (other than for reward) of anyone disabled using a mechanically propelled vehicle;
3) use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired; and
4) Use for any purpose in connection with Motor Trade.

LOSS OF USE Not Included

HIRE PURCHASE COMPANY DBS Bank Ltd

*Limitations rendered inoperative by Section 6 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).

Issued in Singapore 16 Jan 2019

030123-000
Acorn International Network Pte Ltd
48 Changi South St 1 Level 3
SINGAPORE 486130

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPTKY