NATIONAL Assessment Centre Services. [wef 1 Jan'06] . MALA4200725800

	Job description	Date & Time Completed	Done by
Date In: 26/02/2020 12:53	Job description	Date & Time Completed	Done by
Ref No: NBA/INC20003214/Y	SAS e-filing		
Veh No: SBD 1688P	E-mail (Within 4hrs, AIC 2hrs)		
D.O.A: 25/02/2020 18:30	I-Motor Claim Form	MT1085880-001	26/02/2020 14:35
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 / GW: (Tel: Fax:)

TP Particulars: Veh No: FBH 7049Z 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 ( )

[illegible]

( ) 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: ( )

[illegible] Done by

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

2) QC Check / Post Repair Inspection ( )

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

Injury :

[illegible]

XIA20016599

[illegible]			
1) AR : Accident Reporting ($30)			
2) DA : Damage Assessment ($100) INC ($40)			
3) TF : Towing Fee	$40/$45		
4) FT : Follow-Through Survey	$120		
5) FT : Follow-Through Survey (Resurvey)	$30		
For claiming against INC Only (wef 10 Jan 2000)			
6) TR : Re-Inspection	$70		
7) NI : Idea DA + SMRT Survey	$160		
8) NTUC Additional Services:			
OD:			
*NS: Courtesy Car / Tpt Allowance	$5		
*N6: Repair Co-ordination	$10		
*N7: Post Repair Inspection	$20		
*N8: DV / Collect Excess Coordination	$5		
TP (N11) : TP (Non INC) against INC	$20		
9) N12: Idea Mobile	$0		
Invoice dated	Fee Charged		
Invoice dated	Fee Charged		

[illegible]

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

[illegible]

Cat. 1:

1/2/3

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	26/02/2020 12:53
Date Of Accident	25/02/2020 18:30
Exact Location Of Accident	JUNCTION OF BT BATOK ST 22 / BT BATOK EAST AVE 6
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBD1688P

Insured/Policyholder

Name Of Registered Owner	CHAN JIT HWANG JASON
NRIC No	SXXXX253J
Email Address	JOHNSON8875@YAHOO.COM
Mobile Phone No	(LOCAL) +65-98311711
Alternative Phone No	OTHERS-97922348

Vehicle Particulars

Manufacturer	TOYOTA
Model	CORONA
Exact Purpose for which vehicle was being used at time of accident	DRIVING HOME
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5108891573
Cover Note Number	

Driver

Name of Driver	CHAN JIT WAI JOHNSON
NRIC No	SXXXX197F
Date Of Birth	08/08/1975
Occupation	OUTDOOR
Date Of Driving Pass	04/02/1994
Driving Experience	26 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98311711
Fax Number	
Contact Number	OTHERS-97922348
EMail Address	JOHNSON8875@YAHOO.COM

Address	BLK 176 LOMPANG ROAD #20-41
Postcode	670176
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	SIDE SWIPE
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	FBH7049Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.

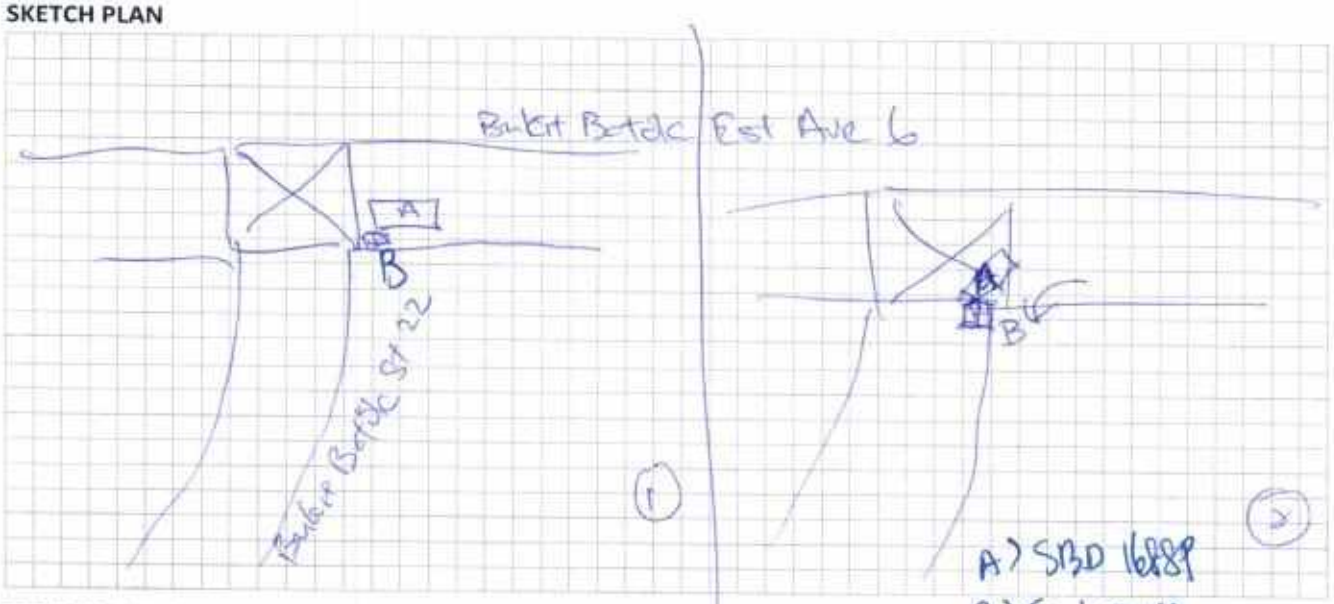
   (e) the information so collected under (d) above may be shared / disclosed:

   (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: 12.55 pm 26/2/2020	Reporting Centre Personnel's Signature 26/02/2020 Name: NRIC/FIN No.:

SKETCH PLAN



A) SBD 1688P
B) FBH 7049Z

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At approx. 18.30 hrs, 25/2/2020, vehicle A SBD 1688P stop behind stopline of traffic junction of Bukit Batok East Ave 6 and Bukit Batok st 22. Vehicle B FBH 7049Z is a motorcycle, to stop next to the vehicle.
After traffic turn green in favor both vehicle proceed to turn, vehicle B infront first. Vehicle B saw the traffic was clear and vehicle A started pedestrians to move off and turn towards Bukit Batok st 22. Suddenly, vehicle B stop abruptly and vehicle A braked to avoid vehicle B. There is slight contact and vehicle B lose control and fell to its right side.

Photos of vehicle A & B contact point as attached.

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: 26/2/2020 12.55pm

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

26/02/2020

GIARMC SketchPlanForm_V3

ACCIDENT STATEMENT

ACCIDENT DATE: (25 / 2 / 2022) (DD/MM/YYYY), TIME: (18 : 30) (HH:MM)

LOCATION: Junction of Bukit Batok St 22 ~~BBT~~ S(659551) / Bukit Batok East Ave 6

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: SBD 1688P
   b) INSURANCE COMPANY: NTUC Income
   c) POLICY NUMBER: S 1058 91573
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
   e) MAKE & MODEL: TOYOTA AT 1998 3T228 (CORONA)
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: * Driving home
   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: Chan Sit Hwang Jason (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: CONTACT: 98311711
   c) ADDRESS: BLK 402 Fajar Rd #04-221 670402

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

* No of passenger (including driver) (__)

DRIVER
   d) NAME: Chan Sit Wai Johnson (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S7624197F CONTACT: 97922347
   c) ADDRESS: BLK 176 Lompang Rd #20-41 S670176
   *d) DATE OF BIRTH: (08 / 08 / 1973) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS 4/2/1994
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Brother
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

* No of passenger (including driver) (__)

   a) VEHICLE NUMBER: FBH 7049 Z MODEL:
   b) DRIVER'S NAME:
   c) NRIC/FIN/PASSPORT: CONTACT:
9. THIRD PARTY VEHICLE

* No of passenger (including driver) (__)

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

Email : johnson8875@yahoo.com

VIDEO

Claim Handling

Exit

The premium on this policy has not been collected

Accident Ref/1000880

Policy No.	5108991571	Vehicle No.	SBD1688P	GST Registration No.	
Certificate No.					
Policyholder Name	CHAN JIT HWANG JASON			Policyholder NRIC	S8035353J
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No.(Mobile)	96311711	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
ATK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	26/02/2020 13:03	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	25/02/2020	Time of Accident hh:mm	18:30	Country of Accident	Singapore
Reporting Centre		Orange Form		JCM No.	
Accident Location	JUNCTION OF BT BATOK ST 22 / BT BATOK EAST AVE 3				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	0.00		
OD Standard Excess	0.00	TP Standard Excess	0.00		
YDED OD Excess	500.00	YDED TP Excess	0.00	Driver is Covered?	Covered
Additional Excess					
Total OD Excess Applicable	500.00	Total TP Excess Applicable	0.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 402 #04-221	Address 2	FAJAR ROAD	Address 3	SINGAPORE 670402
Address 4		Address Type	Singapore address	Post Code	670402
Unit No.		Related Policy Number	5108991571		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	CHAN JIT WAI JOHNSON	Driver NRIC	S6XXX15F	Driver DOB	08/08/1976
Register Date of Driver License	04/02/1994	Driver Age	44	Driving Experience	26
Contact No.(Mobile)	97822548	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 176 #20-41	Address 2	LOMPANG ROAD	Address 3	SINGAPORE 670176
Address 4		Address Type	Foreign address	Post Code	670176
Unit No.	20-41				
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SBD1688P	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No

Modification History

Claim 001 OD-MX New

Claim Type *	OD-MX	Insured Name	CHAN JIT HWANG JASON	Insured NRIC	S8035353J
Contact No.(Mobile)	96311711	Contact No. (Home)	67698675	Contact No. (Office)	
Email Address	xhuza@singnet.com.sg	OI Vehicle Number	SBD1688P	TP Vehicle Number	FBH7049Z
Claim Description	SBD1688P / FBH7049Z ON 25 Feb 2020			Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Not at Fault		
Payout to Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered		26/02/2020 13:04	Claim Close Date		Date Received 26/02/2020 00:00
Report Taken By		ROSLI WAHAB	Workshop Repairer		Total Loss but repairable

Print All Slips

Save Submit

Attachment

Accident No.	H1/1000880	Claim No	001
Last Doc Received	* Yes No	Upload Date	26/02/2020 14:39

Path *		Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Read Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CSI)	Action
	NAC_BUKIT_MERAH_BG0476(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Feb 2020 14:39	Photos	Normal	Photos 2020-2-26		Edit
	NAC_BUKIT_MERAH_BG0476(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Feb 2020 14:39	Photos	Normal	Photos 2020-2-26		Edit
	NAC_BUKIT_MERAH_BG0476(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Feb 2020 14:39	Photos	Normal	Photos 2020-2-26		Edit

						
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:39	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:39	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:39	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:39	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	Photos		Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	NRIC/ Driving License	1	Normal	NRIC/ Driving License 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 26 Feb 2020 14:38	SAB		Normal	SAB 2020-2-26	Edit

Video List

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

eBaoTech

GeneralClaim

Hello, NAC_BUKIT_MERAH_800676

Change Language | Change Password | Log Out

My Desktop

Notice of Loss

Policy Query

Policy No.

Vehicle No.(For Motor) SBD1688P

Date of Accident 25/02/2020 12:48

Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5108891573		CHAN JIT HWANG JASON	S8035253J	GPC	Third Party, Fire & Theft	SBD1688P	SBD1688P	17/04/2019	30/04/2020

Continue