

NATIONAL Assessment Centre Services. [ver 1 Jan 2005] **MNA100076696**

Date In: 29/02/2020 14:38	Job description	Date & Time Completed	Done by
Ref No: NA/MC0003372/Y	SAS e-filing		
Veh No: 8MM 1871Z	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 29/02/2020 10:30	I-Motor Claim Form	m11086344-001	29/02/2020 14:58
OID TP Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/VH32		

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

TP Particulars: Vch No: **8MK 9852A** 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 repaler.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Repair: **24861001-67880010** Completed by: ()

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

2) QC Check / Post Repair Inspection ()

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

Injury: ()

Date/Time	Action

Driver/Owner:	1) AR: Accident Reporting (\$30)	INC (\$10)
Contact No:	2) DA: Damage Assessment (\$100)	\$40/\$45
Damaged Portion:	3) TF: Towing Fee	\$120
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey	\$30
Auditor's Comments:	5) PF: Follow-Through Survey (Resurvey)	\$75
Ref 1:	For claiming against INC Only (ver 10 Jan 2005)	\$160
Ref 2:	6) TR: Re-inspection	\$30
	7) NI: Idea DA + EMRT Survey	\$160
	8) NTUC Additional Services:	
	ON:	
	*NS: Courtesy Car / Tpl Allowance	\$5
	*NR: Repair Coordination	\$25
	*NT: Post Repair Inspection	\$3
	*ND: DV / Collect Excess Coordination	\$20
	TE (NI): TP (Non INC) against INC	\$0
	9) NI2: Idea Mobile	
	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	29/02/2020 14:38
Date Of Accident	29/02/2020 10:30
Exact Location Of Accident	SINGAPORE ZOO OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMM1871Z
Insured/Policyholder	
Name Of Registered Owner	TWINCAR RENTAL
Co Reg No	5XXX815M
Email Address	SAMKTS6568@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83802233
Alternative Phone No	OFFICE-98837712
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5088158995-03
Cover Note Number	
Driver	
Name of Driver	KUI THIAM SONG
NRIC No	SXXXX366A
Date Of Birth	29/06/1968
Occupation	OUTDOOR
Date Of Driving Pass	11/07/1994
Driving Experience	25 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83802233
Fax Number	
Contact Number	OTHERS-98837712
EMail Address	SAMKTS6568@GMAIL.COM

Address	BLK 113 CLEMENTI STREET 13 #07-31
Postcode	120113
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMR9852A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MA CHAO
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.

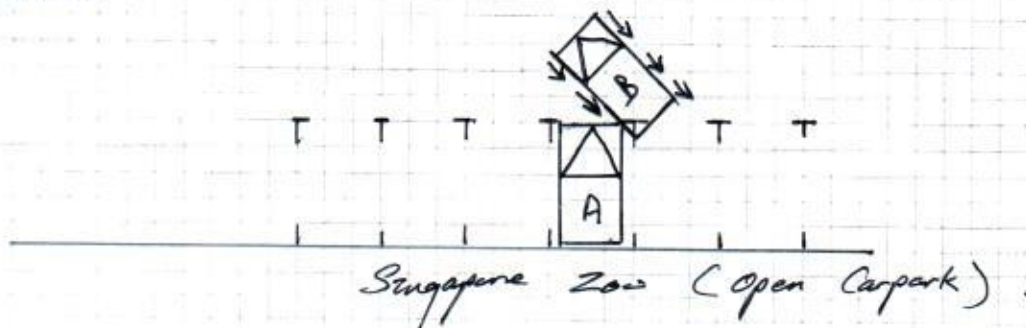
Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

(A) SMM 1871Z
(B) SMR 9852A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 29/02/2020 at @ 1030 hrs, I parked my vehicle (SMM1871Z) at the Singapore Zoo (open carpark) after alighting my passenger and went to the toilet. When I came back from the toilet, while I was walking towards my car. I saw a car (SMR 9852A) reversed into the parking lot beside my car and collided onto the front right portion of my vehicle.

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.	Smm 18712 Model / Make Honda Vezel.	
Date of Accident	29/02/2020.	
Time of Accident	1030 HRS	
Location of Accident	Singapore Zoo (Open Carpark).	
Exact purpose use during accident	Chauffeur.	
Name of Owner	Twincar Rental.	
Telephone No.	H/P: 8380 2233 . Home :	Office :
NRIC	S3092815 M .	
Address	52, Jalan Senang (8) 418343 .	
Claim type	OD <u>THIRD PARTY</u> REPORTING ONLY	
Insurance Company	NTUC .	
Type of Coverage	<u>Comprehensive</u> Third Party Third Party / Fire / Theft	
Policy No.	5088158995-03	
Name of Driver	As Above If No, KUN THIAM SONG .	
NRIC	S 6824366A .	Any Passengers : N.A.
Date of birth	29/06/1968.	
Occupation	<u>Outdoor</u> / Indoor	
Driving License Pass Date	11/07/1994.	
Gender	<u>Male</u> / Female	
Contact No.	H/P: 9383 7712 . Home :	Office :
Address	8LK 113 Clementi Rd # 07-31 (2) 120113.	
Driver have any own vehicle	<u>No</u> , If yes, Reg No.	
Relationship	Employee, If no, state <u>hus</u>	
Weather condition	<u>Clear</u> Raining Other	
Road Surface	<u>Dry</u> Wet Other	
Any Injuries	<u>No</u> , If Yes, Who?	
Name And Contact No.		
Name And Contact No.		
Police Report	<u>No</u> , If Yes, Where?	
Vehicle B No.	SMM 9852A .	Any Passengers : <u>Not sure</u>
Name of Driver	MA CHAD .	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	N.A	Witness Contact : N.A .
Accident Portion	Front Right Portion .	
Camera Recorder	<u>Yes</u> / No	
Email Address	samkts6568@gmail.com	
PARTICULAR WORKSHOP	N-51	
CONTACT NO.	6842 0051 / 6744 0510	
CONTACT PERSON	Zi Ting .	
FAX NO	6741 0510	
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg	

Claim Handling

Accident MT/1086344

Policy No.	5088158995-03	Vehicle No.	SMM1871Z	GST Registration No.	
Certificate No.					
Policyholder Name	TWINCAR RENTAL			Policyholder NRIC	53092815M
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	83802233	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<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(%)	30	Private Hire	Yes

Accident Details

Report Date	29/02/2020 14:47	Accident Report Within 24 hrs	Yes	Accident Type	Damaged wh
Date of Accident	29/02/2020	Time of Accident hh:mm	10:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	SINGAPORE ZOO OPEN SPACE CARPARK				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver Is Covered?	Covered
Additional Excess	0				
Total OD Excess Applicable	2000.00	Total TP Excess Applicable	1,500.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	29/02/2020 14:50:10 System changed GST Status Verified from No to Yes		

Policyholder Mailing Address

Address 1	52 JALAN SENANG	Address 2	SINGAPORE 418343	Address 3	
Address 4		Address Type	Singapore address	Post Code	418343
Unit No.		Related Policy Number	5088158995-03		

Q1 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	KUI THIAM SONG	Driver NRIC	SXXXX366A	Driver DOB	29/06/1988
Register Date of Driver License	11/07/1994	Driver Age	51	Driving Experience	25
Contact No.(Mobile)	93837712	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 113 #07-31	Address 2	CLEMENTI STREET 13	Address 3	SUNSET WAY
Address 4	SINGAPORE 120113	Address Type	Foreign address	Post Code	120113
Unit No.	07-31				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.	SMM1871Z	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001 New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop

Insured Liability

Not at Fault

Preferred Repair Option

Preferred Workshop, Name unknown

GIA report

Received

Date Registered

Report Taken By

Print AK letter

Save Submit

Attachment

Accident No.

MT/1086344

Claim No.

001

Last Doc. Received

Yes No

Upload Date

29/02/2020 14:58

Path *

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Category *

Confidential

Urgency *

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	Photos		Normal	Photos 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2020-2-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Feb 2020 14:58	SAS		Normal	SAS 2020-2-29

Video List

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

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)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5088158995-03

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SMM1871Z**
Chassis Number : RU31235813
2. Name of Policyholder : TWINCAR RENTAL
3. Effective Date of Insurance : 22 Feb 2020
4. Expiry Date of Insurance : 21 Feb 2021
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 or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

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)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: MAYBANK SINGAPORE LIMITED
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 : LOMEN INSURANCE AGENCY (00000591412)
Date of Issue : 14 Feb 2020 09:51 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport
/Company Cert
No.: 53092815M

Owner ID Type: Business

Owner Name: TWINCAR RENTAL

Registered
Address: 52 JALAN SENANG SINGAPORE 418343

Mailing Address: -

Birth Date: -

Vehicle Particulars

Vehicle No.: SMM1871Z

Previous Vehicle
No.: SLN51L

Effective Date of
Ownership: 22 Feb 2017

Original Regn Date: 22 Feb 2017

Registration Date: 22 Feb 2017

Year of
Manufacture: 2016

Vehicle Type: Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover

Vehicle Scheme: -

Vehicle
Attachment 1: No Attachment

Vehicle
Attachment 2: -

Vehicle
Attachment 3: -

Vehicle Make: HONDA

Vehicle Model: VEZEL HYBRID 1.5X AUTO

Primary Colour: Blue

Secondary Colour: -

Passenger
Capacity: 4

Chassis No.: RU31235813

Engine No.: LEB5935830

Motor No.: H12343270

Engine Capacity
/Power Rating: 1496 cc / 22.0 kW

Maximum Power
Output: 112.0 kW (150 bhp)

Propellant:	Petrol-Electric
Max Unladen Weight:	1280 kg
Maximum Laden Weight:	1555 kg
Open Market Value:	\$25,010.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	21 Feb 2027
Minimum PARF Benefit:	\$2,500.00
No. of Transfers:	0
IU Label No.:	1127264602
COE No.:	2017030107000488Z
COE Expiry Date:	21 Feb 2027
COE Category:	E - Open Category
COE Registration Category:	B - Car above 1600cc or 97kW (130bhp)
Quota Premium (QP) / Prevailing Quota Premium:	\$48,556.00 / -
Actual QP Paid:	\$48,556.00
QP (Regn Cat):	\$48,209.00
OPC Cash Rebate Eligibility:	No
QP during COE Bidding Exercise:	\$48,556.00
Additional Registration Fee Rate:	First \$20,000.00 (100%), next \$5,010.00 (140%)
Actual ARF Paid:	\$5,000.00
Vehicle Lifespan Expiry Date:	No Lifespan
CO2 Emission:	94.00 (g/km)
CEV/VES Rebate Utilised Amount:	\$22,014.00
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-
Message:	COE rebate, if applicable, will be based on the QP of \$48,209.00. This is the lower of QP from Category E and the corresponding Category B in the same tender exercise. To renew the COE, the Prevailing Quota Premium payable is that of Category B. This is a public service vehicle.