

Date In: 06/03/2020 16:11	Job description	Date & Time Completed	Done by
Ref No: NBA/PWD20003717/Y	SAS e-illing		
Veh No: SJS 3475Y	E-mail (by John Sims, AIC 2hrs)		
D.O.A: 05/03/2020 17:30	I-Motor Claim Form		
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/Victim		

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

TP Particulars: Vch No: **SJM 2254X** 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 > \$9000] ()

Injury: _____

NA2001920	1) AIC: Accidental Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$10)	
Contact No:	3) TP: Towing Fee \$40/\$45	
Damaged Portion:	4) PF: Follow-Through Survey \$120	
QC Checked by (Engr-In-Charge):	5) PF: Follow-Through Survey (Resurvey) \$30	
Additional Comments:	For claim against INC Only (over 10 Jan 2020)	
Ref: 1:	6) TR: Re-inspection \$75	
2/2	7) NI: Idas DA + SMRI Survey \$160	
	8) NTUC Additional Services	
	OD:	
	*N5: Courtesy Car / Tpl Allowance \$3	
	*N6: Repair Coordination \$10	
	*N7: Post Repair Inspection \$25	
	*N8: DV / Collat Excess Coordination \$3	
	TP (N11) / TP (N12) INC against INC \$20	
	9) N12: Idas Mobile \$30	
	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	06/03/2020 16:11
Date Of Accident	05/03/2020 17:30
Exact Location Of Accident	ALONG JALAN BERSEH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ3475Y
Insured/Policyholder	
Name Of Registered Owner	CECILIA WONG WANG NGOR
NRIC No	SXXXX769A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98223436
Alternative Phone No	OTHERS-98223436
Vehicle Particulars	
Manufacturer	SUZUKI
Model	SWIFT-1.5 AT ABS AIRBAG 2WD (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 CAR
Insurance Company	
Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00014105
Cover Note Number	
Driver	
Name of Driver	CECILIA WONG WANG NGOR
NRIC No	SXXXX769A
Date Of Birth	23/08/1958
Occupation	INDOOR
Date Of Driving Pass	14/08/1987
Driving Experience	32 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98223436
Fax Number	
Contact Number	OTHERS-98223436
Email Address	NOEMAIL

Address	BLK 5000A MARINE PARADE ROAD #07-03
Postcode	449284
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	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	SLM2254K
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)	

SKETCH PLAN

IMPORTANT NOTICE

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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:

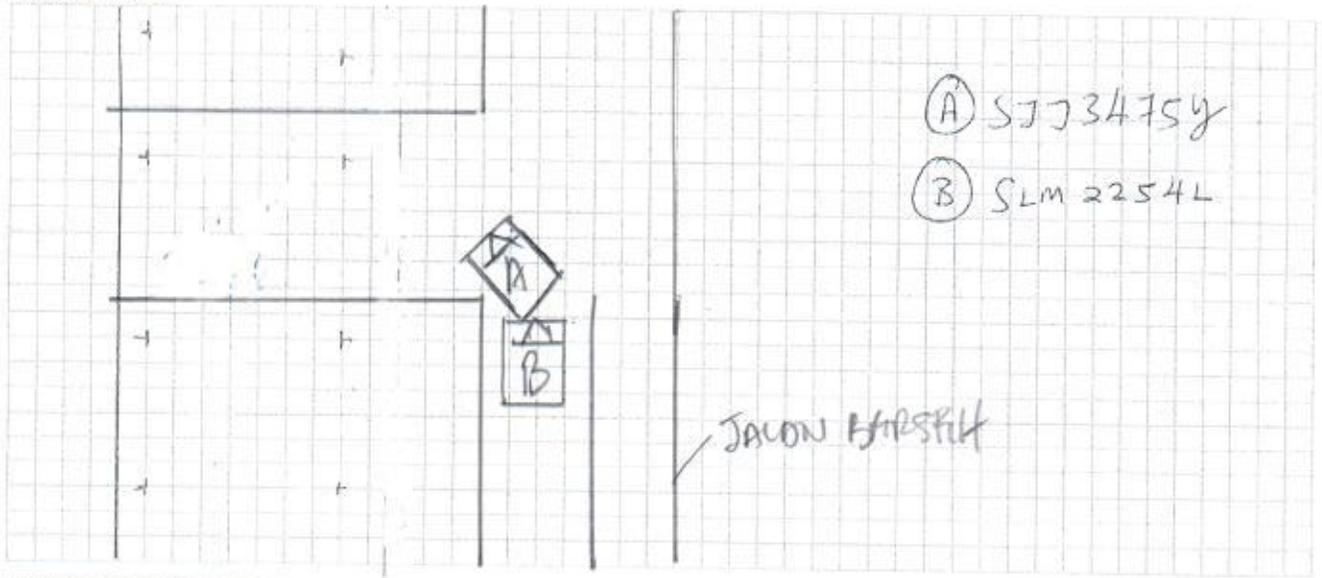


Driver's Signature
(If driver is not the policyholder)
Date & Time:



06/03/2020
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 05 MAR 2020 @ 1730HRS, I WAS DRIVING ALONG JALAN BESEH. AS I WAS TURNING I HEARD A LOUD BANG AT THE BACK OF MY VEHICLE. I DID NOT WANT TO OBSTRUCT TRAFFIC, I PARKED MY VEHICLE AND ALIGHTED. DRIVER OF SLM 2254L THEN CAME UP TO APOLOGISE FOR COLLIDING INTO MY VEHICLE.

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time:

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

[Signature] 06/03/2020
 Reporting Centre Personnel's Signature
 Name:
 MRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 05-Mar-2020

ACCIDENT TIME: 1730

LOCATION: JALAN BERSEH

VEHICLE NUMBER: SJJ3475Y

INSURED NAME: CECILIA WONG WANG NGOR

NRIC / FIN: S1311769A

CONTACT: 98223436

MAKE: SUZUKI

MODEL: SWIFT 1.5

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

() Yes, If No, Pls Select: () Third Party () Reporting Only

INSURANCE COMPANY: FWD

TYPE OF POLICY: Comprehensive

POLICY NUMBER: PNPV2019-00014105

EXPIRY DATE: 09-Sep-2020

NAME DRIVER: CECILIA WONG WANG NGOR

NRIC / FIN: S1311769A

CONTACT: 98223436

DATE OF BIRTH: 23-Aug-1958

DRIVING PASS DATE: 14-Aug-1987

OCCUPATION: Indoor

GENDER: Female

EMAIL ADDRESS:

ADDRESS OF DRIVER: 5000A MARINE PARADE ROAD #07-03 LAGUNA PARK SINGAPORE 449284

Relationship Of The Driver With The Insured: Owner

Number Of Passenger Include Driver: 1 Driver

NAME	NRIC/FIN/BC	GENDER	INJURED
CECILIA WONG WANG NGOR	S1311769A	Female	

INJURY DETAILS: 0 Passenger(s)

Insurance Company Of Driver's Own Vehicle:

Weather Conditions: Clear

Road Surface: Dry

Was Any Foreign Vehicle Involved In This Accident? No

Convey By Ambulance: No

Was There Any Video Capture By Car Camera? No

Was There Accident Reported To The Police? No Police Report Number: NIL

Details Of 3rd Party	Name	NRIC	Contact	No.of Paxs(incl' driver)
Veh B SLM2254K				Not Sure



CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNPV2019-00014105 (Comprehensive - Classic Plan)

Car plate number: SJJ3475Y

Your name (As the policyholder): Cecilia Wong Wang Ngor

Coverage start date: 10/09/2019

Coverage end date: 09/09/2020

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to drive:

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

Finance company:

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 26/08/2019

Abhishek Bhatia
Chief Executive Officer
FWD Singapore Pte Ltd

Please immediately inform us at +65-6820-8888
or email us at contact.sg@fwd.com if any details
in this Certificate of Insurance need to be changed.

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	769A
Vehicle Details	
Vehicle No.:	SJJ3475Y
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Mar 2020
Vehicle Make:	SUZUKI
Vehicle Model:	SWIFT 1.5 AT ABS AIRBAG 2WD
Primary Colour:	Grey
Manufacturing Year:	2008
Engine No.:	M15A1329160
Chassis No.:	JSAEZC21S00420188
Maximum Power Output:	74.0 kW (99 bhp)
Open Market Value:	\$11,454.00
Original Registration Date:	10 Sep 2008
First Registration Date:	10 Sep 2008
Transfer Count:	1
Actual ARF Paid:	\$11,454.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Aug 2023
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$17,099.00
COE Rebate Amount:	\$11,684.00
Total Rebate Amount:	\$11,684.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 06 Mar 2020

https://vrl.lta.gov.sg/lta/vrl/action/enquireRebateByPublicBeforeDeregInput?FUNCTION_ID=F030400... 06-Mar-20