

NATIONAL Assessment Centre Services.

[ver 1 Jan 2005]

MAA/2003552

Date In: 14/03/2020 17:34	Job description	Date & Time Completed	Done by
Ref No: NA/CR20004017/4	SAS e-filing		
Veh No: YN 8232H	E-mail (4 jobs 2hrs, AIC 2hrs)		
DOA: 13/03/2020 17:30	I-Motor Claim Form		
OD: (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/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: GRH 5527Z	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: ()

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

Injury: _____

Date/Time:	Location:

NA200/987	INVOICE	MAA/2003552
Client/Particulars:	1) AR: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100)	INC (\$10)
Contact No:	3) TP: Towing Fee	\$40/\$45
Damaged Portion:	4) PT: Follow-Through Survey	\$120
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey)	\$30
Auditor's Comments:	For claiming against INC Only (ver 10 Jan 2005)	
Date:	6) TR: Re-inspection	\$75
	7) NI: Idas DA + SMRT Survey	\$160
	8) NTUC Additional Services:	
	ON:	
	*NS: Courtesy Car / Tpl Allowance	\$3
	*NG: Repair Coordination	\$10
	*NT: Post Repair Inspection	\$25
	*ND: DV / Collect Excess Coordination	\$3
	TP (NI) / TP (Non INC) against INC	\$20
	*NI2: Idas Mobile	\$0
	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	14/03/2020 17:34
Date Of Accident	13/03/2020 17:30
Exact Location Of Accident	SLE HIGHWAY LENTOR AVENUE EXIT 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN3232H
-----------------------------	---------

Insured/Policyholder

Name Of Registered Owner	TY KWNAG HONG (ZHENG GUANGHONG)
NRIC No	SXXXX646F
Email Address	TAYKWANGHONG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97394881
Alternative Phone No	OTHERS-86191358

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FK61FMJ1RDEA-7.5 D (M)
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN1820000901
Cover Note Number	

Driver

Name of Driver	RAMASWAMYSHANMUGANATHANEMANATHAN GIREESAN
Passport No/FIN	GXXXX976K
Date Of Birth	18/10/1981
Occupation	OUTDOOR
Date Of Driving Pass	18/09/2019
Driving Experience	0 YEAR AND 5 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97394881
Fax Number	
Contact Number	OTHERS-86191358
EMail Address	TAYKWANGHONG@GMAIL.COM

Address -
 Postcode
 Was driver an employee of the Insured's Company YES
 If No, Relationship of the Driver with the Insured
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident CHAIN COLLISION
 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 3
 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

WHEN I WAS SLOWING DOWN WITH A HAZARD LIGHT ON IN THE SLE EXIT TO LANE TO CHECK ON MY LOAD HAVING PROBLEM (LOOSEN) ON THAT TIME EXACT PLACE IS NEAR BY LENTOR AVENUE EXIT 3 TOWARDS BKE. SUDDENLY THE LORRY GBH5527Z HIT AND MAKE AN IMPACT WITH MY LORRY YN3232H BEHIND AND DAMAGED MY BEHIND RIGHT LIGHT AND THAT LORRY WAS HIT BY ANOTHER CAR SJN5644S SO TOTAL OF 3 VEHICLE CHAIN COLLISION THAT ALL.

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 GBH5527Z
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver DHARMARAJ MANOKARAN
 NRIC/Passport Number GXXXX172N
 Contact Number 90569576
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJN5644S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHAN CHEE SHING
NRIC/Passport Number	SXXXX157J
Contact Number	90228837
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:

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

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DECLARATION

GIARMC SketchPlanForm V3

ACCIDENT STATEMENT

ACCIDENT DATE: 12 / 03 2020 (DD/MM/YYYY), TIME: 17 : 30 (HH:MM)

LOCATION: SLE HIGHWAY LENTOR AVE EXIT 3

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: YN 3232H
 b) INSURANCE COMPANY: CHINA TAIPING
 c) POLICY NUMBER: DMCVSN182011901
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: MITSUBHI EK 61FM8 IRDEA
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING
 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: TAY KWANG HONG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8718646F CONTACT: 97394881
 c) ADDRESS: 890A TAMPINES AVE 1
03-313 SINGAPORE 521890

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: RAMASWAMY SHANMUGANATHAN NEMANATHAN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S3359976K CONTACT: 86191358
 c) ADDRESS: HJAP HUAT DEMOLITION CONTRACTOR
TAMPINES S732

* d) DATE OF BIRTH: 18 / 10 / 1981 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 18/09/19

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:

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

- a) VEHICLE NUMBER: GRH 5527Z MODEL: GIREESAN
 b) DRIVER'S NAME: DHARMARAJ MANOKARAN
 c) NRIC/FIN/PASSPORT: B7735178N CONTACT: 90569576

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: SJN 5644S MODEL: CHAN CHEE SHING
 e) DRIVER'S NAME: CHAN CHEE SHING
 f) NRIC/FIN/PASSPORT: S7988157J CONTACT: 9022 8857

No of passenger
(including driver)
()

No of passenger
(including driver)
()

No of passenger
(including driver)
()

Email = taykwanghong@gmail.com
 VIDEO

MOTOR COMMERCIAL VEHICLE

CERTIFICATE OF INSURANCEMotor 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)

ORIGINAL

CERTIFICATE No.

DMCVSN1820111901

Engine No :6M60125616

ChaNo:FK61FMB00076

1. Index Mark and Registration
Number of Vehicle

YN3232H

2. Name of Policy Holder

TAY KWANG HONG

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

28 June 2019

4. Date of Expiry of Insurance

27 June 2020

5. Persons or Classes of Persons entitled to drive*

(1) whilst the vehicle is being used in connection with the Policyholder's business

(a) The Policyholder.

(b) Any other person provided he is in the Policyholder's employ and is driving on his order or with his permission.

(2) whilst the vehicle is being used for social, domestic or pleasure purposes

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his 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.*

(1) Use in connection with the Policyholder's business.

(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

(3) Use for social, domestic or pleasure purposes.

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 of any one disabled mechanically propelled vehicle.

(3) Use for the carriage of passengers for hire or reward.

HIRE PURCHASE CO. : CREDIT LINK PTE LTD AS HP OWNER

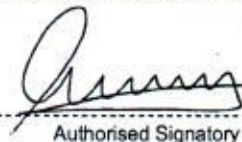
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

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).

Please see reverse

Issued By:META AGENCY PTE LTD.....
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.


Authorised Signatory