

NATIONAL Assessment Centre Services

(wef 1 Jan'05) **MNAIR 0035501**

Date In: 23/3/12 - 12:39	Job description	Date & Time Completed	Done by
Ref No: NAIR 200455624	SAS e-filing		
Veh No: DMK5424	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 21/3/12 - 12:20	i-Motor Claim Form	27/12/11 15:21	23/3/12 13:49
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 / QW: (Tel:	Fax:
TP Particulars:	Veh No: PC4777K	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: ()

Remarks: (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury:

Date/Time	Actions

NAIR 200455624	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30);	1st Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments:-	TP (N11): TP (Non INC) against INC \$20		
Pat. 1:	9) N12: Idac Mobile 30		
Pat. 2 / 3:	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	23/03/2020 12:39
Date Of Accident	21/03/2020 17:20
Exact Location Of Accident	TAMPINES AVE 5 TWDS PIE (TUAS)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK5448Y
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Insured/Policyholder

Name Of Registered Owner	TAN SOO KWEE, ANDY (CHEN SHUGUI)
NRIC No	SXXXX831H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98165448
Alternative Phone No	OFFICE-98165448

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH 1.8 AUTO
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5108596920
Cover Note Number	

Driver

Name of Driver	TAN SOO KWEE, ANDY (CHEN SHUGUI)
NRIC No	SXXXX831H
Date Of Birth	26/11/1981
Occupation	OUTDOOR
Date Of Driving Pass	02/05/2006
Driving Experience	13 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98165448
Fax Number	
Contact Number	OFFICE-98165448
EEmail Address	NOEMAIL

Address	BLK 448 TAMPINES STREET 42 #04-58
Postcode	520448
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	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?	YES
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)	4
Passenger 1	NAME: : ANG AINA GENDER: : FEMALE
Passenger 2	NAME: : - GENDER: : MALE
Passenger 3	NAME: : - GENDER: : MALE

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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG THE STATED VENUE. FRONT VEHICLE BRAKE, I BRAKE MY VEHICLE AS WELL. SUDDENLY I FELT AN IMPACT OF MY VEHICLE AND REALIZED THAT VEHICLE B HIT ONTO MY VEHICLE REAR PORTION.

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	PC4777K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	NAMBU KRISHNAN VENKATESH BABU

NRIC/Passport Number	FXXXX107P
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	4

DETAILS OF INJURED PERSON 1

Name	TAN SOO KWEE, ANDY (CHEN SHUGUI)
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SMK5448Y
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	ANG AINA
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SMK5448Y
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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.



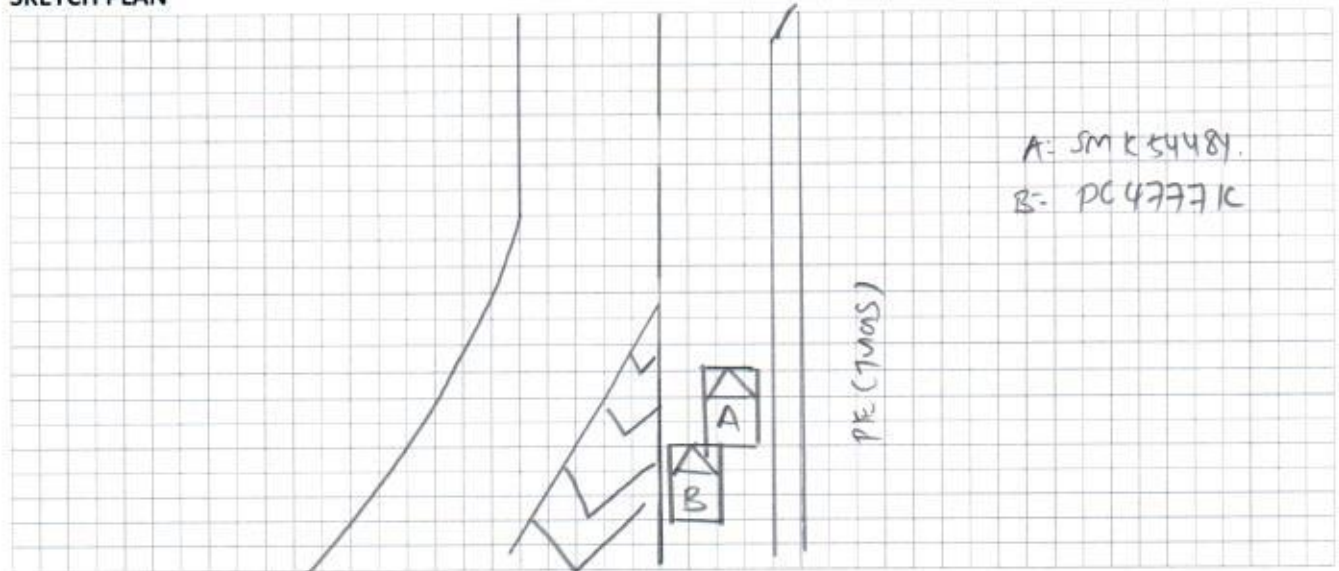
Policyholder's Signature
Date & Time:

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

Refer to statement.

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.:

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident

Vehicle No. (For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5108596920		TAN SOO KWEE, ANDY (CHEN SHUGUI)	S8138831H	GPC	drive CLASSIC	SMK5448Y	SMK5448Y	12/04/2019	11/04/2020

Policy Information

Policy No.	5108596920	Policyholder Name	TAN SOO KWEE, ANDY (CHEN S	Policyholder NRIC	S8138831H
Certificate No.					
Address	BLK 448 #04-58 TAMPINES ST 42 SINGAPORE 520448				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	12/04/2019	Effective Date	12/04/2019 00:00	Expiry Date	11/04/2020 23:59
Excess Type	Per Accident	All Claims Excess			
Third Party Excess	1500	Own damage Excess	2000	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000	Outside Singapore TP Excess	1500		Young/Inexperience Driver Excess
Agent	SPEEDO CAPITAL PTE. LTD.	Agent Tel.	66847757	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	BLK 448 #04-58	Address 2	TAMPINES STREET 42	Address 3	SINGAPORE 520448
Address 4		Address Type	Singapore address	Post Code	520448
Unit No.	04-58	Related Policy Number	5108596920-01		

Insured Object: SMK5448Y

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	12/04/2019 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 12 Apr 2019, the following amendment(s) is/are made to this policy: NAME OF POLICYHOLDER: TAN SOO KWEE, ANDY (CHEN SHUGUI)
2	22/04/2019 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 22 Apr 2019, the following amendment(s) is/are made to this policy: update primary driver name
3	22/04/2019 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 22 Apr 2019, the following policy details are amended as follows: HIRE PURCHASE COMPANY: SPEEDO CAPITAL PTE. LTD. CHASSIS NUMBER: JTDER12W603002630 ENGINE NUMBER: 1ZZ3236433 VEHICLE REGISTRATION NUMBER: SMK5448Y ORIGINAL REGISTRATION DATE: 24 Mar 2009

Continue

Cancel

Claim Handling

Accident MT/1089215

Policy No.	5108596920	Vehicle No.	SMK5448Y	GST Registration No.	
Certificate No.					
Policyholder Name	TAN SOO KWEE, ANDY (CHEN SHUGUI)	Cover Type	drive CLASSIC	Policyholder NRIC	S8138831H
Product Code	PRIVATE CAR INSURANCE	Contact No. (Office)	0	Loading	0
Contact No. (Mobile)	98165448	Special Remark		Contact No. (Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	<input type="text" value="11"/>
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	Yes
Accident Details					
Report Date	23/03/2020 13:48	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	21/03/2020	Time of Accident hh:mm	17:20	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	TAMPINES AVE S TWDS PIE (TUAS)				
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					
Policyholder Mailing Address					
Address 1	BLK 448 #04-58	Address 2	TAMPINES STREET 42	Address 3	SINGAPORE S20448
Address 4		Address Type	Singapore address	Post Code	S20448
Unit No.	04-58	Related Policy Number	5108596920-01		
01 Driver Info					
Driver Name	TAN SOO KWEE, ANDY (CHEN SHUGUI)	Driver Type	Main Driver		
Unnamed Driver Name		Driver NRIC	S8138831H	Driver DOB	26/11/1981
Register Date of Driver License	02/05/2006	Driver Age	38	Driving Experience	13
Contact No. (Mobile)	98165448	Contact No. (Office)	0	Contact No. (Home)	0
Address 1	BLK 448	Address 2	TAMPINES STREET 42	Address 3	SINGAPORE S20448
Address 4		Address Type	Singapore address	Post Code	S20448
Unit No.	04-58				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	TAN SOO KWEE, ANDY (CHEN S	Insured NRIC	S8138831H
Contact No. (Mobile)	98165448	Contact No. (Home)		Contact No. (Office)	
Email Address		01 Vehicle Number	SMK5448Y	TP Vehicle Number	PC4777K
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SMK5448Y / PC4777K ON 21 Mar 2020				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	23/03/2020 13:49	Claim Close Date		Date Received	23/03/2020 00:00
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print AK letter					














Save Submit

Attachment

Accident No.	MT/1089215	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	23/03/2020 13:50
Path *		Category *	Confidential
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO
	Browse... Clear	Please Select	NO

☐ Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:50	NRIC/ Driving License	Y	NRIC/ Driving License 2020-3-23	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:50	SAS	Normal	SAS 2020-3-23	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:50	Photos	Normal	Photos 2020-3-23	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:50	Photos	Normal	Photos 2020-3-23	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:50	Photos	Normal	Photos 2020-3-23	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:50	Photos	Normal	Photos 2020-3-23	
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:49	Photos	Normal	Photos 2020-3-23	
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:49	Photos	Normal	Photos 2020-3-23	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:49	Photos	Normal	Photos 2020-3-23	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:49	Photos	Normal	Photos 2020-3-23	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 23 Mar 2020 13:49	Photos	Normal	Photos 2020-3-23	

Video List

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