

NATIONAL Assessment Centre Services.

1 Jan 2001

X/NA2004/889

Date In: 13/04/2020 17:27	Job description	Date & Time Completed	Done by
Ref No: X/NA/7M20000517814	SAS e-filing		
Veh No: SR 60974	E-mail (Up to 3 emails, AIC 2hrs)		
D.O.A: 12/04/2020 22:10	I-Motor Claim Form		
CID: TP: Reporting Only	I-Motor W/O (With in: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whizz		

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

TP Particulars: Vch No: GBA 2817 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 Refor of raplor.

() 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: _____

X/NA2002631	1) AIC: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100)	INC (\$10)
Contact No:	3) TP: Towing Fee	\$40/\$45
Damaged Partion:	4) PT: Follow-Through Survey	\$150
	5) PT: Follow-Through Survey (Resurvey)	\$30
QC Checked by (Engr-In-Charge):	6) TR: Re-inspection	\$75
	7) NI: Idea DA + SMRT Survey	\$160
Approvers/Comments:	8) NTUC Additional Services:	
	DIY	\$3
Sub: 1:	*NS: Courtesy Car / Tpt Allowance	\$10
	*Not Repair Co-ordination	\$25
2/3	*PT: Post Repair Inspection	\$3
	*W: DV / Collect Excess Coordination	\$20
	TP (NI) / TP (Non-INC) against I-TC	\$0
	9) NI: 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	13/04/2020 17:27
Date Of Accident	12/04/2020 22:10
Exact Location Of Accident	ALONG WOODLANDS AVENUE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR6097U
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	2XXXXX651D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97754974
Alternative Phone No	OFFICE-97754974
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PREVIA
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	20-ML000257-R00
Cover Note Number	
Driver	
Name of Driver	AB GHANI BIN MARSAP
NRIC No	SXXXXX074E
Date Of Birth	12/02/1959
Occupation	OUTDOOR
Date Of Driving Pass	04/08/1997
Driving Experience	22 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97754974
Fax Number	
Contact Number	OTHERS-97754974
Email Address	NOEMAIL

Address	BLK 682D WOODLANDS DRIVE 73 #01-229
Postcode	734682
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)	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	GBA2181T
Vehicle Make/Model/Colour	TOYOTA DYNA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	WONG YUEN FEE
NRIC/Passport Number	SXXXX588C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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7. By the lodging of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of this 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 purposes 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 based 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 (a) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing risks;
 - (ii) regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (iii) 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)

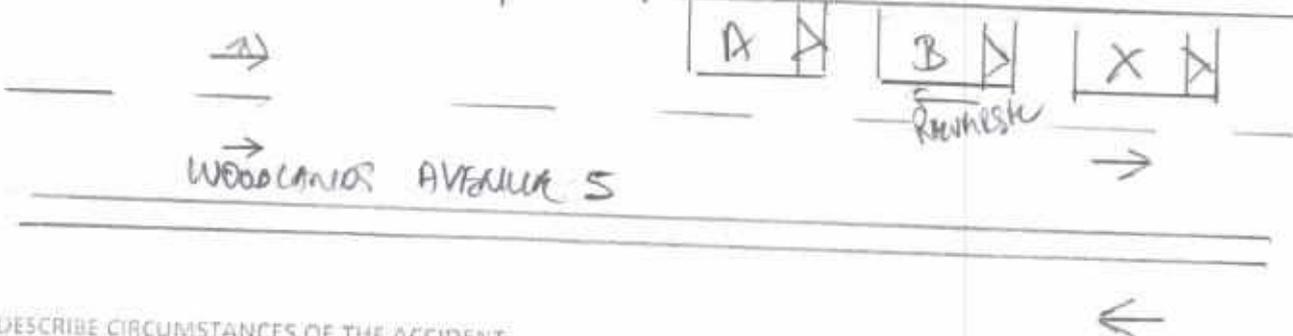
Reporting Centre Personnel's Signature
(Date & Time)
NRK / FTR No.

18/04/2020
Rashid Umar

SKETCH PLAN

- A) SLR 6094
- B) GBA 2181T

MARSHLING WOOD ESTATE ROAD 3



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 12/04/2020 at about 22:10 HRS I WAS AT WOODLANDS AVENUE 5
 I WAS AT MY CAR SLR 6094 WAITING FOR MY FOOD TO BE READY
 WITH HAZARD LIGHT ON SUDDENLY A LORRY GBA 2181T WHICH WAS
 PARKED IN FRONT OF ME REVERSE & HIT THE FRONT PART OF MY
 CAR WE CALLE DOWN & TOOK SOME PICTURE & THE LORRY DRIVER
 ADMIT HIS FAULT AND HE TOLD ME THAT HE DID NOT KNOW
 THAT MY CAR WAS PARKED BEHIND HIS LORRY.

DECLARATION

I hereby declare that the above information is true and correct to the best of my knowledge.



[Signature]
 Driver's Signature
 of vehicle (not the policyholder)
 Date & Time

[Signature]
 13/04/2020

Receiver's Signature
 Date
 Time

13/04/2020

[Signature]

ACCIDENT STATEMENT

ACCIDENT DATE: (12/4/20) (DD/MM/YYYY), TIME: (22:10) (HH:MM)

LOCATION: Arong Woodiana Ave 5

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKR60974
- b) INSURANCE COMPANY: TOKIO MARINE
- c) POLICY NUMBER: 20-ML000257-000
- d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
- e) MAKE & MODEL: TOYOTA PREVIA
- f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
- g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
- h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
- 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: MR. DITOMI Bin Mawad (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: 12890746 CONTACT: 97754974
- c) ADDRESS: 84C (22) / #01-229 Woodiana BK 72

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: GRADITH CAR RANIM P/L (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
- c) ADDRESS: _____

* d) DATE OF BIRTH: (12/02/1989) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 04/08/1997

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: WIFE

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: GRADITH MODEL: TOYOTA DYNA
- b) DRIVER'S NAME: WONG QUEN FEE
- c) NRIC/FIN/PASSPORT: S1465588C CONTACT: _____

9. THIRD PARTY VEHICLE

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

* No of passenger
(including driver)
(1)

* No of passenger
(including driver)
()

* No of passenger
(including driver)
()

email =
VIDEO



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)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: 20-ML000257-R00 (Private Motor Car)

1. **Index Mark and Registration Number of Vehicle** SLR6097U **Chassis No.:** JTEGD56MX07149643
2. **Name of Policyholder** GOLDBELL CAR RENTAL PTE LTD
3. **Effective date of the Commencement of Insurance for the purposes of the Act** 01/04/2020
4. **Date of Expiry of Insurance** 31/03/2021
5. **Persons or Class of Persons entitled to drive***
 Any person who is driving on the Policyholder's order or with their permission.
 The hirer.
 Any other person who is driving on the hirer's order or with his/ their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. **Limitations as to use***
 Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.
 Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.
 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 (other than for reward) of any one disabled mechanically propelled vehicle.
 3) Use for the carriage of passengers for hire or reward by any person whom the vehicle is hired.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost/destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 3092DDZ

Insurance Plan:	Comprehensive Approved Workshop Plan	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Excess - All Claims	SGD 1,250
	Windscreen Excess	SGD 100

Tokio Marine Insurance Singapore Ltd.

Authorised Signature