

# NATIONAL Assessment Centre Services

[ver 1 Jan 09]

MNA 120051618

Date In: 15/6/20 14:32	Job description	Date & Time Completed	Done by
Ref No: MNA/CTI 20006257164	SAS e-filing		
Veh No: SMH 6592 Y	E-mail (within 2hrs, AIC 2hrs)		
HOA: 14/6/20 13:30	I-Motor Claim Form		
CI: <input checked="" type="radio"/> 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 / GW: ( )	Tel: ( )	Fax: ( )
TP Particulars:	Veh No: SHD 21 65 D	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: ( )

Remarks:	INC ( ) / Non-INC ( )	Date Claim 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

NA 2003263	Invoice Preparation Checklist	Amount (\$)	Added (\$)
Client's Particulars:	1) AR: Accident Reporting (\$30);	30.00	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) PT: Follow-Through Survey \$120		
QC Checked by (Sign-In-Charge):	5) PT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	For claiming against INC Only (wef 10 Jan 2009)		
	6) TR: Re-Inspection \$75		
	7) N1: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	Q1:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idao 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	15/06/2020 14:32
Date Of Accident	14/06/2020 13:30
Exact Location Of Accident	T JUNC OF BEATTY LANE & TYRWHITT RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH6592Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ASIA EXPRESS CAR RENTAL PTE LTD
Co Reg No	2XXXXX882D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91690825

### Vehicle Particulars

Manufacturer	HONDA
Model	FREED HYBRID 1.5G AUTO
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMHCSNA00001962000
Cover Note Number	

### Driver

Name of Driver	KEE SOON MUN KEVIN
NRIC No	SXXXX671E
Date Of Birth	30/08/1978
Occupation	OUTDOOR
Date Of Driving Pass	16/05/2001
Driving Experience	19 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81313411
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 93 GEYLANG BAHRU #11-3074
Postcode	330093
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	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?	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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KOLAM AYER NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 72 GEYLANG BAHRU #01-3038 , POSTCODE: 330072 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2969999 - FAX NO: 62937659
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT T/20200615/2043.

#### 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	SHD2165D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name KEE SOON MUN KEVIN

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? SMH6592Y

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: 15/06/2020

11:39

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

A - SMH 6592Y  
B - SHD 2165D

A was travelling along Bently Lane.

After checking for traffic. A proceed to make a left turn into Trywhitt Road.

While turning into Trywhitt Road, B was reversing fast against the traffic and crash into A.

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

Policyholder's Signature \_\_\_\_\_  
Date & Time: 15/06/2020  
11:39



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





# SINGAPORE POLICE FORCE



T/20200615/2043

Police Station Of Origin:  
Kolam Ayer NPP  
72 Geylang Bahru #01-3038 SINGAPORE  
330072  
Tel No: 1800-2969999

1 of 4

Report No. T/20200615/2043

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/06/2020 13:43	Vide Report No.:	Station Diary No.: 15
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**Informant's Particulars**

Name of Informant: KEE SOON MUN, KEVIN			Address: APT BLK 93 GEYLANG BAHRU #11-3074 SINGAPORE 330093		
ID Type / ID No.: NRIC NO / S7824671E			Contact No.: Home/Office: Mobile: 81313411		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 41	Date of Birth: 30/08/1978	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 14/06/2020 13:30	Type of Location: T-Junction
Location: Along Road 1 BEATTY LANE				
"T" junction Beatty Lane and Tyrwhitt Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 40 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD2165D	Car	HONDA	SHUTTLE 1.5 HYBRID AT ABS D/AIRBAG 2WD	Brown	Slightly Damaged	1
SMH6592Y	Car	HONDA	FREED HYBRID 1.5G AUTO	Silver	Slightly Damaged	0



# SINGAPORE POLICE FORCE



T/20200615/2043

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Police Station Of Origin:  
Kolam Ayer NPP  
72 Geylang Bahru #01-3038 SINGAPORE  
330072  
Tel No: 1800-2969999

Report No. T/20200615/2043

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	KEE SOON MUN, KEVIN	ID No.	S7824671E
Related Vehicle	SMH6592Y (Car)	Contact No.	81313411
Hospital/Clinic	LOW MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	15/06/2020	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight
<b>Driver</b>			
Name	MUHAMMAD YASSER BIN ABDUL SHUKOR	ID No.	S8318204J
Related Vehicle	NIL	Contact No.	97874881
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the 14/06/2020 at around 1330hrs, I was driving my vehicle bearing licence plate no. SMH6592Y along Beatty Lane. I was about to turn left on to the "T" Junction towards Tyrwhitt Road. As I approached the junction I slowed down to approximately 5 to 10km/h. I then saw a taxi bearing licence plate no. SHD2165D reversing from Tyrwhitt Road towards my vehicle at a high speed. I then braked immediately. However, I collided on to the left rear side of the taxi. Both of us alighted and exchanged particulars. There was a passerby by the name of: Kevin, HP No. 82005802 who came up to us and informed that his vehicle has an in-car camera and he will be able to send to footage to us later. I agreed and gave the passerby my number. There was no Traffic Police or Ambulance at scene. Later in the evening, I received the video from Kevin and it showed that the taxi was reversing from Tyrwhitt Road towards Beatty Lane Junction. It seems like he had reversed quite a distance.

On the 15/06/2020 at around 1240hrs, I went to Low Medical Clinic to see a doctor as I felt strain and pain on my left neck and shoulder. The doctor gave me 3 Days of medical leave.

As such, I am informing the Police about this matter. That is all.





**SINGAPORE  
POLICE FORCE**



T/20200615/2043

Police Station Of Origin:  
Kolam Ayer NPP  
72 Geylang Bahru #01-3038 SINGAPORE  
330072  
Tel No: 1800-2969999

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Report No. T/20200615/2043

**CONTINUATION OF REPORT**



**SINGAPORE  
POLICE FORCE**



T/20200615/2043

Police Station Of Origin:  
Kolam Ayer NPP  
72 Geylang Bahru #01-3038 SINGAPORE  
330072  
Tel No: 1800-2969999

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Report No. T/20200615/2043

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

A /

Sgt 3 GLENN CHEAH YONG QUAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED  
MOHD SAID

Contact No.: 65476172

Authentication Stamp

NP168

SINGAPORE  
POLICE FORCE



SIGNATURE

Signature Of Informant:

Date/Time:

15/06/2020 13:43

Classification Of Case:



Motor Hire Car

MZ406L/B

N SN

BR0085A

Cov. Type:F

**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)

CERTIFICATE No.

DMHCSNA00001962000

Engine No.: LE85622886

Cha. No.:GB71085316

1. Index Mark and Registration  
Number of Vehicle

SMH6592Y

2. Name of Policy Holder

ASIA EXPRESS CAR RENTAL PTE. LTD.

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

25/03/2020

4. Date of Expiry of Insurance

24/03/2021

5. Persons or Classes of Persons entitled to drive\*

As per Named Driver(s) stated below.

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 for the carriage of passengers or goods in connection with the Policyholder's business.  
(2) Use for social domestic pleasure purposes and business purposes 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.

HIRE PURCHASE CO.: SKYWAY CREDIT &amp; LEASING 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

Gan Li Jia Jesca

Authorised Officer



Authorised Signatory

Asia Express Car Rental Pte Ltd  
82 Geylang Lorong 23 #03-06 Atrix Singapore 388409

**Vehicle Lease Agreement -**

This **VEHICLE LEASE AGREEMENT** (hereinafter referred to as 'The Agreement' is made on

Between

**Asia Express Car Rental**  
**(Business Registration No.: 201116882D)**  
**Having its office at:**  
**82 Geylang Lorong 23 #03-06 Atrix Singapore 388409**  
**Hereinafter referred to as 'The Owner' of the one part**

And

**Name: Kee Soon Mun, Kevin (Ji Shunwen)**  
**Nric No: S7824671E**  
**Having his residential address at: Blk 93 Geylang Bahru #11-3074, Singapore 330093**  
**Tel. (Residential) : 8490 3616**  
**Next of Kin Contact : 8550 8611**  
**Hereinafter also known at the 'The Hirer' of the other part**

Additional Driver

**Name:**  
**Nric No:**  
**Having his residential address at: B**  
**Tel. (Residential) :**  
**Next of Kin Contact :**  
**Hereinafter also known as the "Additional Hirer" of the other Part**

Hereby agrees that The Owner will lease to The Hirer and/or the Additional Hirer the vehicle with the below details, hereinafter referred to as 'The Vehicle' with the terms & conditions set out in The Agreement Contained herein: -

**Lease Period - Renew Contract**

The rental fee is hereby agreed between both parties at **S\$318.5 per**

**Make & Model: Honda Freed**

**Registration No: SMH6592Y**

**Effective from: 01/06/2020 - 01/07/2020**

**Period: 01 Month Contract**

BY SIGNING THIS AGREEMENT, YOU CONSENT TO US PROCESSING ANY PERSONAL DATA YOU DISCLOSE TO US (INCLUDING SENSITIVE PERSONAL DATA).



[The Owner's Initial & Stamps]

The Hirer and/or Additional Hirer Initial & Stamps  
02-Jun-2020



Date of Accident : 14/06/2020 Accident Time: 13:10 (24-HR-FORMAT)  
 Accident Place : 162 Trywhitt Road  
 Vehicle Reg. No (Car plate No.) : SMH 65924 Vehicle Make/Model: Honda Freed  
 Insurance Company : China Taiping Insurance (S) Pte Ltd Policy No. DMHGSNN 00001962000  
 Name of Registered Owner : Company / Individual Astra Express Car Rental  
 ID of Registered Owner : Co Reg No: 2011165820 Owner's NRIC No: \_\_\_\_\_  
 : Co Contact No: 9169 0325 Owner's Contact No: \_\_\_\_\_  
 DRIVER'S Name : Kee Soon Mun, Kevin (J. Shunmen) DRIVER'S NRIC No: S7824641E  
 DRIVER'S Date of Birth : 30 August 1978 DRIVER'S License Pass Date 16 May 2001  
 Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Driver  
 DRIVER'S Address : Blk 93 Geylang Bahin #11-3074 (S) 330093  
 DRIVER'S Contact No./ Alt No. : 1) 84903616 2) \_\_\_\_\_  
 DRIVER'S Occupation : INDOOR \ OUTDOOR (eg: working inside or outside of an ofc)  
 Email Address : Peijie @ expresscar.com.sg  
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
 Number of Passengers (including Driver): 1 male  
 Was the accident reported to the police? YES \ NO  
 Was there any video Captured by car camera: YES \ NO  
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

#### Other Party Driver's Particulars (if any)

Vehicle Reg No: <u>84D 21650</u>	Vehicle Reg No: _____
Vehicle Make/Model: <u>Honda Shuttle</u>	Vehicle Make/Model: _____
Name DRIVER: <u>Muhammad Yasser Bin Abdul Shukor</u>	Name DRIVER: _____
IC No. DRIVER: <u>S8318204J</u>	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____