

NATIONAL Assessment Centre Services. (part 1 Jan'09) **MNA 120054450**

Date In: 25/6/20 15:52	Job description	Date & Time Completed	Done by
Ref No: MA1 LIP 20006685/14	SAS e-filing		
Veh No: Gx 6964 U	E-mail (within 3hrs, AIC 2hrs)		
IP: 24/6/20 11:20	I-Motor Claim Form		
OD: IP / Repair 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/Whsp		

Preferred Wksp / INC Assgn Wksp / QW: (Tel: (Fax: (
IP Particulars:	Veh No: SKL 886S	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 Ref No: 6789 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

MA2003379	Invoice Preparation Checklist	Amc (\$)	STAB (\$)
Claimant'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 (Bgr-In-Charge):	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON:		
	• N5: Courtesy Car / Tpt Allowance \$5		
	• N6: Repair Coordination \$10		
	• N7: Post Repair Inspection \$25		
	• N8: DV / Collect Excess Coordination \$5		
	• 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	25/06/2020 15:52
Date Of Accident	24/06/2020 11:20
Exact Location Of Accident	DAIRY FARM ENTERING BKE(PIE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX6964U
Insured/Policyholder	
Name Of Registered Owner	WUI HONG M&E ENGINEERING PTE LTD
Co Reg No	2XXXXX801R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68442442

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORK
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	SI19V09486/VCV/R03
Cover Note Number	

Driver

Name of Driver	MAMUN RAHAT HOSSEN
NRIC No	GXXXX786M
Date Of Birth	01/01/1992
Occupation	OUTDOOR
Date Of Driving Pass	21/05/2019
Driving Experience	1 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-82691225
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	41C TYRWHITT RD
Postcode	207539
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	SIDE SWIPE
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?	NO
Was any injured conveyed to hospital by ambulance?	
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)	2
Passenger 1	NAME: : UNKNOWN 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

REFER TO STATEMENT.

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	SKL886S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NAS MUHAMMAD NASTA'IN BIN NASIARI
NRIC/Passport Number	SXXXX903I
Contact Number	84014000
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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: 25/6/2020



Driver's Signature

(If driver is not the policyholder)

Date & Time:

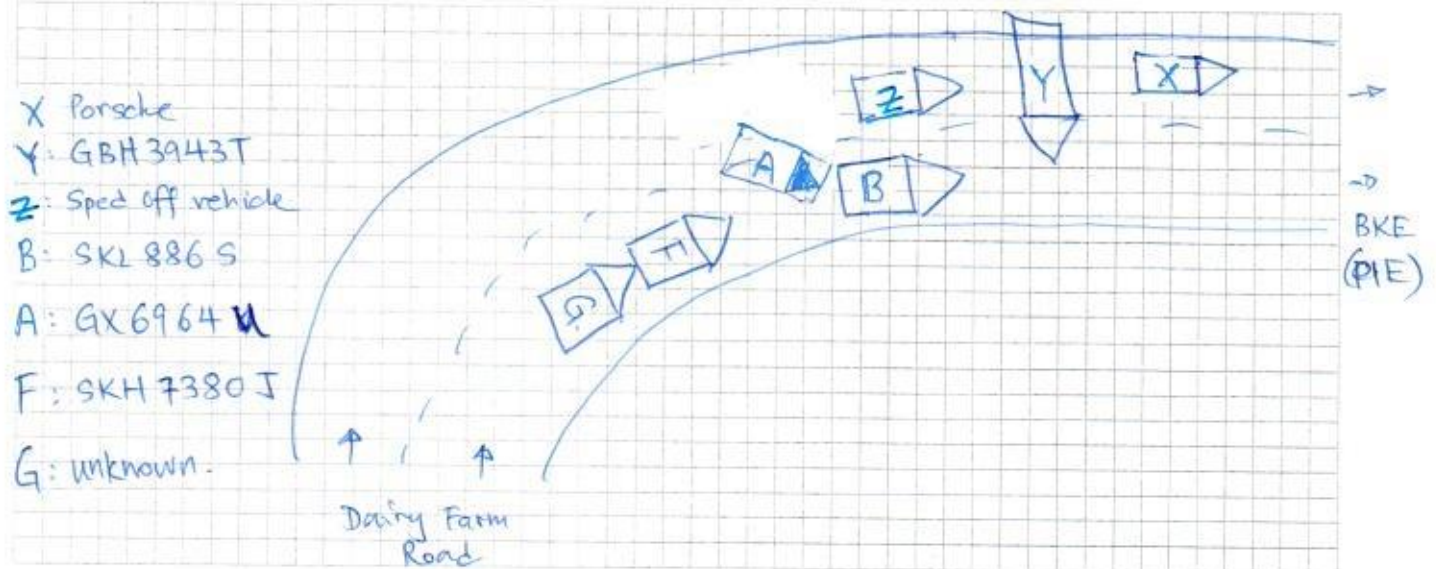
25/06/2020

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24 June 2020, at about 1120 am, I was travelling along the left lane of Dairy Farm Road towards BKE (~~change~~ PIE).

I had applied emergency brakes to avoid an accident to the vehicles in front of me (see accident description below). Due to wet road surface, my vehicle skidded to the ~~left~~ right lane & knock onto the left rear side of vehicle (SKL886S).

Location: Dairy Farm Road slip road entering BKE (PIE)

~~Accident scene map~~

Description of Accident

Prior to our accident, a Porsche had broke down on the left lane (see attached photo - Black Car with 2 lines in Red). Vehicle GBH3943T apply his emergency brake, skidded & knocked onto the tree on the left side of the road (see attached photo.) & resulted to our accident and another accident behind us.

There were 2 vehicles in front of me (one on each lane) applied brakes to avoid knocking onto their front vehicle GBH3943T as well as to themselves. The left front vehicle apply emergency brakes to avoid knocking onto GBH3943T and overtake through the right lane & sped off. The right front vehicle (SKL886S) on the right lane also apply Emergency brake to avoid knocking on the sped off vehicle as well as GBH3943T.

Due to sudden incident I also apply emergency brake & resulted my vehicle (GX6964U) skidded & knock onto the rear left portion of SKL886S in the right lane.

DECLARATION

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

Policyholder's Signature
Date & Time: 25/6/20

Driver's Signature
(If driver is not the policyholder)
Date & Time: 25/06/2020

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

ACCIDENT STATEMENT

ACCIDENT DATE: (24 / 06 / 2020) (DD/MM/YYYY), TIME: (11 : 20) (HH:MM)

LOCATION: Dairy farm entering BKE (PIE)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GX6964Y
b) INSURANCE COMPANY: Liberty
c) POLICY NUMBER: SI 19V09486 / VCV / R03
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY (THIRD PARTY FIRE & THEFT))
e) MAKE & MODEL: TOYOTA ET DYNA
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: WORK
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES / NO) REPORTING
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: WUI HONG MZE ENGINEERING PTE LTD (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 201206801R CONTACT: 6844 2442
c) ADDRESS: 24 UBI ROAD 4 #04-02 (S) 408612

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: MAMUN RAHAT HOSEN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: G 2279786M CONTACT: 8269-1225
c) ADDRESS: 41C TYRWHITT ROAD

*d) DATE OF BIRTH: (01 / 01 / 1992) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 1

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: SKL 886 S MODEL: VW SCIROCCO
b) DRIVER'S NAME: NAS MUHAMMAD NASTA'IN BIN NASIARI
c) NRIC/FIN/PASSPORT: S8035903I CONTACT: 8401-4000

9. THIRD PARTY VEHICLE

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

Email = kmtan@wuihong.com.sg

fax =

VIDEO = No.

* No of passenger
(including driver)
(2)

/
M

* No of passenger
(including driver)
FM - (2)

* No of passenger
(including driver)
()




**Liberty
Insurance**



Liberty Insurance Pte Ltd
Registration no. 199002791D
51 Club Street
#03-00 Liberty House
Singapore 069428
Tel: (65) 6221 8611 Fax: (65) 6225 6890
Website: <http://www.libertyinsurance.com.sg>

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	SI19V09486 /VCV /R03
Form	MZ300A
Date of Issue:	29-Jul-2019
1. Index Mark and Registration No. of Vehicle:	GX6964U
2. Chassis number of Vehicle:	JTFUF34Y403002714
3. Name of Policyholder:	WUI HONG M&E ENGINEERING PTE LTD
4. Effective date of Commencement of Insurance for the purposes of the Act:	19-AUG-2019 00:00
5. Date of Expiry of Insurance:	31-JUL-2020 23:59
6. Persons or Classes of Persons entitled to drive*:	Any person who is driving on the Policyholder's order or with 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.
7. Limitations as to use*:	A) Use in connection with the Policyholder's business. B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. C) Use for social, domestic and pleasure purposes.
8. The Policy does not cover:	A) Use for hire or reward or for racing, pace-making, reliability trials or speed-testing. B) Use whilst drawing a trailer except the towing or any one disabled mechanically propelled vehicle.
*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).	
For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers  Authorised Signature	

For Information only:

COVERAGE:	Third Party Fire & Theft
SUM INSURED (\$\$):	MARKET VALUE AT THE TIME OF LOSS
EXCESS (\$\$):	Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers \$3,000.00
FINANCE COMPANY:	
PRODUCER NAME:	A B LIM & SONS ENTERPRISES