

# NATIONAL Assessment Centre Services.

Part 1 Jan 2001

MANA 20059724

Date In: 15/07/2020 15:28	Job description	Date & Time Completed	Done by
Ref No: 1508/001 200073364	SAS e-filing		
Veh No: EL 30R	E-mail (Mobile then, AIC then)		
O.O.A: 14/07/2020 12:15	I-Motor Claims Form		
OD: TP: Reporting Only	I-Motor W/O (with: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/Witness		

Preferred Wkep / INC Assign Wkep / QW: (

Tel:

Fax:

TP Particulars:

Veh No: UNKNOWN CAR 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 refer of repolar.

( ) 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 of Injury:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Vehicle's Comments:

Cal. 1:

2/2

1) AIC: Accident Reporting (\$30)	
2) DA: Damage Assessment (\$100)	INC (\$10)
3) TT: Towing Fee	\$40/\$45
4) PT: Follow-Through Survey	\$120
5) PT: Follow-Through Survey (Resurvey)	\$30
6) TR: Re-inspection	\$75
7) NI: 1 day DA + EMRT Survey	\$160
8) NIUC: Additional Services	
9) NI: 1 day Mobile	

Invoice dated

Invoice dated

Fee Charged

Fee Charged

MANA 20059724



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	15/07/2020 15:28
Date Of Accident	14/07/2020 12:15
Exact Location Of Accident	OPEN SPACE CARPARK @ BLK 238 BT PANJANG RING ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	EL30R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAY HIA CHEK
NRIC No	SXXXX156F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84817113
Alternative Phone No	OTHERS-84817113
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	WISH-1.8 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PARKING INTO PARKING LOT
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	PRIVATE CAR
<b>Insurance Company</b>	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ20-000583
Cover Note Number	
<b>Driver</b>	
Name of Driver	TAY HIA CHEK
NRIC No	SXXXX156F
Date Of Birth	04/10/1955
Occupation	INDOOR
Date Of Driving Pass	05/07/1978
Driving Experience	42 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84817113
Fax Number	
Contact Number	OTHERS-84817113
EMail Address	NOEMAIL

Address	BLK 238 BUKIT PANJANG RING ROAD #07-91
Postcode	670238
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	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?	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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
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.
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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.

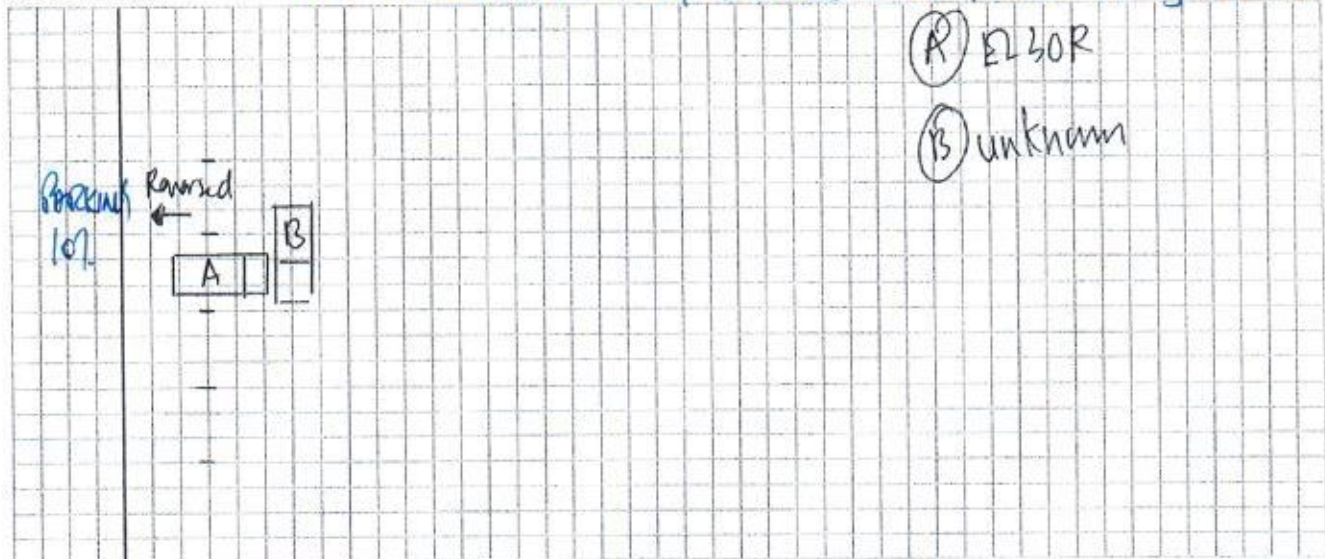
  
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

  
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

SKETCH PLAN

OPERA SPACE CARPARK @ BUK 238 BUKIT PANJUNG RING ROAD-



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14-01-2020 at about 12:15hrs, I was about parking my vehicle & on reversed mode. All of a sudden I felt an impact on my front portion. Then I realised a vehicle (unknown) had collided into my vehicle.

DECLARATION

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

郑  
Policyholder's Signature  
Date & Time:

郑  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

15/01/2020  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



**SINGAPORE ACCIDENT STATEMENT**TYPE OF CLAIMS : OWN DAMAGE ( ) 3rd PARTY ( ) REPORTING ONLY ( ☒ )

DATE OF ACCIDENT : 14.07.2020

TIME : 12:15hrs

LOCATION : OPEN SPACE CAR PARK @ BLK 238 BUKIT PANJANG RING ROAD

VEHICLE NUMBER : EL 30R

MAKE / MODEL TOYOTA WISH 1.8CVT

OWNER INSURED : TAY HIA CHEK

NRIC NO. : S1218156F

CONTACT NUMBER: 8481 7113

INSURANCE COMP:

POLICY NUMBER: DMPPHQ20-000583

TYPE OF INSURANCE: COMPREHENSIVE ( ☒ ) TPFT ( ) 3RD PARTY ONLY ( )**DRIVER PARTICULAR****DRIVER SAME AS OWNER:** ( ☒ )

DRIVER NAME :

NRIC NO.:

ADDRESS: 238 BUKIT PANJANG RING ROAD #07-91

POSTAL: 670238

CONTACT: EMAIL:

DOB: 04.10.1955

DATE OF PASS:

05.07.1978

GENDER: MALE

**(PLEASE TICK AND FILL THE RELEVANT CHOICES)**WAS DRIVER AND EMPLOYEE OF THE INSURED'S COMPANY ( ) YES ( ☒ ) NO

IF NO, RELATION OF DRIVER WITH INSURED:

( ☒ ) OWNER ( ) SPOUSE ( ) FRIEND ( ) RELATIVE ( ) CHILDREN ( ) SIBLING ( ) OTHERSWEATHER CONDITION: ( ☒ ) CLEAR ( ) RAINING ( ) DRIZZLINGROAD SURFACE: ( ☒ ) DRY ( ) WET ( ) SLIPPERYWAS ANYBODY INJURED: ( ) YES ( ☒ ) NO

INJURIES SUSTAINED :

WAS ACCIDENT REPORTED TO POLICE:

IF YES, WHICH STATION:

( ) YES ( ☒ ) NO

POLICE REPORT NUMBER:

ANY VIDEO CAPTURED: ( ) YES ( ☒ ) NOCONVEY BY AMBULANCE ( ) YES ( ☒ ) NO

NUMBER OF PASSENGER INCLUDE DRIVER:

DRIVER ONLY

PARTICULAR OF PASSENGER :

( ) MALE ( ) FEMALE

( ) MALE ( ) FEMALE

( ) MALE ( ) FEMALE

( ) MALE ( ) FEMALE

**(THIRD PARTY PARTICULAR)**

VEHICLE B UNKNOWN

NAME /NRIC:

CONTACT:

VEHICLE C

NAME /NRIC:

CONTACT:

VEHICLE D

NAME /NRIC:

CONTACT:

VEHICLE E

NAME /NRIC:

CONTACT:

VEHICLE F

NAME /NRIC:

CONTACT:

VEHICLE G

NAME /NRIC:

CONTACT:

**WITNESS (IF ANY)**

NAME:

HP NO. :

NRIC:

\* TO PROVIDE ATTACH NRIC, WITNESS STATEMENT BY POLICE REPORT\*



**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
Tel 65 6222 9432 | Fax 65 6224 2903 | www.eqinsurance.com.sg  
reg no. 1978-00490-N



**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1956 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

**PRIVATE CAR**

**Comprehensive Premier**

Certificate No. : DMPPHQ20-000583

**1. Index Mark and Registration Number of Vehicles**

EL30R

**2. Name of Policyholder**

TAY HIA CHEK

**3. Effective Date of the Commencement of Insurance for the purpose of the Act**

16/01/2020

**4. Date of Expiry of Insurance**

15/01/2021

**5. Person or Classes of persons entitled to drive\***

(a) The Policyholder

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

Comprehensive Plan - Any Workshop

Form: MX2

Excess

Insured/Named Driver S\$600.00

Unnamed Drivers S\$1,100.00

YEID Additional S\$3,000.00

EQI Motor Accident  
Hotline

**6311 3211**



\* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment 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 has not been cancelled at the time of accident loss or damage.

**6. Limitation as to use\***

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) use for any purpose in connection with the Motor Trade

\*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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : UNITED OVERSEAS BANK LIMITED

A000322/Neo & Company Insurance Agency Pte Ltd  
Date of Issue : 14/01/2020 13.21

Authorised Signatory  
EQ Insurance Company Limited

Exp No. : DMPPHQ19-000230



> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	156F
<b>Vehicle Details</b>	
Vehicle No.:	EL30R
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Jul 2020
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8 CVT
Primary Colour:	Red
Manufacturing Year:	2017
Engine No.:	2ZR0A36582
Chassis No.:	JTDGG20W20J008413
Maximum Power Output:	105.0 kW (140 bhp)
Open Market Value:	\$19,955.00
Original Registration Date:	16 Jan 2018
First Registration Date:	16 Jan 2018
Transfer Count:	0
Actual ARF Paid:	\$19,955.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Jan 2028
PARF Rebate Amount:	\$14,966.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	15 Jan 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$45,289.00
COE Rebate Amount:	\$33,771.00
<b>Total Rebate Amount:</b>	<b>\$48,737.00</b>

The information contained herein is correct as at 15 Jul 2020

OK