

1997-1998

Date In: 27/7/20 13:55	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: MA/INC 2000 7694/64	E-mail (within 2hrs, AIC 2hrs)		
Veh No: SLB 8033A	1-Motor Claim Form	MT/1097994 <sup>001</sup>	27/7/20 14:34
DP/A: 24/7/20 18:55	1-Motor W/O (Within: OD 2hrs, TP 4hrs)		
( ) Reporting Only	1-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: FBH 335T	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 Non-Inc: 6708/6616)			
1) Apply for Transport Allowance ( ) / Courtesy Car ( )			
2) QC Check / Post Repair Inspection ( )			
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )			
Injury: ( )			
Order Entry: ( )			
Action: ( )			
MA 2003888			
Claimants Particulars:		Invoice Breakdown Checklist	
Driver/Owner:		1) AR: Accident Reporting (\$30)	
Contact No:		2) DA: Damage Assessment (\$100) INC (\$30)	
Damaged Portion:		3) TP: Towing Fee \$40/\$45	
QC Checked by (Bgr-In-Charge):		4) FT: Follow-Through Survey \$120	
Auditors Comments:		5) FT: Follow-Through Survey (Resurvey) \$30	
Date:		For claimant actual INC Only (wof 10 Jan 2003)	
Time:		6) TR: Re-inspection \$75	
		7) NI: Idao DA + SMRT Survey \$160	
		8) NTUC Additional Services:	
		9) NI: Idao Mobile \$30	
		10) NI: Idao Mobile \$30	
		11) NI: Idao Mobile \$30	
		12) NI: Idao Mobile \$30	
		13) NI: Idao Mobile \$30	
		14) NI: Idao Mobile \$30	
		15) NI: Idao Mobile \$30	
		16) NI: Idao Mobile \$30	
		17) NI: Idao Mobile \$30	
		18) NI: Idao Mobile \$30	
		19) NI: Idao Mobile \$30	
		20) NI: Idao Mobile \$30	
		21) NI: Idao Mobile \$30	
		22) NI: Idao Mobile \$30	
		23) NI: Idao Mobile \$30	
		24) NI: Idao Mobile \$30	
		25) NI: Idao Mobile \$30	
		26) NI: Idao Mobile \$30	
		27) NI: Idao Mobile \$30	
		28) NI: Idao Mobile \$30	
		29) NI: Idao Mobile \$30	
		30) NI: Idao Mobile \$30	
		31) NI: Idao Mobile \$30	
		32) NI: Idao Mobile \$30	
		33) NI: Idao Mobile \$30	
		34) NI: Idao Mobile \$30	
		35) NI: Idao Mobile \$30	
		36) NI: Idao Mobile \$30	
		37) NI: Idao Mobile \$30	
		38) NI: Idao Mobile \$30	
		39) NI: Idao Mobile \$30	
		40) NI: Idao Mobile \$30	
		41) NI: Idao Mobile \$30	
		42) NI: Idao Mobile \$30	
		43) NI: Idao Mobile \$30	
		44) NI: Idao Mobile \$30	
		45) NI: Idao Mobile \$30	
		46) NI: Idao Mobile \$30	
		47) NI: Idao Mobile \$30	
		48) NI: Idao Mobile \$30	
		49) NI: Idao Mobile \$30	
		50) NI: Idao Mobile \$30	
		51) NI: Idao Mobile \$30	
		52) NI: Idao Mobile \$30	
		53) NI: Idao Mobile \$30	
		54) NI: Idao Mobile \$30	
		55) NI: Idao Mobile \$30	
		56) NI: Idao Mobile \$30	
		57) NI: Idao Mobile \$30	
		58) NI: Idao Mobile \$30	
		59) NI: Idao Mobile \$30	
		60) NI: Idao Mobile \$30	
		61) NI: Idao Mobile \$30	
		62) NI: Idao Mobile \$30	
		63) NI: Idao Mobile \$30	
		64) NI: Idao Mobile \$30	
		65) NI: Idao Mobile \$30	
		66) NI: Idao Mobile \$30	
		67) NI: Idao Mobile \$30	
		68) NI: Idao Mobile \$30	
		69) NI: Idao Mobile \$30	
		70) NI: Idao Mobile \$30	
		71) NI: Idao Mobile \$30	
		72) NI: Idao Mobile \$30	
		73) NI: Idao Mobile \$30	
		74) NI: Idao Mobile \$30	
		75) NI: Idao Mobile \$30	
		76) NI: Idao Mobile \$30	
		77) NI: Idao Mobile \$30	
		78) NI: Idao Mobile \$30	
		79) NI: Idao Mobile \$30	
		80) NI: Idao Mobile \$30	
		81) NI: Idao Mobile \$30	
		82) NI: Idao Mobile \$30	
		83) NI: Idao Mobile \$30	
		84) NI: Idao Mobile \$30	
		85) NI: Idao Mobile \$30	
		86) NI: Idao Mobile \$30	
		87) NI: Idao Mobile \$30	
		88) NI: Idao Mobile \$30	
		89) NI: Idao Mobile \$30	
		90) NI: Idao Mobile \$30	
		91) NI: Idao Mobile \$30	
		92) NI: Idao Mobile \$30	
		93) NI: Idao Mobile \$30	
		94) NI: Idao Mobile \$30	
		95) NI: Idao Mobile \$30	
		96) NI: Idao Mobile \$30	
		97) NI: Idao Mobile \$30	
		98) NI: Idao Mobile \$30	
		99) NI: Idao Mobile \$30	
		100) NI: Idao Mobile \$30	



## 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	27/07/2020 13:55
Date Of Accident	24/07/2020 18:55
Exact Location Of Accident	TANJONG KATONG RD TWDS TANJONG KATONG RD SOUTH
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB8033A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAY SWEE KENG ANTHONY (ZHENG RUIJING ANTHONY)
NRIC No	SXXXX055J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97513788
Alternative Phone No	OFFICE-97513788

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HARRIER
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 CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5079610106-04
Cover Note Number	

### Driver

Name of Driver	TAY BOON CHONG
NRIC No	SXXXX678C
Date Of Birth	20/10/1950
Occupation	INDOOR
Date Of Driving Pass	09/02/1991
Driving Experience	29 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98198033
Fax Number	
Contact Number	
Email Address	TAYSCLINIC@GMAIL.COM

Address	8 AMBER RD #15-01
Postcode	439853
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - U-TURN
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?	
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	MARINE PARADE NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 300 MARINE PARADE ROAD , <b>POSTCODE:</b> 449296 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4428999 - <b>FAX NO:</b> 62447678
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT T/20200725/2066

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD WITH TP
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBH335T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
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.
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:

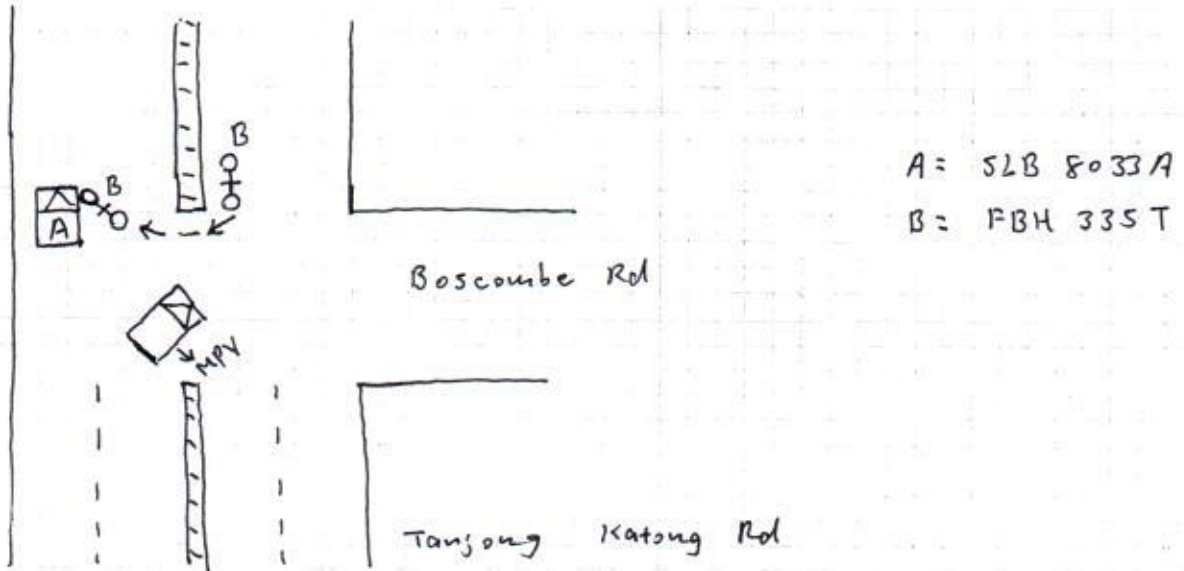
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 Police Report T/2020 0725 / 2066.

## 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.:





# SINGAPORE POLICE FORCE



T/20200725/2066

1 of 3

Report No. T/20200725/2066

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/07/2020 14:18	Vide Report No.: G/20200724/0197	Station Diary No.: 38
--	-------------------------------------	--------------------------

<b>Informant's Particulars</b>			
Name of Informant: TAY BOON CHONG		Address: 8 AMBER ROAD #15-01 SINGAPORE 439853	
ID Type / ID No.: NRIC NO / S3041678C		Contact No.: Home/Office: Mobile: 98198033	
Nationality: SINGAPORE CITIZEN		Email: taysclinic@gmail.com	
Sex: Male	Age: 69	Date of Birth: 20/10/1950	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: CLINIC DOCTOR		Driving Licence Information: Class: 2B,3	Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/07/2020 18:55	Type of Location: Straight Road
Location: Along Road 1 TANJONG KATONG ROAD  ALONG TANJONG KATONG ROAD TOWARDS TANJONG KATONG ROAD SOUTH, NEAR BOSCOMBE ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH335T	Motorcycle			Black	Slightly Damaged	0
SLB8033A	Car	TOYOTA	HARRIER	White	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLB8033A	NTUC Income Insurance Co-Operative Limited			



**SINGAPORE  
POLICE FORCE**



T/20200725/2066

2 of 3

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

Report No. T/20200725/2066

**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	TAY BOON CHONG	ID No.	S3041678C
Related Vehicle	SLB8033A (Car)	Contact No.	98198033
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,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 24/07/2020 at about 1855hrs, I was driving a private vehicle (SLB8033A, Toyota Harrier, White colour) along Tanjong Katong Road towards Tanjong Katong Road South to head home. The vehicle owner is my son (Anthony Tay, HP: 97513788) and I am the driver registered with the NTUC Income Car Insurance. I was travelling along Tanjong Katong Road towards Tanjong Katong Road South on the first lane (right lane). There are two lanes on the said road. As I was approaching Tanjong Katong Road junction of Boscombe Road, there was a stationary vehicle who wanted to make right turn into Boscombe Road. As such, I decided to filter out into the left lane slowly.

Suddenly, a motorcycle (FBH335T) hit my vehicle from the front right side. I noted that the motorcycle made an illegal U-turn at the said junction from the opposite direction. The motorcyclist sustained injuries and was then conveyed to hospital by ambulance called by me. I am not injured. Traffic police was at the accident location.

My vehicle sustained slight damages to the front right corner. My vehicle has an in-car camera. I have handed over to the SD card to Traffic Police SGT(2) T180033 Zheng Yao.

Details of witness: Jasper, HP: 96929668.





**SINGAPORE  
POLICE FORCE**



T/20200725/2066

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

3 of 3

Report No. T/20200725/2066

**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:  
G /  
Sr Staff Sgt NUR ZARIFAH BINTE ZULKIFLI

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
Sr Staff Sgt NOOR HIDAYAH BINTE  
ABDULLAH  
Contact No.: 65476251

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
25/07/2020 14:18

Classification Of Case:



SIGNATURE

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"/>	5079610106-04		TAY SWEE KENG ANTHONY (ZHENG RUIJING ANTHONY)	S8071055J	GPC	drivo PREMIUM	SLB8033A	SLB8033A	28/04/2020	27/04/2021



# ACCIDENT STATEMENT

ACCIDENT DATE: (24 / 7 / 20) (DD/MM/YYYY), TIME: (18 : 55) (HH:MM)

LOCATION: Along Tanjong Katong Rd towards <sup>Tanjong</sup> Katong Rd South

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLB 8033A  
 b) INSURANCE COMPANY: \_\_\_\_\_  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: \_\_\_\_\_  
 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: Tay Swee Keng (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 9751 3788  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: Tay Boon Chong (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 9819 8033  
 c) ADDRESS: \_\_\_\_\_

\*d) DATE OF BIRTH: (\_\_\_\_/\_\_\_\_/\_\_\_\_) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: \_\_\_\_\_

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: parents

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: Marine Parade NPG.

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: FBH 335T MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

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

Email =

fax =

VIDEO = Yes SD card with TP.



#G/197.  
10 Aug  
6547 6171.

**SINGAPORE POLICE FORCE**  
**ACKNOWLEDGEMENT SLIP**

Ref: Report No: G/20200724 / G197.

I, SGT(2) T180033 Zheng Yao  
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of TP  
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 01X Black/RED SD Card (Sandisk) 64GB/-
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_
- 5 \_\_\_\_\_
- 6 \_\_\_\_\_
- 7 \_\_\_\_\_
- 8 \_\_\_\_\_
- 9 \_\_\_\_\_
- 10 \_\_\_\_\_

from S3041678C Tay Boon Chong  
(Name, NRIC or Passport No. / Rank and No.)

of 8 Amben Rd #15-01 S439853  
(Address / Police Station / NPC / NPP)

on 24.07.20 at 1940hrs  
(Date) (Time)

Witnessed by / \* Handed over by:  
(\* Delete if applicable)

DR. TAY BOON CHONG  
(Signature) S3041678C

(Name, NRIC or Passport No. / Rank and No.)

Received by:

SGT(2) T180033  
(Signature)

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Claim Handling

## Accident MT/1097994

Policy No.	5079610106-04	Vehicle No.	SLB8033A	GST Registrat
Certificate No.				
Policyholder Name	TAY SWEE KENG ANTHONY (ZHENG RUJING ANTHONY)			Policyholder NI
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive PREMIUM	Loading
Contact No.(Mobile)	97513788	Contact No.(Office)		Contact No.(H
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire

## ▼ Accident Details

Report Date	27/07/2020 14:29	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	24/07/2020	Time of Accident hh:mm	18:55	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	TANJONG KATONG RD TWDS TANJONG KATONG RD SOUTH			

## ▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00	
DD Standard Excess	0.00	TP Standard Excess	0.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Cover
Additional Excess	0			
Total OD Excess Applicable	0.00	Total TP Excess Applicable	0.00	

## ▼ Benefits

Coverage	Sum Insured
Transport Allowance	99999999.99
Excess Waiver	99999999.99

## ▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## ▼ Policyholder Mailing Address

Address 1	BLK 44 #17-12	Address 2	MARINE CRESCENT	Address 3
Address 4	SINGAPORE 440044	Address Type	Singapore address	Post Code
Unit No.	17-12	Related Policy Number	5079610106-04	

## ▼ OI Driver Info

Driver Name	DR. TAY BOON CHONG	Driver Type	Named Driver	
Unnamed driver Name		Driver NRIC	S3041678C	Driver DOB
Register Date of Driver License	01/09/1968	Driver Age	69	Driving Exper
Contact No.(Mobile)	98198033	Contact No.(Office)		Contact No.(H
Address 1	8 AMBER ROAD	Address 2	#15-01 AMBER SKYE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	15-01			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer

## Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input type="radio"/> No
-------------------------------------	------	-------------	--

## Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	TA
Contact No.(Mobile)	97513788	Contact No. (Home)	
Email Address	DR.ANTHONYTAY@GMAIL.COM	OI Vehicle Number	SL
Claim Description	SLB8033A / FBH335T ON 24 Jul 2020		
Preferred Workshop		Insured Liability	Not at Fault
Source No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown
Date Registered	27/07/2020 14:32	GIA report	Received
Report Taken By	LIEW SHAN HUI	Claim Close Date	






















☐ Print AK letter 

## Attachment

Accident No. MT/1097994 Claim No. 001  
 Last Doc. Received ☒ Yes ☐ No Upload Date 27/07/2020 14:34

Path *	Category *	Confider
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Confider
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:34	SAS	Normal	S
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:34	NRIC/ Driving License	Normal	NRIC/ Driv
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:34	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:34	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:34	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:34	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:34	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:34	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:33	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:33	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:33	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:33	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:33	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:33	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:33	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:32	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:32	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:32	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:32	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 27 Jul 2020 14:32	Photos	Normal	Ph
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	Photos	Normal	Ph





27 Jul 2020 14:32

## Video List

Uploaded By/Date

Folder Date

File Name



Display in New Window

Scan and uploading