NATIONAL Assessment Centre Services

Date In: 17/08/20	Job description	Date & Time Completed	Done by
Ref No: NA/INC20000851 /13	SAS e-filing		
Veh No: SJJ2081B	E-mail (within 8hrs, NIC 2hrs)		
D.O.A: 15/08/20 1720	i-Motor Claim Form	MT/1100091 -001	
OD / TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-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: SFB1213P 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%. F: 80-100%]

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: ($) Loading : $1,000 ( ) / $2,000 ( )

General Remarks:-

( ) Walk-In Customer : Customers 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 hotline: 6788 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

NA2004224

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist		Amt ($) In Bill	Amt ($) Add Bill
1) AR : Accident Reporting ($30);			
2) DA : Damage Assessment ($100);	INC ($30)		
3) TP : Towing Fee	$40/$45		
4) FT : Follow-Through Survey	$120		
5) FT : Follow-Through Survey (Resurvey)	$20		
For claiming against INC Only (w.e.f 10 Jan 2005)			
6) TR : Re-inspection	$75		
7) N1 : Idea DA + SMRT Survey	$160		
8) NTUC Additional Services:-			
OP)*			
*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: Idea 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 witholding 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	17/08/2020 09:39
Date Of Accident	15/08/2020 17:20
Exact Location Of Accident	ALONG BUKIT TIMAH RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ2031B
Insured/Policyholder	
Name Of Registered Owner	VERA TAN HOCK LIN
NRIC No	SXXXX280C
Email Address	VERA.TAN1919@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97808877
Alternative Phone No	OTHERS-97808877
Vehicle Particulars	
Manufacturer	SUZUKI
Model	SWIFT
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	THIRD PARTY
Fleet Policy	NO
Policy Number	5118516925
Cover Note Number	
Driver	
Name of Driver	HAY TECK KWEE
NRIC No	SXXXX187H
Date Of Birth	23/08/1962
Occupation	OUTDOOR
Date Of Driving Pass	17/09/1998
Driving Experience	21 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96679008
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 8 HAIG ROAD #03-421
Postcode	430008
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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)	2
Passenger 1	NAME: : VERA TAN HOCK LIN GENDER: : FEMALE

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

I WAS TRAVELLING FROM BUKIT TIMAH RD TWDS FARRER RD/ADAM RD.I STOP MY VEH AT THE GIVEWAY LINE TO GIVE WAY FOR ONCOMING VEH SUDDENLY VEH B FROM BEHIND CAME AND HIT ONTO MY REAR LEFT PORTION OF MY VEH.

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	SFB1213P
Vehicle Make/Model/Colour	BMW SUV
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DESMOND NG TIONG KENG
NRIC/Passport Number	SXXXX062I
Contact Number	93636188
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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: 17/8/20

Driver's Signature
(If driver is not the policyholder)
Date & Time: 17/8/2020

17/08/20
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s refer to the statement.

DECLARATION

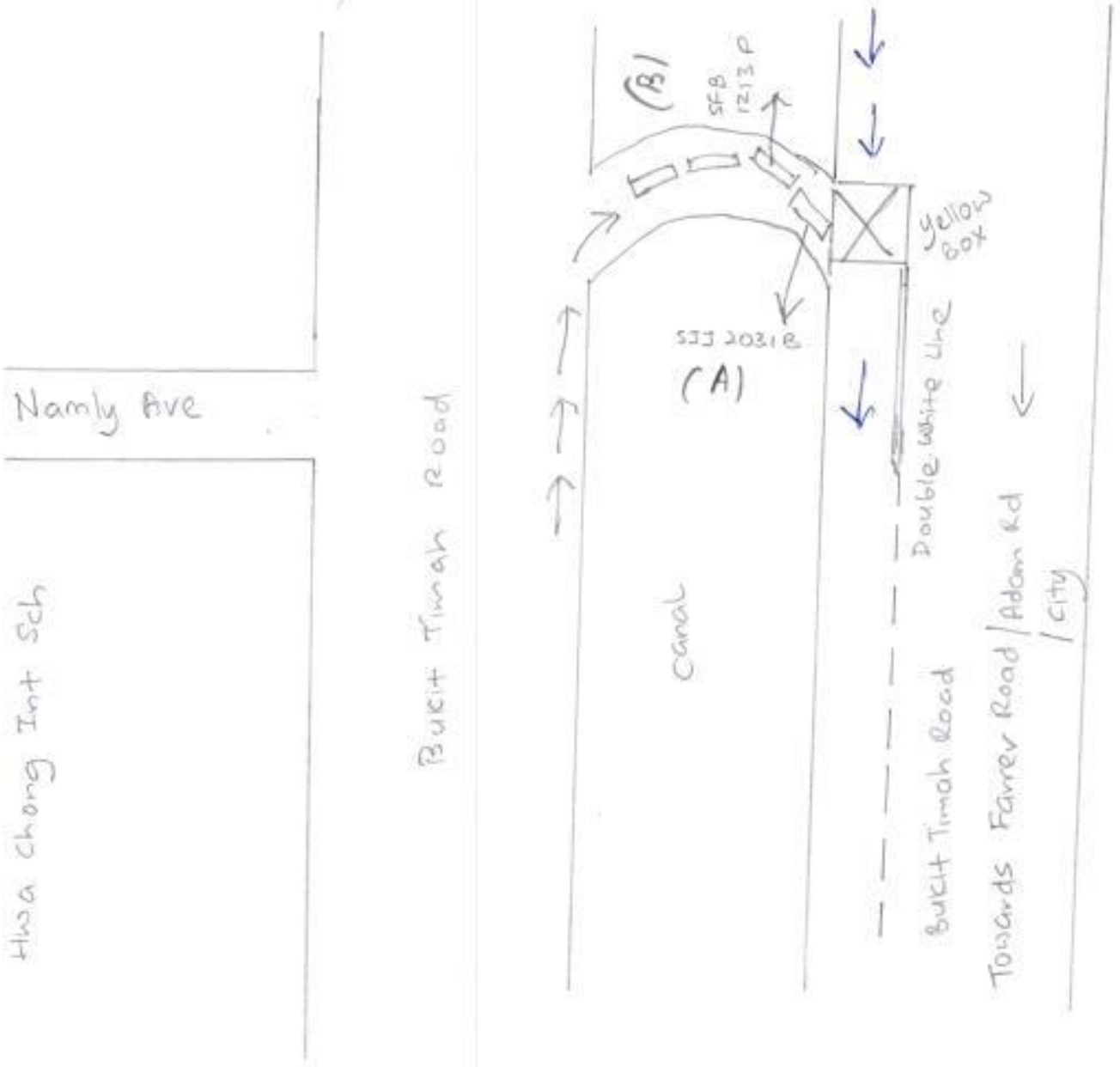
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 17/8/20

Driver's Signature
(If driver is not the policyholder)
Date & Time: 17/8/2020

17/08/20
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

DATE: 15/8/2020. TIME: 5.19 PM



SFB 1213 P (AXA)

Desmond Ng Tiong Keng

S7230062I

Hp: 93636188

SJJ 2031 B (NTUC)

Hay Teck Kwee

S1542187H

Hp: 96679008

ACCIDENT STATEMENT

ACCIDENT DATE: (15 / 8 / 2020) (DD/MM/YYYY), TIME: (5 : 19) (HH:MM) PM

LOCATION: Along Bukit Timah Rd

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: SJJ 2031B
   b) INSURANCE COMPANY: NTUC
   c) POLICY NUMBER: 511851692S
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / ~~THIRD PARTY FIRE & THEFT~~)
   e) MAKE & MODEL: SUZUKI SWIFT 1.2 GA
   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: Vera Tan Mock Lin (MALE / (FEMALE))
   b) NRIC/FIN/PASSPORT: S7112280C CONTACT: 97805877
   c) ADDRESS: BLK 8 Haig Rd #03-421 S(430008)

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

No of passenger (including driver) (2)

3. DRIVER
   a) NAME: May Teck Kwee (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S1542187H CONTACT: 96619008
   c) ADDRESS: BLK 8 Haig Rd #03-421 S(430008)

   *d) DATE OF BIRTH: (23 / 8 / 62) (DD/MM/YYYY)
   e) OCCUPATION: (~~INDOOR~~ / OUTDOOR)
   f) YEARS OF DRIVING EXPRERIENCE: 1998
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / (NO))
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Spouse
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

No of passenger (including driver) (1)

   a) VEHICLE NUMBER: SFB 1213 P MODEL: BMW SUV
   b) DRIVER'S NAME: Desmond Ng Tiong Keng
   c) NRIC/FIN/PASSPORT: S1230062I CONTACT: 93636588
9. THIRD PARTY VEHICLE

No of passenger (including driver) (__)

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

Email =

fax =

VIDEO =

income

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)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: S118516925 — **Cover** : Third Party

1. Index mark and Registration Number of Vehicle	**SJJ2031B**
Chassis Number	ZC715439397
2. Name of Policyholder	VERA TAN HOCK LIN
3. Effective Date of Insurance	11 Aug 2020
4. Expiry Date of Insurance	03 Sep 2021

5. Persons 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/her 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.
6. Limitations as to Use#
   (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

(a) Use for hire or reward.
(b) Use for racing, pace making, reliability trial 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 Vehicle (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.

EXCESS (SECTION 1)	N/A
EXCESS (SECTION 2)	N/A
ADDITIONAL EXCESS	N/A
UNNAMED DRIVER EXCESS	N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	NO
INSURE WITH COE	N/A
NCD PROTECTION	NO
PRIMARY DRIVER	VERA TAN HOCK LIN
NAMED DRIVER (1)	N/A
NAMED DRIVER (2)	N/A
HIRE PURCHASE COMPANY	N/A
SUM INSURED	N/A

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).

Agency : INSURE LINK PTE. LTD. (200308614R)
Date of Issue : 05 Aug 2020 19:58 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

Claim Handling

Accident MT/1100091

Policy No:
Certificate No:
Policyholder Name: VERA TAN HOCK LIN
Product Code:
Contact No.(Mobile):
Email Address:
KFK: No Yes
NCD Protection:

Vehicle No:
Cover Type:
Contact No.(Office):
Special Remark:
TOA: No Yes
NCD Entitlement(%):

GST Registration No:
Policyholder NRIC:
Loading:
Contact No.(Home):
eCode:
eCode Reason:
Private Hire: No

Accident Details

Report Date:
Date of Accident:
Reporting Centre:
Accident Location:

Accident Report Within 24 hrs: Yes
Time of Accident hh:mm:
Orange Force:

Accident Type: Collision - >
Country of Accident: Singapore
ICM No:

Total Excess Applicable

Excess Type: Per Accident

Windscreen Excess:

OD Standard Excess:
YIED OD Excess:
Additional Excess:
Total OD Excess Applicable:

TP Standard Excess:
YIED TP Excess:
Total TP Excess Applicable:

Driver is Covered?: Covered

Benefits

GST Registered Information

GST Registered:
GST Registration No:
Modification History:

GST Registration Date:
GST Status Verified:

Policyholder Mailing Address

Address 1:
Address 2:
Address 3:
Address 4:
Address Type: Singapore address
Post Code:
Unit No:
Related Policy Number:

OI Driver Info

Driver Name: Unnamed Driver
Unnamed driver Name:
Register Date of Driver License:
Contact No.(Mobile):
Address 1:
Address 4:
Unit No:
Does he own a Singapore Registered car? Yes No

Driver Type: Unnamed Driver
Driver NRIC:
Driver Age:
Contact No.(Office):
Address 2:
Address Type: Singapore address
Driver Vehicle No:

Driver DOB:
Driving Experience:
Contact No.(Home):
Address 3:
Post Code:
Driver Insurer Company:

Declaration:
Breathalyser or Blood Test Reading? 0 mg

Any injury? Yes No

Modification History

Claim 001 OD-MX New

Claim Type *: OD-MX
Insured Name: VERA TAN HOCK LIN
Contact No.(Mobile): 97808677
Contact No.(Home): 67421218
Email Address: vera.tan1919@gmail.com
OI Vehicle Number: SJJ2031B
Claim Description: SJJ2031B / SFB1213P ON 15 Aug 2020
Preferred Workshop: Insured Liability
Assigned Repair Option: Preferred Workshop, Name unknown
Not at Fault
Police Report No.: Yes
Investigation:
GIA report: Received
Date Registered: 17/08/2020 10:29
Claim Close Date:
Report Taken By: ROSLINDA
Workshop Repairer:
Print AK letter

Save Submit

Attachment

Accident No:
Claim No:
Last Doc. Received: Yes No
Upload Date:

Path *		Category *	Confidential	Urgency *
Choose File No file chosen	Clear	Please Select	No	Normal
Choose File No file chosen	Clear	Please Select	No	Normal

Choose File No file chosen
Choose File No file chosen
Choose File No file chosen
Choose File No file chosen

Clear Please Select Normal
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Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:28	NRIC/ Driving License	*	Normal	NRIC/ Driving License 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:28	SAS		Normal	SAS 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:28	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:28	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:28	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:28	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:28	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:28	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:27	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:27	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:27	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:27	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:27	Photos		Normal	Photos 2020-8-17
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Aug 2020 10:27	Photos		Normal	Photos 2020-8-17

Video List

Uploaded By/Date	Folder Date	File Name	Source

Display in New Window Scan and uploading