

NATIONAL Assessment Centre Services

[wef 1 Jan'05]

MHA10007346

Date In: 21/12-15:49	Job description	Date & Time Completed	Done by
Ref No: HA/INC 23-0891/24	SAS e-filing		
Veh No: 86269661	E-mail (within Shrs, AIC 2hrs)		
D.O.A: 24/12-16:30	i-Motor Claim Form	21/12 16:18	
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: 86269661	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 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

HA 2004503	Invoice Preparation Checklist	Am't (\$) 1st Bill	Am't (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*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: Idac Mobile 30		
Auditors' Comments:-	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

at 1:

at 2 / 3:

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	24/08/2020 15:49
Date Of Accident	22/08/2020 16:30
Exact Location Of Accident	BLK 3 BEACH RD CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGQ6968X
Insured/Policyholder	
Name Of Registered Owner	CHUA SWEE HIN ALBERT
NRIC No	SXXXX339J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97378201
Alternative Phone No	OFFICE-97378201

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER 1.6 A
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5052717660-08
Cover Note Number	

Driver

Name of Driver	CHUA SWEE HIN ALBERT
NRIC No	SXXXX339J
Date Of Birth	07/09/1962
Occupation	INDOOR
Date Of Driving Pass	21/03/1983
Driving Experience	37 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97378201
Fax Number	
Contact Number	OFFICE-97378201
EEmail Address	NOEMAIL

Address	BLK 25 TANGLIN HALT RD #06-28
Postcode	140025
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ALEXANDRA NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 46-2 COMMONWEALTH DR , POSTCODE: 140462 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4739999 - FAX NO: 64713569
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200822/2088.

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	GBJ125Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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



Vehicle A
- SAQ 6968 X
Vehicle B
- GBS 125 Y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police report: T/20200822/2088

Vehicle A - SAQ 6968 X

Vehicle B - GBS 125 Y

[Large handwritten signature/initials across the description area]

DECLARATION

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

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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.:

Vehicle No.	SGQ 6968X	Model / Make Mitsubishi Lancer 1.6A	
Date of Accident	22/08/2020		
Time of Accident	10:30	HRS	
Location of Accident	3 Beach Road		
Exact purpose use during accident	Personal		
Name of Owner	CHUA SWEE HZN ALBERT		
Telephone No.	H/P : 97378201	Home :	Office :
NRIC	S1564339J		
Address	25 TANGLIN HALL ROAD #06-28 Singapore 140025		
Claim type	OD <u>THIRD PARTY</u> REPORTING ONLY		
Insurance Company	NTUE		
Type of Coverage	Comprehensive Third Party Third Party / Fire / Theft		
Policy No.	5052417660-08		
Name of Driver	As Above If No,		
NRIC	Any Passengers : N.A		
Date of birth	07/09/1962		
Occupation	Outdoor / Indoor		
Driving License Pass Date	21/03/1983		
Gender	Male / Female		
Contact No.	H/P :	Home :	Office :
Address			
Driver have any own vehicle	No, If yes, Reg No.	OWNER	
Relationship	Employee, If no, state	OWNER	
Weather condition	Clear Raining Other		
Road Surface	Dry Wet Other		
Any Injuries	No, If Yes, Who?		
Name And Contact No.			
Name And Contact No.			
Police Report	No, If Yes Where?	Alexandra NPP	
Vehicle B No.	GRJ 125Y	Any Passengers :	-
Name of Driver	-	Contact No. :	-
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name	Witness Contact :		
Accident Portion	Front Right portion		
Camera Recorder	Yes / No		
Email Address	itscs2@gmail.com		
PARTICULAR WORKSHOP	Twincar Automotive		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Ian		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg		



SINGAPORE POLICE FORCE



T/20200822/2088

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

1 of 3

Report No. T/20200822/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/08/2020 18:30	Vide Report No.:	Station Diary No.: 39
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Informant's Particulars

Name of Informant: CHUA SWEE HIN ALBERT	Address: APT BLK 25 TANGLIN HALT ROAD #06-28 SINGAPORE 140025		
ID Type / ID No.: NRIC NO / S1564339J	Contact No.: Home/Office: Mobile: 97378201		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 57	Date of Birth: 07/09/1962	Type of Informant: Driver
Race: Chinese	Language: English	Institution / School Name:	
Occupation: Drafter	Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/08/2020 16:30	Type of Location: Car Park
Location: BEACH ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBJ125Y	Van					0
SGQ6968X	Car	MITSUBISHI	LANCER 1.6 A	Silver	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGQ6968X	NTUC Income Insurance Co-Operative Limited	5052717660-08	23/01/2020	22/01/2021



**SINGAPORE
POLICE FORCE**



T/20200822/2088

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

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Report No. T/20200822/2088

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	Unknown	ID No.	NIL
Related Vehicle	GBJ125Y (Van)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	CHUA SWEE HIN ALBERT	ID No.	S1564339J
Related Vehicle	SGQ6968X (Car)	Contact No.	97378201
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 the 22/08/2020 @ 1600hrs, I parked my vehicle at the said location and left to buy things. On the same day @ 1630hrs when I came back to my vehicle and I discovered that the front right side of my car was damaged and at the same time one male Chinese approached me and told me that he saw the said van that parked next to me, when driving off, collided onto my vehicle and drove off without stopping. As I was too angry over the incident, I did not take down this male Chinese witness details at all, as I only snap a pic of the vehicles informations through his handphone that he took it down earlier.



**SINGAPORE
POLICE FORCE**



T/20200822/2088

Police Station Of Origin:

3 of 3

Alexandra NPP

Report No. T/20200822/2088

46 Tanglin Halt Road #01-328 SINGAPORE

140462

CONTINUATION OF REPORT

Tel No: 1800-4739999

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:

D /

Staff Sgt YIP KUM HOONG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

22/08/2020 18:30

Officer In Charge Of Case:

TP / HRT /

SI KALESWARI PALANI

Contact No.: 65476902

Classification Of Case:

Authentication Stamp

NP168

SN 47

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: 5052717660-08

Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle : **SGQ6968X**
Chassis Number : JMYSTCS3A7U005714
2. Name of Policyholder : CHUA SWEE HIN ALBERT
3. Effective Date of Insurance : 23 Jan 2020
4. Expiry Date of Insurance : 22 Jan 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	: YES
NCD PROTECTION	: NO
PRIMARY DRIVER	: CHUA SWEE HIN ALBERT
NAMED DRIVER (1)	: CHUA MING ZHENG JOSHUA
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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 : INCOME - MAIN SERVICING (00000600057)
Date of Issue : 06 Jan 2020 12:51 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive