

NATIONAL Assessment Centre Services

Date In: 07/09/20	Job description	Date & Time Completed	Done by
Ref No: NA/CFI20009540/13	SAS e-filing		
Veh No: SKC52275	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 04/09/20 2005	i-Motor Claim Form		
OD: <input checked="" type="radio"/> 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: (	PRECISE	Tel:	Fax:
TP Particulars:	Veh No: SLL66985	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: 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:	
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Date/Time	Actions

NA2004719	Invoice Preparation Checklist	Amc (\$)	Amc (\$)
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		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	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:-		
	OD:		
	*N3: Courtesy Car / TP 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: 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	07/09/2020 16:02
Date Of Accident	04/09/2020 20:05
Exact Location Of Accident	BLK 62 KALLANG BAHRU CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC5227J
Insured/Policyholder	
Name Of Registered Owner	OON TECK BIN JAMES
NRIC No	SXXXX869I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96346968
Alternative Phone No	OTHERS-96346968

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSNW00118432005
Cover Note Number	

Driver

Name of Driver	OON TECK BIN JAMES
NRIC No	SXXXX869I
Date Of Birth	09/08/1971
Occupation	INDOOR
Date Of Driving Pass	08/12/1995
Driving Experience	24 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96346968
Fax Number	
Contact Number	OTHERS-96346968
EMail Address	NOEMAIL

Address	BLK 326 CLEMENTI AVENUE 5 #04-157
Postcode	120326
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	COLLIDED INTO PARKED VEHICLE
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)	0

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

PLS REFER TO THE ATTACHED 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	SLL6698S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR TAY SENG CHYE
NRIC/Passport Number	SXXXX159E
Contact Number	90481611
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:

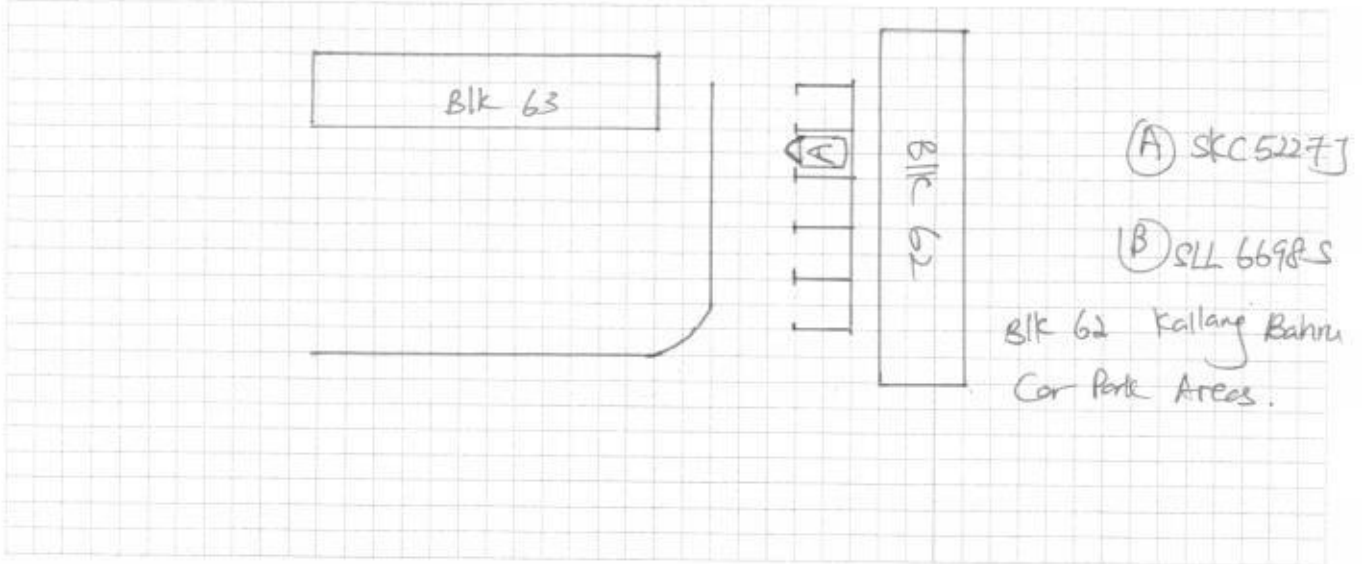
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

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

On 04/09/2020 @ about 20:05pm, my car was parked at Car Park Areas of Blk 62 Kallang Bahru and i was having dinner at Blk 63 Kallang Bahru. while i went to pickup my car after dinner i then realized that my car front portion damaged and there was a notice on my car front windscreen glass which was wrote by Vek B's driver (Mr. Tay Seng chye) admitted his car collided onto front portion of my car. Hence, I hereto lodge this report to claim against Vek B's Insurance for my car accident damages.

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: 07/09/20

@ 3:00pm

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

Notes

Please contact

90481611

Had accidentally

knocked against
the front of your
car.

VEHICLE NO : SKC 5227J

MAKE & MODEL : Honda Civic

Date of Accident	04 / 09 / 20		
Time of Accident	8:05 AM / PM		
Location of Accident	Blk 62 Kallang Bahru 5 Car Park Areas.		
Exact Purpose Usage	Personal / Private Hire (Uber / Grab) / Commercial		
NAME OF OWNER :	Oon Teck Bin.		
Contact No.	96346968		
Nric No	S7131869I		
Type Of Claim	Third Party / Own Damage / Reporting only		
Insurance Co.	China Taiping Insurance.		
Type of Coverage	Comprehensive / Third Party / Third Party Fire & Theft		
Policy No	DIMP CS NW 00118432005.		
NAME OF DRIVER :	As above / If No :		
Nric No	As Above	Any Passenger:	
Date Of Birth	09 / 08 / 1971		
Occupation	Outdoor / Indoor		
Date Of Driving Pass	08 / 12 / 1995		
Gender	Male / Female		
Contact no	96346968	Office :	Home :
Address	Blk 326 Clementi Avenue 5 #04-157		
Driver Have Any Own Vehicle	NO / If Yes (Reg no) : SC120326		
Relationship	Employee / If No : owner		
Weather Condition	Clear / Raining / Other :		
Road Surface	Dry / Wet / Other :		
Any Injuries	NO / If Yes Who?		
Name		Contact :	
Name		Contact :	
Police Report	No / If Yes : Where?		
Vehicle B No :	SLL 6698S		Any Passenger:
Name Of Driver	Mr. Tay Seng chye CS1537159E		
Contact No :	90481611		
Vehicle C No :		Any Passenger:	
Vehicle D No :		Any Passenger:	
Vehicle E No :		Any Passenger:	
Vehicle F No :		Any Passenger:	
Any Witness			
Witness Contact No			
Have you been approach by unknow person soliciting (s) / offering accident claims assistance?			
YES / NO			
PARTICULAR WORKSHOP	PRECISE AUTO SERVICE		
Address	1 Kaki Bukit Ave 6 #02-34		
	Kaki Bukit @ Auto Bay		
	Singapore 417883		
Email : fir2me@yahoo.com.sg	Tel : 6745 7367	Fax : 6841 3390	



Motor Private Car

MX1F

R SN

AN0444A

Cov. Type:C

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. DMPCSNW00118432005

Engine No.: K20Z25500012

Cha. No.: JHMF02640AS200012

1. Index Mark and Registration
Number of Vehicle

SKC5227J

AUTOSAFE
=====

2. Name of Policy Holder

OON TECK BIN JAMES

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

05/09/2020

Named Drivers Ex Sect. I S\$750.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 S\$3,000.00

Ex Sect. I - Age >= 26 S\$500.00

* Age as at date of accident

EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

04/09/2021

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 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.*

Use for social, domestic and pleasure purposes and for the Policyholder's business.
The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: CITIBANK SINGAPORE LTD AS HP OWNER

* 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).

Please see reverse



Issued By META AGENCY PTE LTD
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

Vehicle Details

Vehicle No.	Make / Model
SKC5227J	HONDA / CIVIC 2.0L 5AT
Vehicle Type:	Vehicle Attachment 1:
P10 - Passenger Motor Car	No Attachment
Vehicle Scheme:	Chassis No.:
Normal	JHMF2640AS200012
Propellant:	Engine No.:
Petrol	K20Z25500012
Motor No.:	Engine Capacity:
-	1998 cc
Power Rating:	Maximum Power Output:
-	114.0 kW (152 bhp)
Maximum Laden Weight:	Unladen Weight:
1760 kg	1312 kg
Year Of Manufacture:	Original Registration Date:
2009	05 Sep 2011
Lifespan Expiry Date:	COE Category:
-	E - Open Category
Quota Premium:	COE Expiry Date:
\$68,811.00	04 Sep 2021
Road Tax Expiry Date:	PARF Eligibility Expiry Date:
04 Mar 2021	04 Sep 2021
Inspection Due Date:	Intended Transfer Date:
04 Sep 2022	07 Sep 2020
CO2 Emission:	CEV/VES Rebate Utilised Amount:
-	-
CO Emission:	HC Emission: