

NATIONAL Assessment Centre Services (wef 1 Jan'05) **MA12008304301**

Date In: 21/9/12-11:40	Job description	Date & Time Completed	Done by
Ref No: HA/0722010244/24	SAS e-filing		
Veh No: 5F33932	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 19/9/12-08:15	i-Motor Claim Form		
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: 4B638483	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

Claimant's Particulars:-	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
		1st Bill	Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	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: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QD*		
	*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 (N-in INC) against INC \$20		
	9) N12: Idao Mobile 30		
	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	24/09/2020 11:40
Date Of Accident	19/09/2020 08:15
Exact Location Of Accident	BLK 223 PENDING RD OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF7397J
Insured/Policyholder	
Name Of Registered Owner	ONG BOON TIN MRS MOH-ONG BOON TIN
NRIC No	SXXXX872F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94554576
Alternative Phone No	OFFICE-94554576

Vehicle Particulars

Manufacturer	TOYOTA
Model	RUSH 1.5X 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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSNW00059722004
Cover Note Number	

Driver

Name of Driver	ONG BOON TIN (WANG WENZHEN) MRS MOH-ONG BOON TIN
NRIC No	SXXXX872F
Date Of Birth	23/03/1976
Occupation	INDOOR
Date Of Driving Pass	05/03/1999
Driving Experience	21 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94554576
Fax Number	
Contact Number	OFFICE-94554576
EMail Address	NOEMAIL

Address	BLK 223 PENDING ROAD #09-109
Postcode	670223
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	BUKIT PANJANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 42 FAJAR ROAD , POSTCODE: 679005 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8929999 - FAX NO: 67673650
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200921/2046.

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	GBE3848B
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:

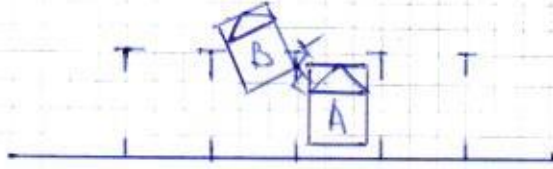
Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

SKETCH PLAN

BUR 223 Pending Road
open space car park

Veh A: SJF7397J
Veh B: GBE3848B



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

Report No: T/20200921/2046

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.:

Vehicle No.	SJF 73975		Model / Make	Toyota Rush
Date of Accident	19/9/2020			
Time of Accident	0815 HRS			
Location of Accident	Along Blk 223 Pending Road OSCP			
Exact purpose use during accident	Private Use			
Name of Owner	Ong Baon Tin			
Telephone No.	H/P : 9454576		Home : Office :	
NRIC	S7607872F			
Address	Blk 223 Pending Road #09-1098 (67023)			
Claim type	OD THIRD PARTY REPORTING ONLY			
Insurance Company	China Taping			
Type of Coverage	Comprehensive Third Party Third Party / Fire / Theft			
Policy No.	DMPCSNW00059722004			
Name of Driver	As Above If No,			
NRIC	Any Passengers : -			
Date of birth	23/3/1976			
Occupation	Outdoor / Indoor			
Driving License Pass Date	5/3/1999			
Gender	Male / Female			
Contact No.	H/P :		Home : Office :	
Address				
Driver have any own vehicle	No, If yes, Reg No.			
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? Bukit Panjang NPC			
Vehicle B No.	G8E3848B		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	Left portion			
Camera Recorder	Yes / (No)			
Email Address				
PARTICULAR WORKSHOP	Twincor Automotive Pte Ltd			
CONTACT NO.	6842 0051 / 6744 0510			
CONTACT PERSON	Brandon			
FAX NO	6741 0510			
WORKSHOP Email ADDRESS	Sales @ n51.com.sg			



SINGAPORE POLICE FORCE



T/20200921/2046

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

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Report No. T/20200921/2046

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/09/2020 12:44	Vide Report No.:	Station Diary No.: 59
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Informant's Particulars			
Name of Informant: ONG BOON TIN		Address: APT BLK 223 PENDING ROAD #09-109 SINGAPORE 670223	
ID Type / ID No.: NRIC NO / S7607872F		Contact No.: Home/Office: Mobile: 94554576	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 44	Date of Birth: 23/03/1976	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: DESIGNER		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 19/09/2020 08:15	Type of Location: Car Park
Location: PENDING ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
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
GBE3848B	Van			White		0
SJF7397J	Car	TOYOTA	RUSH 1.5X A	Red	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJF7397J	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000597 22004	10/06/2020	09/06/2021



**SINGAPORE
POLICE FORCE**



T/20200921/2046

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Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

Report No. T/20200921/2046

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ONG BOON TIN	ID No.	S7607872F
Related Vehicle	NIL	Contact No.	94554576
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

Brief Details.

On 18/09/2020 at about 0718hrs, I had parked my car, V1) SJF 7397J at Blk 223 Pending Road open space carpark near to the motorcycle lot area. I affirmed everything was intact. On 21/09/2020 at about 0655hrs, I went to retrieve my car and discovered that my left front door was damage and there were dents and scratches on the left front side.

One of my neighbor had approached me and informed that there was a white van, V2) GBE 3848B had bang onto my car while it as reversing into the lot next to my car. It had happened on 19/09/2020 at about 0815hrs. Subsequently, after he had bang onto my car, the driver drove off and left the scene. My neighbor had witnessed it and had took a picture of the van.



**SINGAPORE
POLICE FORCE**



T/20200921/2046

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Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999



Report No (T/20200921/2046)

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: J / Sgt 3 MUHAMMAD FADZIL BIN ROHAIZAD	Signature Of Informant:  21/09/2020
Signature Of Interpreter: Not applicable	Date/Time: 21/09/2020 12:44
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:
Authentication Stamp NP168	 SIGNATURE

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA120083094 Vehicle Registration No: SJF7397J
Name(as shown in NRIC) : ONG BOON TIN (WANG WENZHEN) MRS MOH-ONG BOON TIN NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : 94554576
Email Address : _____
Date of Accident : 19/09/2020 Time of Accident : 08:15
Place of Accident : BLK 223 PENDING RD OPEN SPACE CARPARK
Insurance Company: China Taiping Insurance (Singapore) Pte. Ltd.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend gender _____

Policyholder / Driver's Signature
Date:

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

Motor Private Car

MX1F

R SN

AN0420A

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.

DMPCSNW00059722004

Engine No.: 3S22119780

Cha. No.: J200E0021932

 1. Index Mark and Registration
 Number of Vehicle

SJF7397J

 AUTOSAFE
 =====

2. Name of Policy Holder

ONG BOON TIN MRS MOH-ONG BOON TIN

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

10/06/2020

Named Drivers Ex Sect. I S\$500.00

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

09/06/2021

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.: GE MONEY PTE 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: INXPRESS INSURANCE AGENCY PTE LTD
 Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorised Signatory