

# Assessment Centre Services.

Just a Jot! MAA/2083680

25/09/2020 15:43

X/BA/MS/900/031814

or SKW 6185

24/09/2020 08:10

(1) Reporting Only

TP Insurer:

Job description

Date & Time Completed

Done by

SAS e-Milling

E-mail (Update this, AIG this)

I-Motor Claims Form

I-Motor W/O (With/Out OD this, TP this)

I-Photo Uploaded

Assessment/Survey Report

Ass't Report by Fax / Hand to Owner / When

Preferred Wkep / INC Assign Wkep / OW: (

Tel:

Fax:

TP Ins/Ins/Ins:

Veh No:

SLT 1387.E

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 ( )

( ) Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repair.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo (Repair Cost > \$3000) ( )

Injury:

X/172005126

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

1) AIT Accident Reporting (\$30)	
2) DA1 Damage Assessment (\$100)	INC (\$10)
3) TP1 Towing Fee	\$105.45
4) PT1 Follow-Through Survey	\$120
5) PT1 Follow-Through Survey (Resurvey)	\$30
6) TP1 Pa-Inspection	\$75
7) NI1 IDAO DA + SMRT Survey	\$160
8) NTUC Additional Services	
9) NI1	
• NI1 Courtesy Car / Tpl Allowance	\$3
• NI1 Repair Coordination	\$10
• NI1 Post Repair Inspection	\$23
• NI1 DV / Collab Through Coordination	\$3
• TP1 (NI1) TP (NI1) INC	\$10
2) NI1 IDAO IDAO	

Invoice dated

Fee Charged

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	25/09/2020 15:43
Date Of Accident	24/09/2020 08:10
Exact Location Of Accident	ALONG PIE TOWARDS CHANGI NEAR BUKIT TIMAH EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW618S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NG HOE SOON
NRIC No	SXXXX929E
Email Address	PINTECHNOLOGY@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97318069
Alternative Phone No	OTHERS-97318069

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 CVT (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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 300186226 QMY
Cover Note Number	

### Driver

Name of Driver	NG HOE SOON
NRIC No	SXXXX929E
Date Of Birth	15/01/1965
Occupation	INDOOR
Date Of Driving Pass	11/02/1985
Driving Experience	35 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97318069
Fax Number	
Contact Number	OTHERS-97318069
Email Address	PINTECHNOLOGY@YAHOO.COM.SG

Address	BLK 421 PASIR RIS DRIVE 6 #06-521
Postcode	510421
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	4
Was any body injured in the Accident?	YES
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)	1

#### 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

PLEASE REFER TO SKETCH PLAN

#### 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	SLT1387E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ONG KOK SOON ANDREW
NRIC/Passport Number	SXXXX327Z
Contact Number	97476081
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMT8966B
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Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SAMSURI BIN OSMAN
NRIC/Passport Number	SXXXX636E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLW7275P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	NG HOE SOON
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SKW618S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	




## 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:

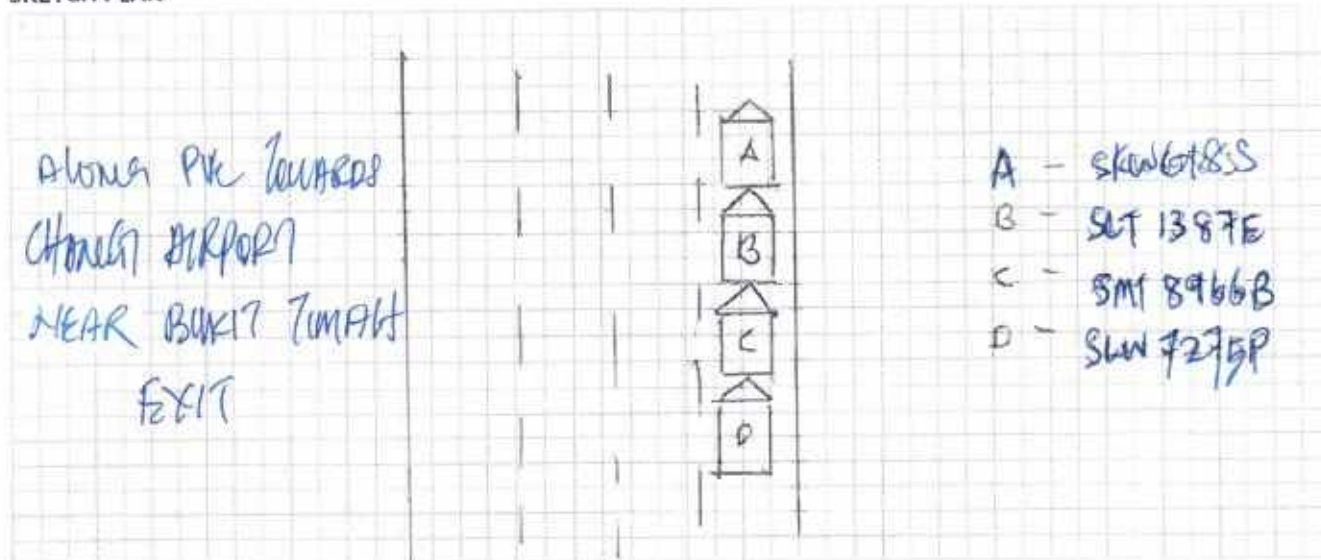
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 24/09/2020  
1600pm

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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER STATED TIME 8 PMG, I WAS DRIVING ALONG PK

TOWARDS CHANGI NEAR BUKIT TIMAH EXIT, THE TRAFFIC WAS SLOW & CONGESTED

I WAS DRIVING ON THE FIRST LANE. SUDDENLY, I HEARD A BANG

AS VEHICLE B FROM BEHIND REAR ENDED MY VEHICLE A. WHOV I

BLIGHT FROM THE CAR, I NOTICED IT WAS A 4 VEHICLE CHAIN COLLISION.

THE IMPACT OF THE INCIDENT DAMAGES MY REAR SIDE OF THE VEHICLE


BUT NOBODY WAS SERIOUSLY INJURED. ALL THE ACCIDENT RELATED VEHICLES


EXCHANGE OUR PARTICULAR AND THEN MOVE OFF FROM THERE.

THIS IS A TP CLAIM, PLEASE EMAIL THE GIA REPAIRS TO ENQUIRY@FORWARD.SG

## 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: 24/08/2020  
1600hr -

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



# ACCIDENT STATEMENT

Date of accident: 24/1/2020 Time: 0810H  
 Location of accident: ALONG PIE TOWARDS CHANGI AIRPORT NEAR BUKIT TIMAH FRT

## Details of Own Vehicle

Vehicle Number: SKW 6183 Make/Model: TOYOTA COR  
 Insurer: MSB INSURANCE Passenger (incl. Driver): 1  
 Policy No: A 28827231 GMY Policy Type: TPFT/TPO

### Policyholder

Name: NG HOE SOON NRIC/FIN no.: S16979296  
 Contact no.: 9731 8069

### Driver

Name: NG HOE SOON NRIC/FIN no.: S16979296  
 Contact no.: 9731 8069 D.O.B: 15/1/1985  
 Email: PINTTECHNOLOGY @ YAHOO.COM.SG Occupation: DIRECTOR  
 Address: Blk 421 PASIR RIS DRIVE 6 SINGAPORE 510421

Driving pass date: 11/02/1985 Relationship with Policyholder: OWNER

### General Information

Weather conditions: Clear Raining  
 Police report: Yes/ No Road surface: Dry/ Wet  
 Prosecution Letter: Yes/ No Video Footage: Yes/ No  
 Injuries: Yes No If Yes, provide injuries details:-

Name	Veh No.	Seatbelt (Y/N)	Conveyed to hospital (Y/N)
NG HOE SOON	SKW 6183	Y	

## Details of Third party

	Vehicle B	Vehicle C
Vehicle no.:	<u>SLT1387E</u>	<u>SMF8966B</u>
Driver name:	<u>ONG KOK SOON ANDREW</u>	<u>SAMSURI BIN OSMAN</u>
NRIC/ FIN no.:	<u>S1412327Z</u>	<u>S1299636E</u>
Contact no:	<u>97476081</u>	
Insurance Co:		
Remarks: (Make/Model, Passenger, property info & etc)		

VEH D  
 S12072701

### Detail of Witness

	Witness 1	Witness 2
Name:		
Contact no.:		

### Claim Type & Acknowledgement

Claim Type: Own Damage/ Third Party/ Reporting Only  
 Workshop: \_\_\_\_\_

Policyholder/  
 driver  
 Signature: \_\_\_\_\_



**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
 4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 Co. Reg No. 200412212G GST Reg. No. 20-0412212G  
 A Member of **MS&AD** INSURANCE GROUP

## MOTORMAX PLUS RENEWAL CERTIFICATE

**POLICYHOLDER INFORMATION**

Name	: Ng Hoe Soon	Date of Issue	: 01/10/2019
Address	: 421 Pasir Ris Drive 6 #06-251 Singapore 510421	Policy No.	: A 300186226 QMY
		Account No.	: 3293
		Period of Insurance	: 15/10/2019 to 14/10/2020
		Premium	: SGD868.64 (inclusive of GST)

**RISK NUMBER 1****Insured Details**

Registration No.	: SKW6185	Year of Registration	: 2015
Make/Model	: Toyota Corolla Altis 1.6L CVT	Capacity	: 1598 C.C.
Engine No.	: 12RY217906	Seating Capacity	: 05 (Incl. Driver)
Chassis No.	: MR053REH104539970	Off-peak Car	: No
Financial Interest	: Hong Leong Finance Limited as Hire Purchase Owners		

**Coverage Details**

Type of Cover	: Comprehensive	Sum Insured	: Market Value at the Time of Loss
Windscreen	: Unlimited	Windscreen Excess	: SGD100
No Claim Discount	: 50%	NCD Protector	: Covered
Annual Premium	: SGD811.81	Good Driver Discount	: 5%
Excess	: SGD500 (Own Damage Excess)		
Authorized Driver(s)	: Ng Hoe Soon Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.		

**Limitations As To Use :** Use only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward 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.

**Clauses/Endorsements applicable to the above Risk**

This Policy extends to include the following endorsements and clauses subject otherwise to the terms conditions and exceptions/exclusions of this Policy:

**Automobile and Medical Assistance Services Endorsement**

The Automobile and Medical Assistance Services are arranged by Us through Our appointed assistance company to assist You in an emergency caused by or arising out of the use of the Insured Vehicle within the Geographical Area unless otherwise stated.

The caller will be required to always identify themselves by their full name and Policy number.

MSIG 24 HOUR EMERGENCY HELPLINE

(65) 6337 1208



**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 : MMA420083680 Vehicle Registration No: SKW 318S  
Name (as shown in NRIC) : Ng Hock Sarao NRIC/FIN/Passport No : XXXX929E  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore ( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 97318068  
Email Address : \_\_\_\_\_  
Date of Accident : 24/09/2020 Time of Accident : 08:10  
Place of Accident : Along Pk Tanjong Chong Niah Bt. TMAA FETI  
Insurance Company : MSA

**(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:

Policy Number to A300186226 QMY

Policyholder / Driver's Signature  
Date:

Reporting Centre Personnel's Signature  
Name: Red  
NRIC/FIN No.:  
Date: 06/10/2020