

NATIONAL Assessment Centre Services

NAF 10-10-2010

10-10-2010

Date In: 05/10/20	Job description	Date & Time Completed	Done by
Ref No. NA/CTI20010681/13	SAS e-filing		
Veh No: 5MM87085	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 05/10/20	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:

5JL9498G

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:

Date/Time

Actions

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Pat. 1:

Pat. 2 / 3:

Invoice Preparation Checklist

	Amc (\$)	Amc (\$)
Bill		Add Bill
1) AR: Accident Reporting (\$30);		
2) DA: Damage Assessment (\$100); INC (\$50)		
3) TP: Towing Fee \$40/\$45		
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:-		
ON:		
*N5: Courtesy Car / Tp Allowance	\$5	
*N6: Repair Co-ordination	\$10	
*N7: Post Repair Inspection	\$25	
*N8: DV / Collect Excess Coordination	\$5	
TE (N11): TP (Non 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	05/10/2020 16:27
Date Of Accident	05/10/2020 12:35
Exact Location Of Accident	ALONG CLEMENCEAU AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM8708S
Insured/Policyholder	
Name Of Registered Owner	ASIA EXPRESS CAR RENTAL PTE LTD
Co Reg No	2XXXXX882D
Email Address	PEIJIE@EXPRESSCAR.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-96253682

Vehicle Particulars

Manufacturer	TOYOTA
Model	NOAH
Exact Purpose for which vehicle was being used at time of accident	WORK
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 HIRE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMHCSNA00001952000
Cover Note Number	

Driver

Name of Driver	TAN CHEE YONG
NRIC No	SXXXX785A
Date Of Birth	24/05/1968
Occupation	OUTDOOR
Date Of Driving Pass	05/06/1987
Driving Experience	33 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93834289
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 213 CHOA CHU KANG CENTRAL #05-112
Postcode	680213
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	EUNOS NPP
Police Station Address	ROAD: 629 BEDOK RESERVOIR ROAD #01-1620 , POSTCODE: 470629 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20201005/2062

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH WORKSHOP
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJL9498G
Vehicle Make/Model/Colour	TOYOTA ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TEO CHEE KHOON
NRIC/Passport Number	SXXXX650F
Contact Number	93288239
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN CHEE YONG

Approximate Age

Injuries Sustain

NECK

Injured person in which vehicle?

SMM8708S

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

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:

5/10/20

Driver's Signature

(If driver is not the policyholder)

Date & Time:

5/10/20

Reporting Centre Personnel's Signature

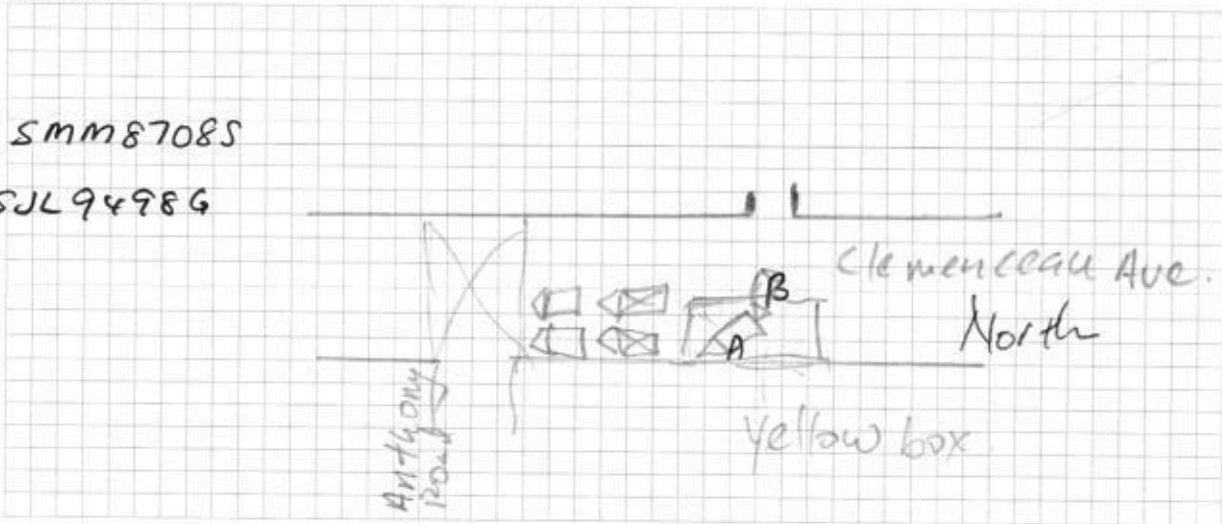
Name:

NRIC/FIN No.:

SKETCH PLAN

A- SMM8708S

B- SJL94986



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 5 Oct about 12:37 when I came out from the car park along Clemenceau Ave and stop in the yellow box while wait for a red light. the car behind SJL 94986 drove by Mr. Teo Chee Khoo. knock into the back of my car. SMM 87083.

DECLARATION

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

Policyholder's Signature

Date & Time:

5/10/20

Driver's Signature

(If driver is not the policyholder)

Date & Time:

5/10/20

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

shym 05/10/20



SINGAPORE POLICE FORCE



T/20201005/2062

Police Station Of Origin:
Eunos NPP
629 Bedok Reservoir Road #01-1620
SINGAPORE 470629
Tel No: 1800-4439999

1 of 3

Report No. T/20201005/2062

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/10/2020 15:37	Vide Report No.:	Station Diary No.: 23
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Informant's Particulars

Name of Informant: TAN CHEE YONG			Address: APT BLK 213 CHOA CHU KANG CENTRAL #05-112 SINGAPORE 680213		
ID Type / ID No.: NRIC NO / S6820785A			Contact No.: Home/Office: Mobile: 93834289		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 52	Date of Birth: 24/05/1968	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: PRIVATE HIRE			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/10/2020 12:40	Type of Location: Straight Road
Location: CLEMENCEAU AVENUE NORTH				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJL9498G	Car	TOYOTA		Silver		0
SMM8708S	Car	TOYOTA		Black	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20201005/2062

Police Station Of Origin:
Eunos NPP
629 Bedok Reservoir Road #01-1620
SINGAPORE 470629
Tel No: 1800-4439999

2 of 3

Report No. T/20201005/2062

CONTINUATION OF REPORT

Driver				
Name	TEO CHEE KHOON		ID No.	S7832650F
Related Vehicle	SJL9498G (Car)		Contact No.	93288239
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	TAN CHEE YONG		ID No.	S6820785A
Related Vehicle	SMM8708S (Car)		Contact No.	93834289
Hospital/Clinic	BALKIS FAMILY CLINIC		Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	05/10/2020		Date Discharge	05/10/2020
No. of Days granted Medical Leave	03		Degree of Injury	NIL

Brief Details.

On 05/10/2020 at 1237hrs, I was driving my car (SMM8708S) and had went our from Cairnhill Community Club into the yellow box along Clememceau Ave North as I was waiting for the red light traffic to turn green. Suddenly, a car (SLJ9498G) which was behind me and hit onto the rear of my car.

I went out of my car to exchange particulars with the driver. After the accident, I went to the clinic to make a check as I feel ache on my neck. I received 3 days of MC from the doctor.

The alignment of the rear bumper of my car was not align due to the accident. No police or ambulance was at scene.

I am lodging this report for insurance claims.



**SINGAPORE
POLICE FORCE**



T/20201005/2062

Police Station Of Origin:
Eunos NPP
629 Bedok Reservoir Road #01-1620
SINGAPORE 470629
Tel No: 1800-4439999

3 of 3

Report No. T/20201005/2062

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:

G /

Sgt 1 NORISHAM BIN KAMIZAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

05/10/2020 15:37

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTE AHMAD

Contact No.: 65476219

Classification Of Case:

Authentication Stamp

NP168

Date of Accident : 5/10/2020 Accident Time: 12:37 (24-HR-FORMAT)
Accident Place : along clarence ave.
Vehicle Reg. No (Car plate No.) : SHM87088 Vehicle Make/Model: Toyota noah
Insurance Company : Asia Express China Taiping Policy No. DMHCSNA00001952000
Name of Registered Owner : Company / Individual Asia Express Car Rental Pte Ltd
ID of Registered Owner : Co Reg No: 2011168820 Owner's NRIC No: _____
: Co Contact No: _____ Owner's Contact No: 96253682
DRIVER'S Name : Tan Chee Yong DRIVER'S NRIC No: 56820785A
DRIVER'S Date of Birth : 24/5/1968 DRIVER'S License Pass Date 5/6/1987
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Driver
DRIVER'S Address : 213 Choa Chu Kang Central #05-112 5680213
DRIVER'S Contact No./ Alt No. : 1) 93834289 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)
Email Address : peijie@expresscar.com.sg
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including Driver): 1 male
Was the accident reported to the police? YES \ NO
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

55L94984 **Other Party Driver's Particulars (if any)**

Vehicle Reg No: <u>55L94984</u>	Vehicle Reg No: _____
Vehicle Make/Model: <u>Toyota Altis</u>	Vehicle Make/Model: _____
Name DRIVER: <u>Teo chee Khoo</u>	Name DRIVER: _____
IC No. DRIVER: <u>57832650F</u>	IC No. DRIVER: _____
DRIVER'S Contact & add: <u>93288239</u>	DRIVER'S Contact & add: _____



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

MZ406L/B

N SN

BR0085A

Cov. Type:F

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. DMHCSNA00001952000 Engine No.: 2ZR2E08820
Cha. No.: ZWR800394658

1. Index Mark and Registration Number of Vehicle SMM8708S

2. Name of Policy Holder ASIA EXPRESS CAR RENTAL PTE. LTD.

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment 25/03/2020

4. Date of Expiry of Insurance 24/03/2021

5. Persons or Classes of Persons entitled to drive*
As per Named Driver(s) stated below.
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.*

- (1) Use for the carriage of passengers or goods in connection with the Policyholder's business.
(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

- (1) Use for racing, pace-making, reliability trial or speed-testing.
(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO. : SKYWAY CREDIT & LEASING 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Gan Li Jia Jesca
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com

Favordrive Car Rental
25 Kaki Bukit Road 4 #01-56 Synergy@KB Singapore 417800

03/10

Vehicle Lease Agreement -

This **VEHICLE LEASE AGREEMENT** (hereinafter referred to as 'The Agreement' is made on

Between

Favordrive Car Rental

(Business Registration No.: 53356674J)

Having its office at:

25 Kaki Bukit Road 4 #01-56 Synergy@KB Singapore 417800

Hereinafter referred to as 'The Owner' of the one part

And

Name: Tan Chee Yong

Nric No: S6820785A

Having his residential address at: Blk 213 Choa Chu Kang

Central #05-112, Singapore 680213

Tel. (Residential) : 93834289

Next of Kin Contact : 91890383

Hereinafter also known at the 'The Hirer' of the other part

Additional Driver

Name:

Nric No:

Having his residential address at:

Tel. (Residential) :

Next of Kin Contact :

Hereinafter also known as the "Additional Hirer" of the other Part

Hereby agrees that The Owner will lease to The Hirer and/or the Additional Hirer the vehicle with the below details, hereinafter referred to as 'The Vehicle' with the terms & conditions set out in The Agreement Contained herein: -

Lease Period - Renew Contract

The rental fee is hereby agreed between both parties at **S\$525 per week.**

Make & Model: Toyota Noah

Registration No: SMM8708S

Effective from: 26/10/2020 – 26/04/2021

Period: 06 Months Contract

BY SIGNING THIS AGREEMENT, YOU CONSENT TO US PROCESSING ANY PERSONAL DATA YOU DISCLOSE TO US (INCLUDING SENSITIVE PERSONAL DATA).

[The Owner's Initial & Stamps]



The Hirer and/or Additional Hirer Initial & Stamps
17-Sep-2020