

# NATIONAL Assessment Centre Services. [part 1 Jan03] SN:0920C7000B

Date In: 7/12/20 16:53	Job description	Date & Time Completed	Done by
Ref No: MA/INC 200 134731h4	SAS e-filing		
Veh No: SBR 6836 Y	E-mail (within 3hrs, A/C 2hrs)		
ICCA: 6/12/20 18:55	I-Motor Claim Form	MT/1112690001	7/12/20 17:03
UD: (P) Reporting, Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wkan		

Preferred Wksp / INC Assign Wksp / QW: (	Tel: / Fax: )
TP Particulars:	Veh No: SHD 2356 U. 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 repolar.

( ) 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: \_\_\_\_\_

Defective Actions:	

WA2100211

Driver/Owner:	
Contact No:	
Damaged Portion:	

QC Checked by (Bugr-In-Charge): \_\_\_\_\_

Auditors' Comments:

Cal 1:

3/3:

Invoice Registration Charge	Amount	Available
1) AR: Accident Reporting (\$30);		
2) DA: Damage Assessment (\$100); INC (\$30)		
3) TP: Towing Fee \$40/\$45		
4) FT: Follow-Through Survey \$120		
5) FT: Follow-Through Survey (Resurvey) \$30		
For claimant's use: INC Only (waf 10 Jan 2003)		
6) TR: Re-inspection \$75		
7) NI: Idac DA + SMRT Survey \$160		
8) NTUC Additional Services:		
ON:		
*N5: Courtesy Car / Tpt Allowance	\$3	
*N6: Repair Co-ordination	\$10	
*N7: Post Repair Inspection	\$25	
*N8: DV / Collect Excess Coordination	\$3	
TP (N11): TP (Non INC) against INC	\$20	
9) N12: Idac 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 Submission ..... 07/12/2020 16:53 (SGT)  
Date of Accident ..... 06/12/2020 18:55 (SGT)  
Exact Location of Accident ..... Crowhurst Dr, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SBR6836Y

#### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... YONG JAN LEE KENNETH MARK  
NRIC No ..... SXXXX803H  
Email Address ..... KENNETH@GTOKEN.COM  
Mobile Phone No ..... (Phone) +65-83918989  
Alternative Phone No ..... +65-83918989

#### VEHICLE PARTICULARS

Manufacturer ..... Volkswagen  
Model ..... Beetle  
Variant ..... -  
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 - Claiming third party  
Vehicle Category ..... Private car

#### INSURANCE COMPANY

Name of Insurance Company ..... NTUC  
Type of Coverage ..... ThirdParty  
Fleet Policy ..... No  
Policy Number ..... 5119482053  
Cover Note Number ..... -

#### DRIVER

Name of Driver ..... YONG JAN LEE KENNETH MARK  
NRIC No ..... SXXXX803H  
Date Of Birth ..... 12/01/1967  
Occupation ..... Indoor

Date Of Driving Pass .....	17/10/1996
Driving experience .....	24 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-83918989
Alt. Phone Number .....	+65-83918989
Email Address .....	KENNETH@GTOKEN.COM
Address .....	29 CHARTWELL DR
Address complement .....	-
Postcode .....	558723
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### 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 the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20201207/7015

#### 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 .....	SHD2356U
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	-
Contact Number .....	-

Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

## 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 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.

### 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

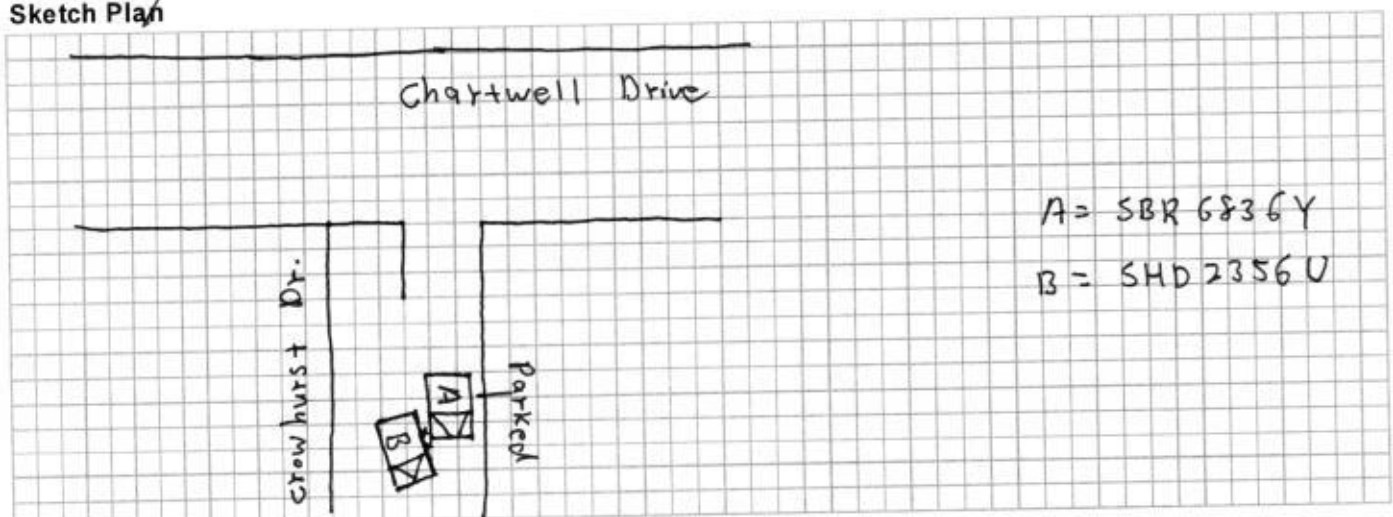
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan






**Describe Circumstances of the Accident**


Refer to Police Report T/20201207 / 7015

**Declaration**

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

  
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel



Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20201207/7015

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 07/12/2020 13:23	Vide Report No.:	Station Diary No.:
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<b>Informant's Particulars</b>			
Name of Informant: YONG JAN LEE KENNETH MARK		Address: 29 CHARTWELL DRIVE SINGAPORE 558723	
ID Type / ID No.: NRIC NO / S1795803H		Contact No.: Home/Office: Mobile: 83918989	
Nationality: SINGAPORE CITIZEN		Email: KENNETH@GTOKEN.COM	
Sex: Male	Age: 53	Date of Birth: 12/01/1967	Type of Informant: Vehicle Owner
Race: Chinese		Language: English	Institution / School Name:
Occupation: Retail/Shop sales manager		Driving Licence Information: Class: Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/12/2020 18:55	Type of Location: Straight Road
Location:  CROWHURST DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: Dual Carriage Way		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	Conditio	No of
SBR6836Y	Car	VOLKSWAGO N	beetle	Black	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SBR6836Y	NTUC Income Insurance Co-Operative	110251760	15/10/2020	14/10/2021



**SINGAPORE  
POLICE FORCE**



T/20201207/7015

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Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

Report No. T/20201207/7015

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Vehicle Owner</b>			
Name	YONG JAN LEE KENNETH MARK	ID No.	S1795803H
Related Vehicle	NIL	Contact No.	83918989
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

On 6/12/2020 around 7.20 pm my neighbor informed me that a Taxi Had hit my parked staitonary vehicle along crowhurst drive near 1, crowhurst drive..my neighbour witness the incident around 6.55pm .The taxi had driven off.He handed me the Taxi number .I went to have a look at my vehicle a 1969 Volkswagen beetle SBR 6836Y and the front bumper was bent and badly damaged.The front right fender as also hit with some scruff marks. I then called 999 to report a hit and run and was informed by the operator to stay at the location and traffic police would be informed. Around 15 minutes had passed while waiting and looking at my vehicle , the Taxi A toyota SHD 2356U appeared and the driver one Mr.Razak Bin Idris came and apologize for hitting my vehicle.He said that he had a moment of lapsed judgement .He asked if we could settle amicably however I did tell him that due to the age of my vehicle parts would not be easily available and had to be imported. It may cost .

A traffic police officer showed up and I inform the officer that the Taxi driver showed up and apologize .The officer took our accounts of the incident and the taxi driver did admit his mistake. As there were no injuries the officer advise us to make a report and we could decided to claim insurance if we wanted. The driver and myself exchanged information and had decided to claim insurance. This report is true and concise to my knowledge.





SINGAPORE  
POLICE FORCE



T/20201207/7015

3 of 3

Report No. T/20201207/7015

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
NG BEIFENG  
Contact No.: 65476845

Authentication Stamp

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
07/12/2020 13:23

Classification Of Case:

## 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:** 5119482053

**Cover :** Third Party

1. Index mark and Registration Number of Vehicle : **SMF1091U**  
Chassis Number : 119251769
2. Name of Policyholder : **YONG JAN LEE KENNETH MARK**
3. Effective Date of Insurance : 15 Oct 2020
4. Expiry Date of Insurance : 14 Oct 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.

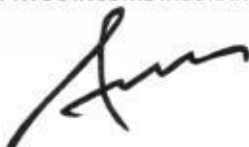
# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

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	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: <b>YONG JAN LEE KENNETH MARK</b>
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : KHC HOLDINGS PTE LTD (00000613934)  
Date of issue : 15 Oct 2020 13:45 hrs

**For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED**



Chief Executive

10 Sin Ming Drive Singapore 575701

www.lta.gov.sg

19 Oct 2020

Our ref 1910200401N014069238

YONG JAN LEE KENNETH MARK  
29 CHARTWELL DRIVE  
SINGAPORE 558723

000952



Dear MR YONG JAN LEE KENNETH MARK

**NOTIFICATION OF SUCCESSFUL AMENDMENT OF VEHICLE SPECIFICATION FOR  
VEHICLE NO. SBR6836Y**

We wish to inform you that we have updated the following specification(s) for your vehicle, SBR6836Y, with effect from 19 Oct 2020. The Business Transaction Reference No. is 20201019152845832878.

<b>Vehicle Details:</b>	<b>Original Specifications</b>	<b>New Specifications</b>
Primary Colour :	Red	Black

2. The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

1. Name	: YONG JAN LEE KENNETH MARK
2. Identification No. Type	: Singapore NRIC
3. Identification No.	: SXXXX803H
4. Country/Region	: -
5. Vehicle No.	: SBR6836Y
6. Vehicle Type	: P10 - Passenger Motor Car
7. Vehicle Scheme	: Classic Vehicle
8. Vehicle Make	: VOLKSWAGEN
9. Vehicle Model	: 1300
10. Remarks	: To renew the COE, the Prevailing Quota Premium payable is that of Category A.

# Annex A

Transaction ref 20201019152845832878

The owner and vehicle particulars for Vehicle No. SBR6836Y as at 19 Oct 2020 are as follows:

1. Name	: YONG JAN LEE KENNETH MARK
2. Identification No. Type	: Singapore NRIC
3. Identification No.	: SXXXX803H
4. Country/Region	: -
5. Vehicle No.	: SBR6836Y
6. Previous Vehicle No.	: -
7. Effective Date of Ownership	: 16 Oct 2020
8. Original Registration Date	: 27 Mar 1969
9. First Registration Date	: 27 Mar 1969
10. Vehicle Type	: P10 - Passenger Motor Car
11. Vehicle Scheme	: Classic Vehicle
12. Attachment 1	: No Attachment
13. Attachment 2	: -
14. Attachment 3	: -
15. Vehicle Make	: VOLKSWAGEN
16. Vehicle Model	: 1300
17. Year of Manufacture	: 1969
18. Primary Colour	: Black
19. Secondary Colour	: -
20. Passenger Capacity	: 4
21. Chassis/Trailer Chassis No.	: 119251769
22. Propellant	: Petrol
23. Engine No./Motor No.	: F1527691
24. Engine Capacity(cc)/Power Rating(kW)	: 1,285.0
25. Maximum Power Output(kW/bhp)	: - / -
26. Unladen Weight(kg)	: 0

## ACCIDENT STATEMENT

ACCIDENT DATE: ( 6 / 12 / 20 ) (DD/MM/YYYY), TIME: ( 18 : 55 ) (HH:MM)

LOCATION: Crowhurst Drive

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SBR 6836Y  
b) INSURANCE COMPANY: \_\_\_\_\_  
c) POLICY NUMBER: \_\_\_\_\_  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: Volkswagen beetle 1300 Auto  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: Parked  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

### 2. INSURED / POLICY HOLDER

- A) NAME: Yong Jan Lee Kenneth <sup>mark</sup> (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 83918989  
c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

#### DRIVER

- a) NAME: As Above (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\*d) DATE OF BIRTH: (\_\_\_\_/\_\_\_\_/\_\_\_\_) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: \_\_\_\_\_

### 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

### 5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

### 6. WAS ANYBODY INJURED (YES / NO)

### 7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Traffic Police

### 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SHD 2356U MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: \_\_\_\_\_  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

### 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

Waiting veh take

photo

Email =

fax =

video = No