

# NATIONAL Assessment Centre Services.

(wef 1 Jan'05)

LN392-064000A

Date In: 17/12/20	Job description	Date & Time Completed	Done by
Ref No: NA/INC2001456724	SAS e-filing		
Veh No: JMDY257A	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 16/12/19:10	i-Motor Claim Form	17/12/20 17:33	
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: unknown

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

NA200103	Invoice Preparation Checklist	Ant (\$) Est Bill	Ant (\$) Add Bill
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		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments:-	TP (N11): TP (Non INC) against INC \$20		
at 1:	9) N12: Idac Mobile \$0		
at 2 / 3:	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 ..... 17/12/2020 17:29 (SGT)  
Date of Accident ..... 16/12/2020 19:10 (SGT)  
Exact Location of Accident ..... 201E Tampines Street 23, Singapore 527201  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMD4257A

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... TAN WEI PING, CALVIN (ZHENG WEIPING)  
NRIC No ..... SXXXX790C  
Email Address ..... ctwp88@gmail.com  
Mobile Phone No ..... (Phone) +65-92728018  
Alternative Phone No ..... +--

### VEHICLE PARTICULARS

Manufacturer ..... Kia  
Model ..... Cerato  
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 - Reporting only  
Vehicle Category ..... Private hire

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5112899729-01  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... TAN WEI PING, CALVIN (ZHENG WEIPING)  
NRIC No ..... SXXXX790C  
Date Of Birth ..... 16/08/1988  
Occupation ..... Outdoor



Date Of Driving Pass .....	04/12/2007
Driving experience .....	13 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-92728018
Alt. Phone Number .....	+--
Email Address .....	ctwp88@gmail.com
Address .....	41 JALAN MARIAM
Address complement .....	-
Postcode .....	509319
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 .....	Collision - Major/Minor Rd
Weather Conditions .....	Raining
Road Surface .....	Wet

#### 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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
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 .....	Pasir Ris Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18005852999
Alt. Police Station Phone No .....	(Fax) +65-65855261
Police Station Address .....	1 Pasir Ris Drive 4 #01-01 Singapore 519457
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT - T/20201216/2146.

#### 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 .....	UNKNOWN
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
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) ..... -

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	TAN WEI PING, CALVIN (ZHENG WEIPING)
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	BODY
Injured person in which vehicle? .....	SMD4257A
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No




## SKETCH PLAN

### IMPORTANT NOTICE

- 1) Please report correctly the details of the accident to speed up the claims process.
- 2) This Form must be completely 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 fact 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 as 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 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) in this accident shall be collectively referred to as the "**Insurers**"). The Insurers' lawyer/ 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 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 or corresponding, statement, invoices, reports, or notices to me, which could involve disclosure of certain personal data about me to bring 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 Insurer's lawyers/ law firms, may/ are permitted to collect, use or 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 lawyer/ 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 purposed stated, or;
  - ii. For complying with the requirements under any regulations, law or court orders.

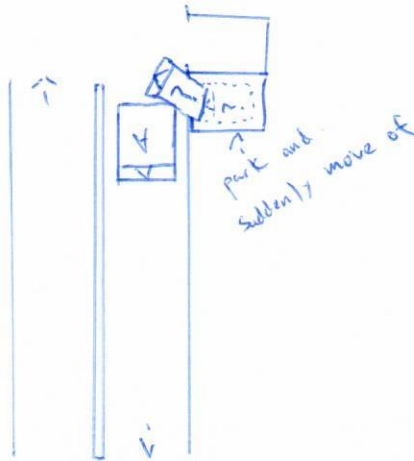
  
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN

Turpines st 23 11K 2015



Veh A : SMD425TA

Veh B : unknown

Refer to police report T/2020/215 / 2146

**DECLARATION**

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

Policyholder's Signature  
Date & Time:

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

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



Date of Accident : 16/12/2020 Accident Time: 1910 (24-HR-Format)  
Accident Place : Tampines Street 23 blk 201E  
Vehicle No. (Car Plate No.) : SMD 4257A Make/Model: Kia Cerato ex forte 1.6L  
Insurance Company : NTUC Policy No: 5112899729-01  
Owner or Company Name /IC No. : Teh wei ping, calvin (zheng weiping) (S8829740C)  
Owner or Company Contact No. : 92728018 Owner's Hp - Company Tel  
DRIVER'S Name / IC No. :  
DRIVER'S Date Of Birth : 16/8/1988 DRIVER'S License Pass Date 4/12/2007  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner  
DRIVER'S Address : 41 Jalan Makiam 5509319  
DRIVER'S Contact No./ Alt No. : 1) ~ 2) -  
DRIVER'S Occupation : INDOOR (OUTDOOR) (e.g. working inside or outside office)  
Email Address : CTWP88@gmail.com  
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): 01  
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  
Any Injury (if YES, Pls state):

Other Party Driver's Particular (if any)

Vehicle No: ?	Vehicle No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:

G13 Accidentreporting@gmail.com



# SINGAPORE POLICE FORCE



T/20201216/2146

1 of 4

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

Report No. T/20201216/2146

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 16/12/2020 23:46		Vide Report No.:		Station Diary No.: 96	
<b>Informant's Particulars</b>					
Name of Informant: TEH WEI PING, CALVIN			Address: 41 JALAN MARIAM SINGAPORE 509319		
ID Type / ID No.: NRIC NO / S8829790C			Contact No.: Home/Office: Mobile: 92728018		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 32	Date of Birth: 16/08/1988	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Shop sales assistant			Driving Licence Information: Class: Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/12/2020 19:10	Type of Location: Car Park
Location:  TAMPINES STREET 23				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMD4257A	Car	KIA	CERATO EX FORTE 1.6L A/T ABS AB 2WD 4DR	Silver	Slightly Damaged	0

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMD4257A	NTUC Income Insurance Co-Operative Limited	5112899729-01	16/11/2020	15/11/2021





**SINGAPORE  
POLICE FORCE**



T/20201216/2146

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

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Report No. T/20201216/2146

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TEH WEI PING, CALVIN	ID No.	S8829790C
Related Vehicle	SMD4257A (Car)	Contact No.	92728018
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	16/12/2020	Date Discharge	16/12/2020
No. of Days granted Medical Leave	02	Degree of Injury	Slight
Name			
Name	KEH	ID No.	NIL
Related Vehicle	NIL	Contact No.	90682473
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 the 16/12/2020 at about 1910hrs, I was the driver of SMD4257A.

While I was travelling of along the road in the vicinity of carpark of Blk 201E Tampines St 23, I stopped my car as there was a car ahead. All of a sudden, a Red Nissan Murano, suddenly came out of the carpark lot and hit onto the left side of my rear bumper. I then alighted then I ask the driver what he was doing. He admitted that it was his fault. As there were car stacking up behind my car, I quickly took his phone number and move the car. I did not take his vehicle number or a picture of his plate number.

Initially, he offered me options to a private settlement. However, I told him that I need to consult my workshop and insurance. The driver wanted to bring me to the workshop. However, I refused as I have the right to choose. I then decided to proceed with insurance claim. When I asked him for his plate number he refused to provide me. I feel that is a hit and run. The driver is believed to be Chinese in his late 20's with a golden hair at the top.

I wish to state that his phone number is 90682473. He gave his name as Keh. I come to Pasir Ris NPC to call the person but was informed that the Traffic Police is the appropriate department to look in the report and take next course of action, if necessary. I do not have any in car camera installed. Later on, I felt a pain on neck and consult a doctor at Our Family Physician Clinic & Surgery. I was discharged with 2 days of MC.



**SINGAPORE  
POLICE FORCE**



T/20201216/2146

3 of 4

Police Station Of Origin:

Pasir Ris N.P.C

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

Report No. T/20201216/2146

**CONTINUATION OF REPORT**

Since then, he blocked me on WhatsApp and have not provide the necessary detail. Hence, I am lodging report against him.





**SINGAPORE  
POLICE FORCE**



T/20201216/2146

4 of 4

Police Station Of Origin:

Pasir Ris N.P.C

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

Report No. T/20201216/2146

**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 2 MUHAMMAD IQBAL BIN JUNAIDI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt NEO ZHI YUAN

Contact No.: 65476079

Signature Of Informant:

Date/Time:

16/12/2020 23:46

Classification Of Case:

Authentication Stamp

NP168



SINGAPORE  
POLICE FORCE

## 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:** 5112899729-01

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SMD4257A**  
 Chassis Number : KNAFU411MA5138063
2. Name of Policyholder : TEH WEI PING, CALVIN (ZHENG WEIPING)
3. Effective Date of Insurance : 16 Nov 2020
4. Expiry Date of Insurance : 15 Nov 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 or Hirer's business.

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) 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.

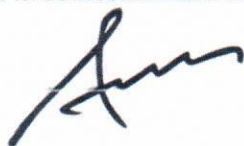
EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: NO
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TEH WEI PING CALVIN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: ABWIN PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE LESS RESIDUAL COE/PARF VALUE AT TIME OF LOSS

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 : INSUREMYCAR.COM.SG (00000615275)

Date of Issue : 12 Nov 2020 10:52 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive



eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.  Date of Accident

Vehicle No.(For Motor)  Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5112899729-01		TEH WEI PING, CALVIN (ZHENG WEIPING)	S8829790C	GPC	drive CLASSIC	SMD4257A	SMD4257A	16/11/2020	15/11/2021

## ▼ Policy Information

Policy No.	5112899729-01	Policyholder Name	TEH WEI PING, CALVIN (ZHENG	Policyholder NRIC	S8829790C
Certificate No.					
Address	41 JALAN MARIAM SINGAPORE 509319				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	12/11/2020	Effective Date	16/11/2020 00:00	Expiry Date	15/11/2021 23:59
Excess Type	Per Accident	All Claims Excess			
Third Party Excess	1500	Own damage Excess	2000	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000	Outside Singapore TP Excess	1500		Young/Inexperience Driver Excess
Agent	INSUREMYCAR.COM.SG	Agent Tel.	83669933	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

## ▼ Policyholder Mailing Address

Address 1	41 JALAN MARIAM	Address 2	SINGAPORE 509319	Address 3	
Address 4		Address Type	Singapore address	Post Code	509319
Unit No.		Related Policy Number	5112899729-01		

## ▶ Insured Object: SMD4257A

## ▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
<div>Continue Cancel</div>				



## Claim Handling

Accident MT/1114058

Policy No.	5112899729-01	Vehicle No.	SMD4257A	GST Registration No.	
Certificate No.					
Policyholder Name	TEH WEI PING, CALVIN (ZHENG WEIPING)	Cover Type	drivo CLASSIC	Policyholder NRIC	S8829790C
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	92728018	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	<input type="text" value="Nc"/>
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	30	eCode Reason	
NCD Protection	No			Private Hire	Yes
<b>▼ Accident Details</b>					
Report Date	17/12/2020 17:31	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Major Minor Road
Date of Accident	16/12/2020	Time of Accident hh:mm	19:10	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	201E Tampines Street 23				
<b>▼ Total Excess Applicable</b>					
Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Covered
Additional Excess	0				
Total OD Excess Applicable	2000.00	Total TP Excess Applicable	1,500.00		
<b>▼ Benefits</b>					
<b>▼ GST Registered Information</b>					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					
<b>▼ Policyholder Mailing Address</b>					
Address 1	41 JALAN MARIAM	Address 2	SINGAPORE 509319	Address 3	
Address 4		Address Type	Singapore address	Post Code	509319
Unit No.		Related Policy Number	5112899729-01		
<b>▼ OI Driver Info</b>					
Driver Name	TEH WEI PING CALVIN	Driver Type	Main Driver	Driver DOB	16/08/1988
Unnamed driver Name		Driver NRIC	S8829790C	Driving Experience	13
Register Date of Driver License	04/12/2007	Driver Age	32	Contact No.(Home)	0
Contact No.(Mobile)	92728018	Contact No.(Office)	0	Address 3	
Address 1	41 JALAN MARIAM	Address 2	SINGAPORE 509319	Post Code	509319
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
<b>Declaration</b>					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	TEH WEI PING, CALVIN (ZHENG)	Insured NRIC	S8829790C	
Contact No.(Mobile)	92728018	Contact No.(Home)	65428638	Contact No.(Office)		
Email Address	CTWP88@GMAIL.COM	OI Vehicle Number	SMD4257A	TP Vehicle Number	UNKNOWN	
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select			
Claimant Name *		Claimant NRIC *				
Claimant Address						
Claim Description	SMD4257A / UNKNOWN ON 16 Dec 2020				Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault			
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received	
Date Registered	17/12/2020 17:33	Claim Close Date		Date Received	17/12/2020 00:00	
Report Taken By	Jackson					
<input checked="" type="checkbox"/> Print AK letter						

Save Submit

Attachment

Accident No.	MT/1114058	Claim No.	001			
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	17/12/2020 17:36			
Path *		Category *	Confidential	Urgency *	Description *	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	

Message Read

Attachment List

Attachment

Uploaded By/Date

Category

Urgency

Description

Msg Sent? (CO)



NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 17 Dec 2020 17:36

NRIC/ Driving License

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NRIC/ Driving License 2020-12-17



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SAS 2020-12-17



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NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 17 Dec 2020 17:33

Photos

Normal

Photos 2020-12-17

Video List

Uploaded By/Date

Folder Date

File Name

Source

Action

Display in New Window

Scan and uploading

Send Message