

NATIONAL Assessment Centre Services

[Ref: J2-102]

Page 1 of 2

Date In: 18/12/20	Job description	Date & Time Completed	Done by
Ref No. NA/FME20014126/13	SAS e-filing		
Veh No: SJ52571L	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 17/12/20 1210	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: JQNG226	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 No: 67886616)	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

NA2100375	Invoice Preparation Checklist	Amc (\$)	Amc (\$)
		Int Bill	Add Bill
Client's Particulars:	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) NI: 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		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idao 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	18/12/2020 12:15 (SGT)
Date of Accident	17/12/2020 12:10 (SGT)
Exact Location of Accident	139 Tampines Street 11, Singapore 521139
Additional Location Information	BLK 139 TAMPINES ST 11 CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS2571L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN XUE WEI
NRIC No	SXXXX549D
Email Address	des.universalkitchensolutions@gmail.com
Mobile Phone No	(Phone) +65-92298586
Alternative Phone No	+65-92298586

VEHICLE PARTICULARS

Manufacturer	BMW
Model	520i
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	Tokio Marine
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	19-MK000635-R00
Cover Note Number	-

DRIVER

Name of Driver	TAN XUE WEI
NRIC No	SXXXX549D
Date Of Birth	29/03/1988
Occupation	Outdoor

Date Of Driving Pass	14/12/2007
Driving experience	13 YEARS
Gender	Male
Mobile Number	(Phone) +65-92298586
Alt. Phone Number	+65-92298586
Email Address	des.universalkitchensolutions@gmail.com
Address	BLK 130 SIMEI STREET 1
Address complement	#09-230
Postcode	520130
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

FOREIGN VEHICLE 1

Vehicle Registration Number	JQN6226
Vehicle Category	Commercial vehicle

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20201217/2106

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	JQN6226
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	KUAN YONG SHEN
Contact Number	(Phone) +65-86969787
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

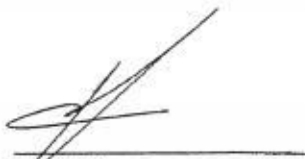
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 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.

X 

Policyholder's Signature
Date & Time:

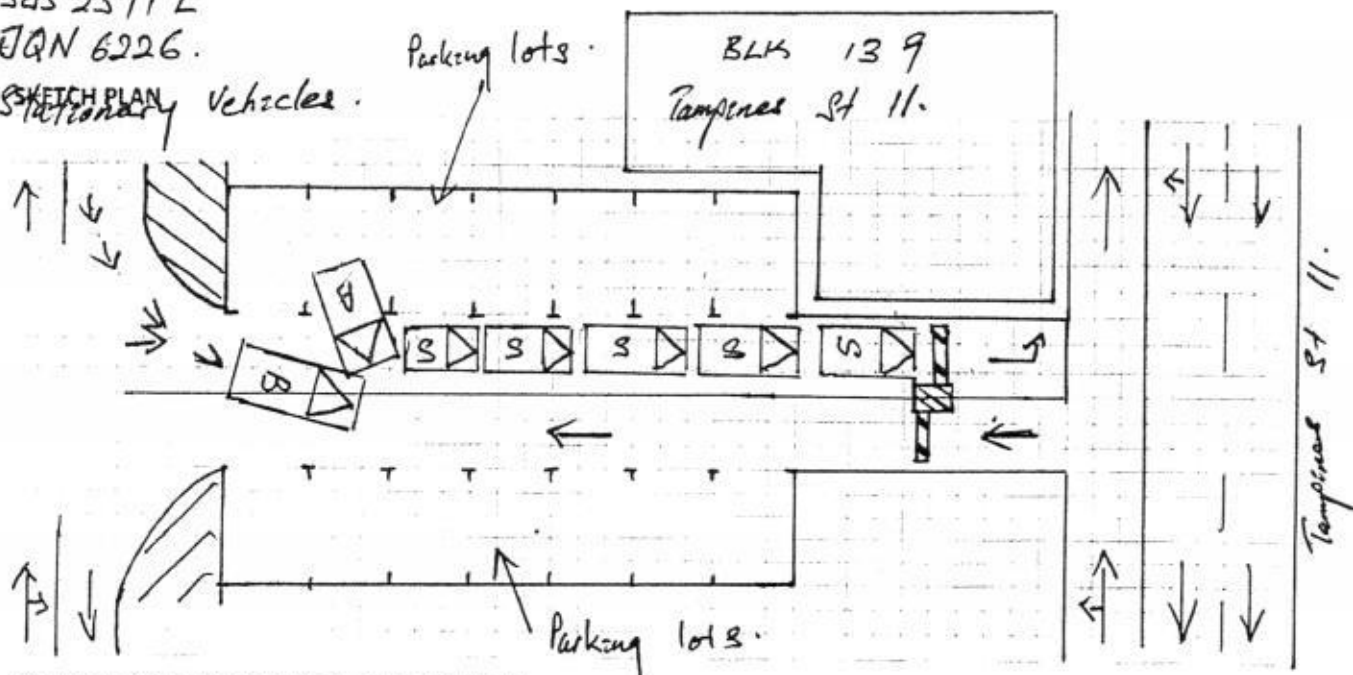


Driver's Signature
(If driver is not the policyholder)
Date & Time:

 18/12/20

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

- (A) SJS 2571 L
(B) JQN 6226.
(S) SKETCH PLAN Stationary Vehicles.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17/12/2020 at @ 1209 hrs, I driving in my vehicle (SJS 2571 L) out of the parking lot in front of BLK 139 Tampines Street 11 and was waiting in the queue as there was a jammed at the carpark exit gantry. Suddenly, a malay lorry (JQN-6226) on my right, did not see my car and collided onto the front right portion of my vehicle.

DECLARATION

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

2

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.:

shym 18/12/20



SINGAPORE POLICE FORCE



T/20201217/2106

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

1 of 4

Report No. T/20201217/2106

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/12/2020 18:46	Vide Report No.: G/20201217/0109	Station Diary No.: 63
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Informant's Particulars				
Name of Informant: TAN XUE WEI			Address: APT BLK 130 SIMEI STREET 1 #09-230 SINGAPORE 520130	
ID Type / ID No.: NRIC NO / S8810549D			Contact No.: Home/Office: Mobile: 92298586	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 32	Date of Birth: 29/03/1988	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Project Coordinator			Driving Licence Information: Class: 3,4 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 17/12/2020 12:10	Type of Location: Car Park
Location: TAMPINES STREET 11				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JQN6226	Lorry	HINO		White	Slightly Damaged	2
SJS2571L	Car	BMW	520I AUTO ABS AIRBAG 2WD XENON HEADLAMP	Silver	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20201217/2106

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20201217/2106

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJS2571L	TOKIO MARINE INSURANCE SINGAPORE LTD.	MK000635	06/08/2019	05/08/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	KUAN YONG SHEN		ID No.	NIL
Related Vehicle	JQN6226 (Lorry)		Contact No.	86969787
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 XUE WEI		ID No.	S8810549D
Related Vehicle	SJS2571L (Car)		Contact No.	92298586
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

Brief Details.

On 17/12/2020 at 1209hrs, I was driving my car bearing registration no. (SJS2571) out of the parking lot in front of Blk 139 Tampines Street 11 and was waiting in the queue to exit the open spaced carpark. There were a few vehicles in front of me at the at point of time and my car (SJS2571) was in a diagonal position as I have not drove out from the parking lot fully. Suddenly, I noticed a lorry bearing registration no.(JQN6226) turning at the T-Junction and subsequently it hit the side of my car. My car was seriously damaged as the right front bumper had fallen off from the fame of the vehicle while the lorry sustained slight scratches on the left front bumper. Subsequently, Traffic Police came to the accident location. No one was injured and no one conveyed to the hospital.

This is the first time such accident happened to me and the driver of the lorry admitted to his mistake upon interview. I would like to state that I tried to horn to warn the driver when I saw the lorry that was about to hit my car but it was too late already. I also would like to state that my car have a in-car camera but it was not working at that point of time as it had no battery. I am lodging this report for insurance purposes.



**SINGAPORE
POLICE FORCE**



T/20201217/2106

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20201217/2106

CONTINUATION OF REPORT

Vide report: G/20201217/0109.



**SINGAPORE
POLICE FORCE**



T/20201217/2106

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20201217/2106

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 2 AHMAD SUFYAN BIN AMRAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

17/12/2020 18:46

Officer In Charge Of Case:

TP / GIT /

Staff Sgt TAN JUN YAN

Contact No.: 65476311

Classification Of Case:

Authentication Stamp
NP106
POLICE FORCE
SAFE CLIPPING EVERY DAY



VEHICLE NO:	SJS 2571 L		MAKE & MODEL:	BMW 520		<input checked="" type="radio"/> AUTO <input type="radio"/> MANUAL
DATE OF ACCIDENT:	17/12/2020		CC:	J.O.		
TIME OF ACCIDENT:	1209. HRS					
LOCATION OF ACCIDENT:	BLK 139 Tampines St 11 Carpark.					
EXACT PURPOSE USED AT TIME OF ACCIDENT:	EMPLOYMENT <input checked="" type="radio"/> PRIVATE USE <input type="radio"/> PRIVATE HIRE					
NAME OF OWNER:	TAN XUE WEI					
TEL NO:	H/P: 929 8586		OFFICE:	HOME:		
NRIC:	S8810549D.					
ADDRESS:	BLK 130 Simei St 1 #09-330 (C) 520130.					
EMAIL:	des.universal.kitchensolutions@gmail.com					
CLAIM TYPE:	OD <input checked="" type="radio"/> THIRD PARTY <input type="radio"/> REPORTING ONLY					
FLEET POLICY:	YES <input checked="" type="radio"/> NO <input type="radio"/> ?					
INSURANCE COMPANY:	TOKIO MARINE					
TYPE OF COVERAGE:	Comprehensive / Third Party / <input checked="" type="radio"/> Third Party Fire & Theft					
POLICY NO:	19-MK000635-R00.					
NAME OF DRIVER:	<input checked="" type="radio"/> AS ABOVE <input type="radio"/> IF NO:					
NRIC:			ANY PASSENGER:	N.A.		
DATE OF BIRTH:	29/03/1988		LICENCE PASSED DATE:	14/12/2007.		
OCCUPATION:	<input checked="" type="radio"/> OUTDOOR <input type="radio"/> INDOOR					
GENDER:	<input checked="" type="radio"/> MALE <input type="radio"/> FEMALE					
CONTACT NO:	H/P:		OFFICE:	HOME:		
ADDRESS:						
EMAIL:						
DOES DRIVER OWNED ANY VEHICLE:	NO / IF YES, REG NO:					
RELATIONSHIP:	<input checked="" type="radio"/> INSURER <input type="radio"/> OTHER:					
WEATHER CONDITION N:	<input checked="" type="radio"/> CLEAR <input type="radio"/> RAINING <input type="radio"/> OTHERS:					
ROAD SURFACE:	<input checked="" type="radio"/> DRY <input type="radio"/> WET <input type="radio"/> OTHER:					
ANY INJURIES:	<input checked="" type="radio"/> NO <input type="radio"/> IF YES, WHO?					
NAME & CONTACT:						
NAME & CONTACT:						
POLICE REPORT:	NO <input checked="" type="radio"/> IF YES, WHERE? ~ Nanyang NPC					
NOTICE OF INTENDED PROSECUTION GIVEN?	<input checked="" type="radio"/> NO <input type="radio"/> IF YES, WHO?					
VEHICLE B REG NO:	JON 6226		ANY PASSENGERS:	02 (M).		
NAME OF DRIVER:	Kuan Yong Shen.		CONTACT NO:	8696 9787.		
VEHICLE C REG NO:			ANY PASSENGERS:			
VEHICLE D REG NO:			ANY PASSENGERS:			
VEHICLE E REG NO:			ANY PASSENGERS:			
VEHICLE F REG NO:			ANY PASSENGERS:			
VEHICLE G REG NO:			ANY PASSENGERS:			
ANY WITNESS? IF YES, NAME:			WITNESS CONTACT:			
WAS THERE ANY VIDEO CAPTURE?	YES <input checked="" type="radio"/> NO <input type="radio"/>					
WAS THERE ANY AUDIO RECORDED?	YES <input checked="" type="radio"/> NO <input type="radio"/>					
ACCIDENT SCENE PHOTOS TAKEN?	<input checked="" type="radio"/> YES <input type="radio"/> NO					
ACCIDENT PORTION:	Front right portion.					
WORKSHOP PARTICULAR:	N-51					
CONTACT NO:	68420051 / 67440510					
CONTACT PERSON:	JOSEPH TAN.					
FAX NO:	67410510					
WORKSHOP EMAIL:	sales@n51.com.sg					

Tokio Marine Insurance Singapore Ltd.

(Company Reg No: 192300014M) (GST Reg No: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tms@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

FORM MX1

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)

Policy No.: 19-MK000635-R00 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle SJS2571L Chassis No.: WBANT12080CX30153
2. Name of Policyholder TAN XUE WEI
3. Effective date of the Commencement of Insurance for the purposes of the Act 06/08/2019
4. Date of Expiry of Insurance 05/08/2020
5. Persons or Class 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. 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 or 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.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 1077DDI

Insurance Plan: Third Party, Fire & Theft
Limit for total loss or theft: Prevailing Market Value
Financial Interest: UNITED OVERSEAS BANK LIMITED

Tokio Marine Insurance Singapore Ltd.

Authorised Signature