

NATIONAL Assessment Centre Services.

Just 1 Jan 2021

SNV0821160004

Date In: 06/01/2021 11:48
Ref No: N/A/21/000220/4
Veh No: SMC 2033A
D.O.A: 31/12/2020 16:00

Job description

Date & Time Completed

Done by

SAS e-filing

E-mail (to/for, ATG, etc)

I-Motor Claims Form

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

I-Photo Uploaded

Assessment/Survey Report

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

OID: TP / Reporting Only

TP Insurer:

Preferred Wkep / INC Assign Wkep / OW: (

Tel:

Fax:

TP Particulars:

Veh No:

SJS 7667J

INC () / Non-INC ()

Tel:

Owner / Driver: (

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 rapator.

() 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:

N/A/21/00552

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

1) Alt: Accident Reporting (\$30)	INC (\$10)
2) DA: Damage Assessment (\$100)	INC (\$10)
3) TP: Towing Fee	\$120
4) PF: Follow-Through Survey	\$30
5) PF: Follow-Through Survey (Resurvey)	\$30
6) TR: Re-inspection	\$75
7) NI: Idea DA + EMRT Survey	\$160
8) NTUC Additional Services	
ON:	
• NS: Courtesy Car / Tpt Allowance	\$3
• NS: Hays: Coordination	\$10
• NS: Post Repair Inspection	\$25
• NS: DV / Collect Excess Coordination	\$3
• TP (NU): TP (K&A INC) against DAG	\$20
• NI: Idea Mobile	\$0
Invoice dated	
Invoice dated	

Fee Charged
Fee Charged

2/2

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	06/01/2021 11:45 (SGT)
Date of Accident	31/12/2020 16:00 (SGT)
Exact Location of Accident	27 Marsiling Dr, Singapore 730027
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML2033A
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MATRIX ADVANCED PTE LTD
Company Reg No	2XXXXX318G
Email Address	sajahan_knr@yahoo.com
Mobile Phone No	(Phone) +65-97730025
Alternative Phone No	+65-92777944

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5110895607-01
Cover Note Number	-

DRIVER

Name of Driver	NOORMOHIDEEN SHAJAHAN
NRIC No	SXXXX651F

Date Of Driving Pass	01/06/2011
Driving experience	9 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92777944
Alt. Phone Number	-
Email Address	sajahan_knr@yahoo.com
Address	BLK 522A TAMPINES CENTRAL 7 #07-07
Address complement	-
Postcode	521522
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Collided into Parked Vehicle
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)	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?	No
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	SJJ7667J
Vehicle Manufacturer	Lexus
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIM CHEE KEONG
NRIC No	SXXXX585E
Contact Number	(Phone) +65-91888881
Address	-
Address complement	-

Insurance Company Name _____
Nature Of Damage _____
Details of property damaged in accident _____
No. Of Passenger (Including Driver) _____

SKETCH PLAN

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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**.
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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



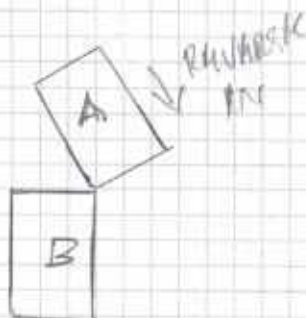
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

NICAR BIK 27 MARSLING GRADEN CORPARK



A - SML 2033A

B - SJJ 7667J

Describe Circumstances of the Accident

I Try to Park my car into the Parking Lot,
My Left side got Parked
car. I missed to double check the side
mirror. only focus the Reverse Camera.
my car Left behind bumper hit the
parked car Front Right Front Side.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

N. S. S. S. 05/01/2021 16:35

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

[Signature] 06/01/2020

Witnessed by Reporting Centre Personnel

ACCIDENT STATEMENT

ACCIDENT DATE: 31/12/2020 (DD/MM/YYYY), TIME: 16:20 (HH:MM)
NKAR BITE 27

LOCATION: HPS Marsiling Green car Park

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SML 2033A
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: 5110 895607-01-000004
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: TOYOTA SINETA
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: WORKING
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: MATRIX ADVANCED PTE LTD (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 201127954R CONTACT: 9773 0025
c) ADDRESS: AMA BUILDING, KALLANG PUDDING RD
BLK 50, S-349 226

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: NOORMOHIDEEN SHAJAHAN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S2961651F CONTACT: 92777944
c) ADDRESS: BLK 522A TAMPINES CENTRAL 7
#07-07, 521522

* d) DATE OF BIRTH: (27/05/1979) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:

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:

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SJT 7667J MODEL: LEXUS
b) DRIVER'S NAME: LIM CHEE KEONG
c) NRIC/FIN/PASSPORT: S2632585E CONTACT: 9186 8881

9. THIRD PARTY VEHICLE

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

Email: Sajahan.kn@yahoo.com

VIDEO



ALPHA EXCELLENCE PTE LTD

50 Kallang Pudding Road, Unit 04-01,
AMA Building, Singapore 349326.
Email: alphaexc@gmail.com
Tel: +65 62080014 HP: 97730025

Reg no: 201127934R

VEHICLE HIRE AGREEMENT

The Agreement made on 01-12-2020 between **ALPHA EXCELLENCE PTE LTD**
and NOORMOHIDEEN SHAJAHAN holding the NRIC no: S7961651F
for the period of 01-12-2020 to 30-04-2021 for hiring the vehicle.
Customer Mobile no: 92777944 Customer Emergency contact no:

Description of the Motor Vehicle	Make: TOYOTA	Model: SIENTA 1.5 CVT STD
Year: 2017	Deposit Amount: 500	Payment due date: EVERY TUESDAY
Vehicle Reg No: SML 2033A	Policy no: 5110895607	Expiry date: 08-JULY-2021
Insurance Company: NTUC		

Date OUT: 01-12-2020

Time OUT: 10:00 AM

Mileage: 142345KM

The Hirer hereby agrees to pay to owner daily / weekly / monthly / term rental of SGD 360/-
which starts from 01-12-2020. Hirer agrees to own the vehicle for agreement period of 5 months
from above date. If terminate the agreement before the end date, hirer will not get the deposit amount and
other than that additional penalty fee of Sgd 300 must be pay together with above stated.

If Hirer fails to make a payment on or before its due date, a late fee of 5 % shall be added to the balance due
and shall be payable immediately.

It is the customer responsibility to inspect the vehicle upon collection. He/She should take photographs of any
existing scratches and dents and whatsapp within 30 mins to +65 97730025 after the collection of the vehicle.
repair charges will be imposed if the customer fail to do/ new damage if any when the vehicle is being
returned.

*In case of breakdown in Malaysia, hirer responsibility to beware the cost for towing Singapore.

*Insurance Excess amount must be paid in full before the customer is able to do an accident report.

1st party Excess: \$2000.00

3rd Party Excess: \$2000.00

Malaysia Excess: \$3500.00

*Smoking is prohibited in the vehicle. Cost of \$200 will be charged if the car is returned with cigarette smoke
smells an ashes.

*Cost of \$100 will be charged if the PH Decal is being defaced or damaged.

LOAN CAR DELIVERY		
DEALER LOAN CAR INS. CARD & ACCIDENT PROC'S	GAS TANK RELEASE LEVER	IGNITION KEY RELEASE BUTTON
OWNER'S MANUAL	DOOR LOCKS	WINDOW/SUNROOF CONTROLS
SEAT/MIRROR/STEERING CLMN. ADJ.	HOOD RELEASE	TRANSMISSION CONTROLS
RADIO/CASSETTE DECK CONTROLS	WINDSHIELD WIPER/WASHER	PARKING BRAKE
A/C & HEATER CONTROLS	HEADLIGHTS & EMERG. FLASHER	SEAT BELTS

LOAN CAR CHECK IN LIST	
COMPLETE BEFORE CLOSING WORK ORDER	
CHECK EXTERIOR FOR DAMAGE (DENTS/SCRATCHES). INCLUDE MIRRORS, BUMPERS, AND LIGHTS.	DATE IN: _____
CHECK INTERIOR FOR DAMAGE AND CLEANLINESS. INCLUDE TRUNK.	TIME IN: _____
CHECK FOR MISSING EQUIPMENT (RADIO, SPARE TIRE/WHEEL, JACK/TOOLS, OWNER'S MANUAL).	ODOMETER IN: _____
NOTE CUSTOMER COMMENTS ON VEHICLE OPERATION.	CHECKED IN BY: _____

Claim Handling

Accident MT/1116206

Policy No.	5110895607-01	Vehicle No.	SML2033A	GST Registration No.
Certificate No.	5110895607-01-000004			
Policyholder Name	MATRIX ADVANCED PTE LTD			Policyholder NRIC
Product Code	FLEET MASTER INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	TCA	<input type="radio"/> No <input checked="" type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

▼ Accident Details

Report Date	05/01/2021 17:54	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	31/12/2020	Time of Accident hh:mm	16:00	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	MARSILING GREEN OPEN SPACE CARPARK LOT 5			

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00	
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00	
YIED OD Excess		YIED TP Excess		Driver is Covered?
Additional Excess				
Total OD Excess Applicable	2000.00	Total TP Excess Applicable	1,500.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	05/01/2021 17:55:15 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	BLK 613B #06-1370	Address 2	BEDOK RESERVOIR ROAD	Address 3
Address 4	SINGAPORE 472613	Address Type	Singapore address	Post Code
Unit No.	06-1370	Related Policy Number	5117944498	

▼ OI Driver Info

Driver Name		Driver Type		Driver DOB
Unnamed driver Name		Driver NRIC		Driving Experience
Register Date of Driver License		Driver Age		Contact No.(Home)
Contact No.(Mobile)		Contact No.(Office)		Address 3
Address 1		Address 2		Post Code
Address 4		Address Type	Foreign address	
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Comp.

Modification History

Claim 002

New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop	<input type="text"/>	Insured Liability	Fully at Fault	
Repair No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered			Received	
Report Taken By				
<input type="checkbox"/> Print AK letter				

OD-MX	Insured Name	MATRIX /
97730025	Contact No. (Home)	
	Vehicle Number	SML2033

SML2033A / 5117667 ON 31 Dec 2020

06/01/2021 12:03	Claim Close Date	
ROSLI WAHAB		

Save Submit

Attachment

Accident No. MT/1116206 Claim No. 002
 Last Doc. Received ☒ Yes ☐ No Upload Date 06/01/2021 12:03

Path *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Remove All

Clear

Category *

Please Select

Confidential

NO

Clear

Please Select

NO

Clear

Please Select

NO

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NO

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NO

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Please Select

NO

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	Photos		Normal	Photos 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	NRIC/ Driving License	Y	Normal	NRIC/ Driving L
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 06 Jan 2021 12:03	SAS		Normal	SAS 21

Video List

Uploaded By/Date

Folder Date

File Name



Display in New Window

Scan and uploading

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: 5110895607-01-000004

Cover : drive CLASSIC

- | | |
|---|-------------------------|
| 1. Index mark and Registration Number of Vehicle | SML2033A |
| Chassis Number | MHFZ28H3200029664 |
| 2. Name of Policyholder | MATRIX ADVANCED PTE LTD |
| 3. Effective Date of Insurance | 09 Jul 2020 |
| 4. Expiry Date of Insurance | 08 Jul 2021 |
| 5. Persons or Classes of Persons entitled to drive it | |
| (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	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: TAI THONG LEE TRADING (PRIVATE) LIMITED
	: MARKET VALUE OF INSURED VEHICLE 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: AUTOSHIELD PTE. LTD. (00000573469)
Date of Issue: 20 Jun 2020 14:07 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive