

# NATIONAL Assessment Centre Services.

Wef 1 Jan 05 UN139 2/18001

Date In: 8/1/05 - 17:14	Job description	Date & Time Completed	Done by
Ref No: 14/072200054/24	SAS e-filing		
Veh No: REP1734	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 1/1/05 - 18:30	i-Motor Claim Form		
OD: TP / 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/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: JMG420R	INC ( ) / Non-INC ( )
Owner / Driver: (	Tel:	
Policy No: (	Period: (	Cover Type: (
Confirmed by: (	Date:	Time:
Insured/Driver Liability: (	% [Note-Est. Status (WO): N: 0-20%; P: 21-79% F: 80-100%]	
Year of Registration: (	Warranty: YES ( ) / NO ( )	
Excess: (\$	Loading: \$1,000 ( ) / \$2,000 ( )	

General Remarks:

( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Remarks: (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury: \_\_\_\_\_

Date/Time	Actions

Claimant's Particulars: Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge): Auditors' Comments:	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
			Inc Bill	Add Bill
	1) AR: Accident Reporting (\$30);			
	2) DA: Damage Assessment (\$100); INC (\$80)			
	3) TF: Towing Fee \$40/\$45			
	4) FT: Follow-Through Survey \$120			
	5) FT: Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection \$75			
	7) N1: Idac DA + SMRT Survey \$160			
8) NTUC Additional Services:-				
QD*				
*N5: Courtesy Car / Tpl 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: Idac Mobile 30				
Invoice dated		Fee Charged		
Invoice dated		Fee Charged		



## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date of Submission	08/01/2021 17:14 (SGT)
Date of Accident	05/01/2021 13:30 (SGT)
Exact Location of Accident	484 Admiralty Link, Singapore
Additional Location Information	exit gantry
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP173U
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WONG KIN MAN
NRIC No	SXXXX923A
Email Address	kennywong8738@yahoo.com
Mobile Phone No	(Phone) +65-90492972
Alternative Phone No	+-

#### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Lancer
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	China Taiping Insurance
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	DMPCS NW00149752000
Cover Note Number	-

#### DRIVER

Name of Driver	WONG KIN MAN
NRIC No	SXXXX923A
Date Of Birth	01/03/1984
Occupation	Outdoor

Date Of Driving Pass .....	05/03/2007
Driving experience .....	13 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90492972
Alt. Phone Number .....	+--
Email Address .....	kennywong8738@yahoo.com
Address .....	BLK 421 ANG MO KIO AVENUE 10
Address complement .....	#03-1161
Postcode .....	560421
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 .....	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? .....	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? .....	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/20210108/7025.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJU920R
Vehicle Manufacturer .....	Renault
Vehicle Model .....	Megane
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	LEW YUH SUN
NRIC No .....	SXXXX314B

Contact Number .....	(Phone) +65-93752882
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:

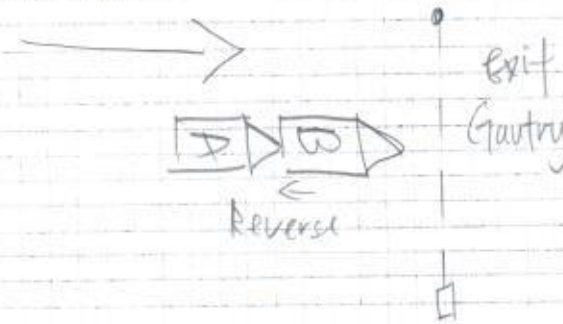
X

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

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

**SKETCH PLAN**

Normal



Vehicle A = SKP 173U

Vehicle B = STU 900R

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to the Police Report  
Report No: T/20210108/7025

**DECLARATION**

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

X

Policyholder's Signature  
Date & Time:

X

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

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



Date of Accident : 05/01/2021 Accident Time : 13:30 hrs (24HR-Format)  
 Accident Place : Bkt 484 Admiralty Link Exit Twenty  
 Vehicle Reg. No. (Car Plate No.) : SKP 173 U  
 Vehicle Make/Model : Mitsubishi Lancer 1.6 A  
 Insurance Company : China Taiping Policy No. DMPCSNW00149752000  
 Owner or Company Name/IC No. : Wong Kin Man (58465923A)  
 Owner or Company Contact No. : 9049 2972 Owner's Hp \_\_\_\_\_ Company Tel. \_\_\_\_\_  
 Driver's Name / NRIC No. : Wong Kin Man (58465923A)  
 Driver's Date of Birth : 01/03/1984 Date of Driving Pass : 05/03/2007  
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others : Owner  
 Driver's Address : Bkt 421 Ang Mo Kio Ave 10 # 03-1161 (S) 560421  
 Driver's Contact No./ Alt No. : 1) 9049 2972 2) \_\_\_\_\_  
 Driver's Occupation : Indoor ☒ Outdoor (e.g working inside or outside office)  
 Email Address : kennywong8738@yahoo.com/alphacarseries@hotmail.com  
 Weather & Road Surface : Clear & Dry \ ☒ Raining & Wet \ After Rain & Wet  
 Reporting Type : Reporting Only \ ☒ Claim Other Party \ Claim Own Insurance  
 No of Passengers (Incl. Driver) : 1.) Driver 3.) \_\_\_\_\_  
 2.) \_\_\_\_\_ 4.) \_\_\_\_\_  
 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

**Other Party Driver's Particular ( if any )**

Vehicle B Reg. No : <u>SJU 920R</u>	Vehicle C Reg. No : _____
Vehicle Make \ Model : <u>Renault Megane</u>	Vehicle Make \ Model : _____
Driver Name : <u>Lew Yuh Sun</u>	Driver Name : _____
Driver IC No : <u>S 8005314B</u>	Driver IC No : _____
Driver's Contact & Add : <u>93752882</u>	Driver's Contact & Add : _____



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

Report No. T/20210108/7025

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 08/01/2021 16:03		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: WONG KIN MAN			Address: 421 ANG MO KIO AVENUE 10 #03-1161 SINGAPORE 560421		
ID Type / ID No.: NRIC NO / S8465923A			Contact No.: Home/Office: Mobile: 90492972		
Nationality: MALAYSIAN			Email: kennywong8738@yahoo.com		
Sex: Male	Age: 36	Date of Birth: 01/03/1984	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Salesperson (door-to-door)		Driving Licence Information: Class: 3,4A Date of Expiry:			

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 05/01/2021 13:30	Type of Location: EXIT GANTRY OF BLK 484 ADMIRALTY LINK
Location:  ADMIRALTY LINK				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: REAR TO FRONT				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJU920R	Car	RENAULT	MEGANE	White	Slightly Damaged	0





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

Report No. T/20210108/7025

**CONTINUATION OF REPORT**

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SKP173U	Car	MITSUBISHI	LANCER 1.6 A	Red	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKP173U	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001497 52000	16/10/2020	16/10/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LEW YUH SUN		ID No.	S8005314B
Related Vehicle	SJU920R (Car)		Contact No.	93752882
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
Driver				
Name	WONG KIN MAN		ID No.	S8465923A
Related Vehicle	SKP173U (Car)		Contact No.	90492972
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3,4A Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

**Brief Details.**

ON 05/01/2021 AT AROUND 01.30HRS, I WAS DRIVING TOWARDS THE EXIT GANTRY OF BLK 484 ADMIRALTY LINK WHEN THERE WAS ANOTHER CAR, A WHITE RENAULT MEGANE, SJU 920R, DRIVING IN FRONT OF ME. THE SAID CAR COME TO STOP AT THE GANTRY AND AWAITS FOR THE BARRIER TO BE LIFTES. I ALSO STOPPED MY VEHICLE AND THERE WAS A GAP OF ABOUT 10 - 20 METERS BETWEEN OUR CARS. SUDDENLY, THE SAID VEHICLE REVERSING TOWARDS MY VEHICLE AND THAT WAS WHEN I FELT AN IMPACT COMING FROM THE FRONT SIDE OF MY VEHICLE. THE SAID DRIVER STOPPED FOR A MOMENT AND STEPPED OUT OF THE VEHICLE. HE THEN EXCHANGE HIS PARTICULARS WITH ME. THE SAID DRIVER -



**SINGAPORE  
POLICE FORCE**



T/20210108/7025

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Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

Report No. T/20210108/7025

**CONTINUATION OF REPORT**

MR LEW YUH SUN [NRIC NO: S8005314B] INFORMED ME THAT HE IS SORRY FOR CAUSING THE COLLISION AND WISHED TO PRIVATE SETTLE WITH ME ON THE EVEN DATE AND NOT TO LODGE GIA INCIDENT REPORT PERTAINING FOR THIS INSIDENT.

I WAITED FOR HIS REPLY SINCE 05/01/2021, I TRIED TO CONTACT HIM BUT HE MIA. I WISH TO INFORMED THAT I HAVE AN -IN- CAR DAHSCAM CAPTURING THE WHOLE INCIDENT. I AM LODGING THIS REPORT FOR POLICE'S ASSISTANCE AND CLAIMING 3P CLAIM.





**SINGAPORE  
POLICE FORCE**



T/20210108/7025

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

Report No. T/20210108/7025

**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 / TPIB /  
IRMAN BIN MOHAMAD SAID  
Contact No.: 65476145

Authentication Stamp  
NP168

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

Date/Time:  
08/01/2021 16:03

Classification Of Case:

Motor Private Car

MX1

N SN

AN0498A

Cov. Type:T

**CERTIFICATE OF INSURANCE**

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMPCSNW00149752000	Engine No.: 4G18JL2043 Cha. No.: JMYSTCS3A8U002715
1. Index Mark and Registration Number of Vehicle	SKP173U	
2. Name of Policy Holder	WONG KIN MAN	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	16/10/2020	
4. Date of Expiry of Insurance	16/10/2021	
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 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:	Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, 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.

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

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: NEO & COMPANY INSURANCE AGENCY  
Authorised Officer

Authorised Signatory