

NATIONAL Assessment Centre Services.

(over 1 Jan 2001)

SN 0821100007

Date In: 26/01/2021 18:19	Job description	Date & Time Completed	Done by
Ref No: NBSA/INC2100130814	SAS e-illing		
Veh No: F30 6893K	E-mail (by date 3hrs, A/C 2hrs)		
D.O.A: 20/01/2021 17:30	I-Motor Claim Form	27/01/2021 16:37	
QID: TP / Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner / Wksn		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: 3205G

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 ()

() 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: (

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

NA2100861

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Vehicle Comments:

Ref:

2/2

1) All Accident Reporting (\$30)

2) DA: Damage Assessment (\$100) INC (\$10)

3) TP: Towing Fee \$40/45

4) PT: Follow-Through Survey \$120

5) PT: Follow-Through Survey (Resurvey) \$30

6) TR: Re-inspection \$75

7) NI: IDA + EMRT Survey \$160

8) NTUC Additional Services

9) NTUC Additional Services

10) NTUC Additional Services

11) NTUC Additional Services

12) NTUC Additional Services

13) NTUC Additional Services

14) NTUC Additional Services

15) NTUC Additional Services

16) NTUC Additional Services

17) NTUC Additional Services

18) NTUC Additional Services

19) NTUC Additional Services

20) NTUC Additional Services

21) NTUC Additional Services

22) NTUC Additional Services

Fee Charged

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	26/01/2021 18:19 (SGT)
Date of Accident	20/01/2021 17:30 (SGT)
Exact Location of Accident	145 Jalan Bukit Merah, Block 145, Singapore 160145
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBD6893E
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WOO CHEE WAH
NRIC No	SXXXX097J
Email Address	zhihua89@hotmail.com
Mobile Phone No	(Phone) +65-82886157
Alternative Phone No	+65-82886157

VEHICLE PARTICULARS

Manufacturer	Piaggio
Model	GILERA RUNNER 200
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	Motorcycle

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	5105430112-02
Cover Note Number	-

DRIVER

Name of Driver	WOO CHEE WAH
NRIC No	SXXXX097J

Date Of Driving Pass	23/05/2017
Driving experience	3 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82886157
Alt. Phone Number	+65-82886157
Email Address	zhihua89@hotmail.com
Address	BLK 148 SILAT AVENUE #10-18
Address complement	-
Postcode	160148
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	Central Division Headquarters
Police Station Phone No	(Phone) +65-18002240000
Alt. Police Station Phone No	(Fax) +65-62200877
Police Station Address	391 New Bridge Road #03-112 Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT A/20210126/7004

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	GBE3205G
Vehicle Manufacturer	Nissan
Vehicle Model	Cabstar
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Contact Number	(Phone) +65-86229629
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' 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.

26/01/2021 1430LT

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

BK 145 JW BUKIN MARON

A) FRD 0893E

B) GBE 3205K

3 MOTORCYCLES



PARKING LOTS




PARKING LOTS

Describe Circumstances of the Accident


REFER TO POLICE REPORT A/20200126/7004

Declaration

We declare the foregoing particulars are true in every respect.

 26/01/2021 1430LT
Policyholder's Signature / Date &
Time

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

 26/01/2021
Witnessed by Reporting Centre
Personnel

ACCIDENT STATEMENT

ACCIDENT DATE: (20 / 01 / 2021) (DD/MM/YYYY), TIME: (17 : 30) (HH:MM)

LOCATION: 145 Jalan Bukit Merah

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FB26893E
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: 5105430112-02
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Piaggio Gilera Runner ST200
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME:
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: WOO CHEE WAH (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S8920097J CONTACT: 8288 6157
c) ADDRESS: 148 Slat Avenue, #10-18, Singapore 160148

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

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

* d) DATE OF BIRTH: (08 / 06 / 1989) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 10/02/2010

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: Online

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: G3E 3205G MODEL: Nissan Cabstar
b) DRIVER'S NAME: SIVA
c) NRIC/FIN/PASSPORT: CONTACT: 8622 9629

9. THIRD PARTY VEHICLE

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

Email: Zhihua89@hotmail.com

VIDEO



POLICE REPORT (NP299)

Report No. A/20210126/7004

Police Station Of Origin
Central Division HQ
A 391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 26/01/2021 01:00	Vide Report No.	Station Diary No.
Name Of Informant WOO CHEE WAH	Address 148 SILAT AVENUE #10-18 SINGAPORE 160148	
ID Type / ID No. NRIC NO / S8920097J	Contact No. Home/Office: Mobile: 82886157	
Nationality SINGAPORE CITIZEN	Email Address zhihua89@hotmail.com	
Occupation Ship agent	Sex Male	Age 31
Institution/School Name	Date of Birth 08/06/1989	Race Chinese
	Language English	
Date/Time Of Incident 20/01/2021 17:30 - 20/01/2021 18:00	Location Of Incident 145 JALAN BUKIT MERAH SINGAPORE 160145	

Brief details.

On 20/01/2021 between 5.30-6.00pm my motorcycle (FBD6893E) was parked at a parking lot infront of HDB block 145 Jalan Bukit Merah, accident happen when lorry driver Mr. Siva (Hp no. 86229629) park his lorry (GBE3205G) infront of my motorcycle lot and forget to apply his handbrake before getting off from his lorry, this caused his lorry to move forward to crash onto my motorcycle along with another 2 motorcycles.

This accident have been witness by a passerby (Hp. 94740790)

I only found out that my motorbike have been knocked down and damaged on 22/01/2021 evening and have contacted the lorry driver, the lorry driver have asked me to report this issue to insurance company

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 26/01/2021 01:00
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20210126/7004

and make a police report in order to proceed with the claim from his insurance.

Subjects Involved			
Victim			
Person Name	WOO CHEE WAH		
ID Type	NRIC NO	ID No	S8920097J
Gender	Male	Age	31
Race	Chinese	Language	English
Occupation	Ship agent	Address	148 SILAT AVENUE #10-18 SINGAPORE 160148
Mobile No	82886157	Is Informant A Victim?	Yes
Person Name	WOO CHEE WAH (Informant)		

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

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

Date/Time:

26/01/2021 01:00

Classification Of Case:

Claim Handling

Accident MT/1118970

Policy No.	5105430112-02	Vehicle No.	FBD6893E	GST Registration No.
Certificate No.				
Policyholder Name	WOO CHEE WAH			Policyholder NRIC
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	82886157	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	15	Private Hire

▼ Accident Details

Report Date	27/01/2021 16:25	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	20/01/2021	Time of Accident hh:mm	17:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	145 JALAN BUKIT MERAH			

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess		
OD Standard Excess	0.00	TP Standard Excess	0.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?
Additional Excess				
Total OD Excess Applicable	0.00	Total TP Excess Applicable	0.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	BLK 149 #13-54	Address 2	SILAT AVENUE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	13-54	Related Policy Number	5105430112-02	

▼ OI Driver Info

Driver Name	Woo chee wah	Driver Type	Main Driver	Driver DOB
Unnamed driver Name		Driver NRIC	S8920097J	Driving Experience
Register Date of Driver License	01/01/2016	Driver Age	31	Contact No.(Home)
Contact No.(Mobile)	82886157	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.	FBD6893E	Driver Insurer Comp.

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
-------------------------------------	------	-------------	---

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	WOO CHI
Contact No.(Mobile)	82886157	Contact No.(Home)	
Email Address	ZHIHUA89@HOTMAIL.COM	OI Vehicle Number	FBD6893
Claim Description	FBD6893E / GBE3205G ON 20 Jan 2021		
Preferred Workshop	Insured Liability	Not at Fault	
Contract No. Finalisation	Yes	Preferred	Preferred Workshop, Name unknown
Date Registered	27/01/2021 16:35	GIA report	Received
		Claim Close Date	

Report Taken By

ROSLI WAHAB

Print AK letter

Save Submit

Attachment

Accident No.	MT/1118970	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	27/01/2021 16:37

Path *	Category *	Confidential
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Message Read"/>		

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:37	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:37	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:36	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:36	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:36	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:36	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:36	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:35	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:35	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:35	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:35	Photos		Normal	Photos 2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:35	NRIC/ Driving License	Y	Normal	NRIC/ Driving Li
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 27 Jan 2021 16:35	SAS		Normal	SAS 20

Video List

Uploaded By/Date	Folder Date	File Name	

Display in New Window

Scan and uploading

Hello, NAC_BUKIT_MERAH_800676

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

Policy Query

Policy No.

Date of Accident

20/01/2021 14:47

Vehicle No.(For Motor)

FBD6893E

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"/>	5105430112-02		WOO CHEE WAH	S8920097J	GMC	Third Party	FBD6893E	FBD6893E	11/06/2020	10/06/2021