

SN0821210002

Preferred Wksp / INC Assign Wksp / QW: (

Confirmed by : (

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: (\$)                      )      Loading: \$1,000 (      ) / \$2,000 (      )

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

( ) 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 :*

Driver/Owner:

Contract No:

Damaged Portion:

QC Checked by (Engr-In-Charge):Architects' Commission

2111

1) All Accident Reporting (\$30)	ING (\$10)
2) DA1 Damage Assessment (\$100)	\$100.45
3) TV1 Towing Fee	\$120
4) PT1 Follow Through Survey	\$30
5) PT1 Follow Through Survey (Resurvey)	
6) TR1 Re-inspection (ING Only, w/retail to len 200)	\$75
7) NI1 ID# DA + EMRT Survey	\$160
8) NTUC Additional Service	
OR:	\$5
• NS1 Courtesy Car / Tpl Allowance	\$10
• NG1 Repair Coordination	\$25
• NR1 Post Repair Inspection	\$5
• ND1 DV / Collision Loss Coordination	\$20
TP (NI1) TP (NG1) TP (NR1) TP (ND1)	\$0
9) NI1 ID# Mobile	
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	18/02/2021 13:10 (SGT)
Date of Accident	11/02/2021 08:00 (SGT)
Exact Location of Accident	Thomson Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGP4916P
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HONG SAN HONG WEI PTE LTD
Company Reg No	1XXXXX987Z
Email Address	fengloke3054@gmail.com
Mobile Phone No	(Phone) +65-87971090
Alternative Phone No	+65-87971090

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vios
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 - Claiming third party
Vehicle Category	Private hire

### INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	5108547847-01
Cover Note Number	-

### DRIVER

Name of Driver	LOKE CHEE HONG
NRIC No	SXXXX590D

Date Of Driving Pass	23/04/1986
Driving experience	34 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87971090
Alt. Phone Number	-
Email Address	fengloke3054@gmail.com
Address	BLK 62 TELOK BLANGAH HEIGHTS #05-199
Address complement	-
Postcode	100062
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	Collision - Major/Minor Rd
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	UNKNOWN PAX
Gender	Male

#### 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	SMD9481K
Vehicle Manufacturer	Audi
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Contact Number	(Phone) +65-93896800
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

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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**.
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.
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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' 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.

LONG SAN HONG WEI PTE LTD  
1002 BUKIT MERAH LANE 3 #01-85  
SINGAPORE 159719  
U/P: 91091660 H/P: 9831618

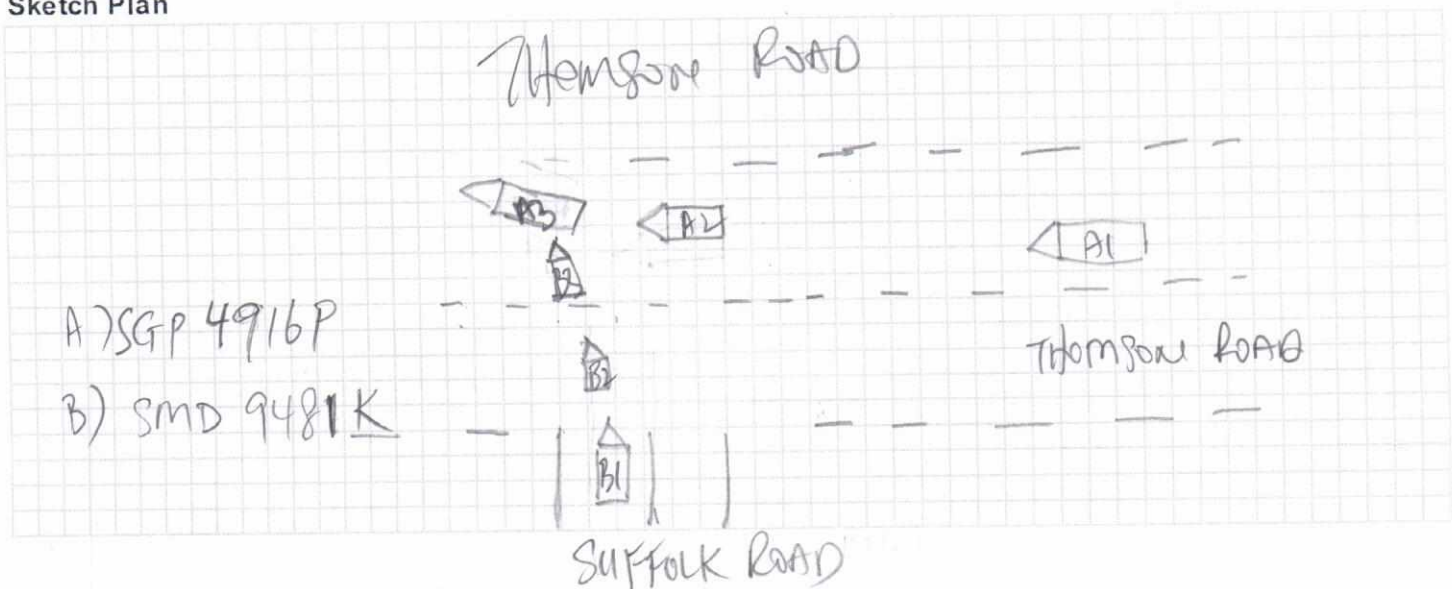
*July 18/2/2021 10.30am.*

*18/02/2021*  
Witnessed by Reporting Centre  
Personnel

Policyholder's Signature / Date &  
Time

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

### Sketch Plan



Describe Circumstances of the Accident

On 11/02/2021 AT ABOUT 08:00hrs AFTER PICKING UP MY CUSTOMER  
AT Thomson Road, I start to move & from the pick up point  
travelling straight, I saw a car from my left so I change  
lane to the second lane & she still bump me from the  
left side of my car. She came from minor road (Suffolk Rd)

Declaration

We declare the foregoing particulars are true in every respect.

LONG SAN HONG WEI PTE LTD  
1002 BUKIT MERAH LANE 3 #01-8  
SINGAPORE 159719  
U/P: 91091660 H/P: 9831618

Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel



# ACCIDENT STATEMENT

ACCIDENT DATE: (11 / 02 / 2024) (DD/MM/YYYY), TIME: 08 : 00 (HH:MM)

LOCATION: Thomson Rd

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SGP 4916 P  
b) INSURANCE COMPANY: NTUC  
c) POLICY NUMBER: 5108547847-01-000005  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: Toyota Vios  
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: HONG SAN (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: CONTACT:  
c) ADDRESS:

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: LOKE CHEE HONG (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: 5146359010 CONTACT: 81971090  
c) ADDRESS: BIK 62, 05-199, Telok Blangah Hts

\* d) DATE OF BIRTH: (20 / 07 / 1961) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 23/4/1986

## 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HIRER

## 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: SMD 9481 K MODEL: Audi  
b) DRIVER'S NAME: Dai Xu Mei  
c) NRIC/FIN/PASSPORT: G5301154 W CONTACT: 93896800

## 9. THIRD PARTY VEHICLE

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

Email: fengloke3054@gmail.com

VIDEO

## Claim Handling

## Accident MT/1121457

Policy No.	5108547847-01	Vehicle No.	SGP4916P	GST Registration No.
Certificate No.	5108547847-01-000005			
Policyholder Name	HONG SAN HONG WEI PTE LTD			Policyholder NRIC
Product Code	FLEET MASTER INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	87971090	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(%)	0	Private Hire

## ▼ Accident Details

Report Date	18/02/2021 13:14	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	11/02/2021	Time of Accident hh:mm	08:00	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	THOMSON ROAD			

## ▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess		
OD Standard Excess		TP Standard Excess	1,500.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?
Additional Excess	0			
Total OD Excess Applicable	0.00	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	18/02/2021 13:17:14 System changed GST Status Verified from No to Yes		

## ▼ Policyholder Mailing Address

Address 1	BLK 1002 #01-85	Address 2	BUKIT MERAH LANE 3	Address 3
Address 4	SINGAPORE 159719	Address Type	Singapore address	Post Code
Unit No.	01-85	Related Policy Number	5120414650	

## ▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	LOKE CHEE HONG	Driver NRIC	S1463590D	Driving Experience
Register Date of Driver License	23/04/1986	Driver Age	59	Contact No.(Home)
Contact No.(Mobile)	87971090	Contact No.(Office)		Address 3
Address 1	BLK 62 #05-199	Address 2	TELOK BLANGAH HEIGHTS	Post Code
Address 4	SINGAPORE 100062	Address Type	Foreign address	
Unit No.	05-199			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	SGP4916P	Driver Insurer Comp.

## Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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## Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	HONG SA
Contact No.(Mobile)		Contact No. (Home)	NIL
Email Address		OI Vehicle Number	SGP4916
Claim Description	SGP4916P / SMD9481K ON 11 Feb 2021		
Preferred Workshop		Insured Liability	Not at Fault
Repair Option	Preferred	Preferred Workshop, Name unknown	
Date Registered	18/02/2021 13:18	GIA report	Received
		Claim Close Date	



Report Taken By

ROS LI WAHAB

Print AK letter

Save Submit

## Attachment

Accident No. MT/1121457 Claim No. 001  
 Last Doc. Received ☒ Yes ☐ No Upload Date 18/02/2021 13:20

Path \*

Category \*

Confidential

Choose File No file chosen

Clear

Please Select

NO

Choose File No file chosen

Clear

Please Select

NO

Choose File No file chosen

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Please Select

NO

Choose File No file chosen

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NO

Choose File No file chosen

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NO

Message Read

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Feb 2021 13:20	Photos	Normal	Photos 2
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Feb 2021 13:20	Photos	Normal	Photos 2
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Feb 2021 13:20	Photos	Normal	Photos 2
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Photos

Normal

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S (BUKIT MERAH)) on 18 Feb 2021 13:18

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S (BUKIT MERAH)) on 18 Feb 2021 13:18

NRIC/ Driving License

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NRIC/ Driving Li

NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICE  
S (BUKIT MERAH)) on 18 Feb 2021 13:18

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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:** 5108547847-01-000005

**Cover :** Third Party

1. Index mark and Registration Number of Vehicle : **SGP4916P**  
 Chassis Number : MR053HY4204210761
2. Name of Policyholder : HONG SAN HONG WEI PTE LTD
3. Effective Date of Insurance : 10 Apr 2020
4. Expiry Date of Insurance : 09 Apr 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)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : TONG HIN INSURANCE AGENCY PTE. LTD. (00000614661)

Date of Issue : 01 Apr 2020 15:42 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive