

# NATIONAL Assessment Centre Services

Date In: 03/06/21	Job description	Date & Time Completed	Done by
Ref No: NA/CTI21006370/13	SAS e-filing		
Veh No: GBC 7127H	E-mail (within 2hrs. A/C 2hrs)		
D.O.A: 02/06/21 1350	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: SMS1305A	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

NA2103074	<b>Invoice Preparation Checklist</b>		Amt (\$)	Amt (\$)
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);	1st Bill	Add Bill	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) RT: Follow-Through Survey (Resurvey) \$30			
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)			
Cat. 1:	6) TR: Re-inspection \$75			
Cat. 2 / 3:	7) N1: Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	OD:			
	*N5: Courtesy Car / Tpt 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 \$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	03/06/2021 13:06 (SGT)
Date of Accident	02/06/2021 13:30 (SGT)
Exact Location of Accident	Near 338 Tampines Street 33, Singapore 520338
Additional Location Information	BLK 338 TAMPINES ST 33 LOADING/UNLOADING BAY
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC7127H
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SG LEASING PTE LTD
Company Reg No	2XXXXX520E
Email Address	SGLEASING@OUTLOOK.COM
Mobile Phone No	(Phone) +65-84211426
Alternative Phone No	+65-84211426

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	Commercial vehicle
Transmission	Auto
CC	2982

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	DMCVSNW00067332000
Cover Note Number	-

### DRIVER

Name of Driver	NORSAINI BIN ABU
NRIC No	SXXXX857H

Date Of Birth	09/07/1981
Occupation	Outdoor
Date Of Driving Pass	14/07/2014
Driving experience	6 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87520870
Alt. Phone Number	-
Email Address	ABUNORSAINI@GMAIL.COM
Address	BLK 2 EUNOS CRESCENT
Address complement	#05-2551
Postcode	400002
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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

PLS REFER TO THE ATTACHED STATEMENT.

#### 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	SMS1505A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LOH JIAN FU
Contact Number	-
Address	-
Address complement	-

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

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	NORSAINI BIN ABU
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	GBC7127H
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

I hereby authorise SME Motor Pte Ltd to send my accident report to my workshop  
Twincar Automotive Pte Ltd / N-51 Automotive Pte Ltd via email / fax.

### SKETCH PLAN

### IMPORTANT NOTICE

Signature: \_\_\_\_\_

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' 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.



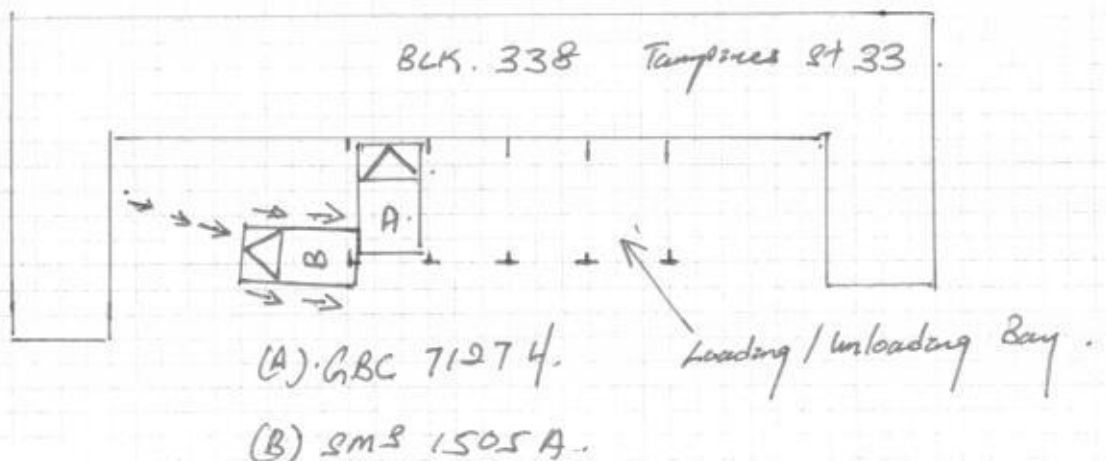
Policyholder's Signature / Date & Time

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

*afym* 03/06/21

Witnessed by Reporting Centre Personnel

### Sketch Plan



### Describe Circumstances of the Accident

On 02/06/2021 at @ 1330 hrs, I parked my vehicle (GBC 7127 H) in front of B&K 338, Tampines St 33, in the loading/unloading Bay. I was in the vehicle and my wife was unloading the parcels on the left side of my vehicle with the left sliding door open. Suddenly, a car (GMS 1505A) reversed after alighting her passenger from the rubbish chunk and collided onto the left side of my vehicle.

### Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

*[Signature]*

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

*[Signature]* 03/06/21

Witnessed by Reporting Centre Personnel



VEHICLE NO: GBC 7127 H. MAKE & MODEL: TOYOTA HIACE AUTO / MANUAL

DATE OF ACCIDENT	02 / 06 / 2021.		*C.C: 3.0.
TIME OF ACCIDENT	1330 AM / <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">PM</span>		
LOCATION OF ACCIDENT	BLK 338, Tampines St 33 (loading / unloading Bay)		
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">PRIVATE USE</span> / <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">PRIVATE HIRE</span>		
NAME OF OWNER	SG Leasing Pte Ltd.		
EMAIL:	sgleasing@outlook.com	Office:	MOBILE: 8421 1426.
NRIC	201317520E		
CLAIM TYPE	OD / <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">THIRD PARTY</span> / REPORTING ONLY		
FLEET POLICY:	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">YES</span> / NO ?		
INSURANCE CO.	China Taiping.		
TYPE OF COVERAGE	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">Comprehensive</span> / Third Party / Third Party Fire & Theft		
POLICY NO.	DMCV3NW00067332000.		
NAME OF DRIVER	AS ABOVE / IF NO: Norsaini Bin Abu.		
NRIC	S8119857 H.		
DATE OF BIRTH	09 / 07 / 1981.		
ANY PASSENGER	YES / NO: N.A.		
NAME OF PASSENGER			
GENDER OF PASSENGER	MALE / FEMALE		
OCCUPATION	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">Outdoor</span> / Indoor		
DATE OF DRIVING PASS	14 / 07 / 2014.		
GENDER	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">Male</span> / Female		
CONTACT NO.	Mobile: 8752 0870		Office: Home:
EMAIL:	abunorsaini@gmail.com.		
ADDRESS	BLK 2 Eunos Crescent #05-2551 (S) 400 002.		
DOES DRIVER OWN OTHER VEHICLES?	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">NO</span> / If yes: Reg No:		INSURER:
RELATIONSHIP	Employee / If No: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">H/R</span> .		
WEATHER CONDITION	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">Clear</span> / Raining / Other:		
ROAD SURFACE	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">Dry</span> / Wet / Other:		
ANY INJURIES	No / If yes: Who? Norsaini Bin Abu (H/R 8752 0870)		
CONTACT NO.			
POLICE REPORT	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">No</span> / If yes: Where?		
NOTICE OF INTENDED PROSECUTION GIVEN?	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">NO</span> / IF YES: WHO?		
VEHICLE B NO.	SM8 1505 A.		Any Passenger: N.A.
NAME	LOH JIAN FU.		
CONTACT NO.			
VEHICLE C NO.	Any Passenger:		
VEHICLE D NO.	Any Passenger:		
VEHICLE E NO.	Any Passenger:		
VEHICLE F NO.	Any Passenger:		
ANY WITNESS	N.A.		
WITNESS CONTACT NO.	N.A.		
WAS THERE ANY VIDEO CAPTURE?	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">YES</span> / <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">NO</span>		
WAS THERE ANY AUDIO RECORDED?	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">YES</span> / <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">NO</span>		
SCENE ACCIDENT PHOTOS TAKEN?	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">YES</span> / <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">NO</span>		
<b>**WORKSHOP:</b>	N-51 Automotive Pte Ltd.		
Damage Portion:	Left sliding door and Left rear side.		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">YES</span> / <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">NO</span>		

Motor Commercial

MZ407/C

N SN

AN0663A

Cov. Type C

**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

DMCVSNW00067332000

Engine No. 1KD2309393

Cha. No. KDH2010118969

1. Index Mark and Registration  
Number of Vehicle

GBC7127H

AUTOSAFE

\*\*\*\*\*

2. Name of Policy Holder

SG LEASING PTE. LTD.

3. Effective date of the Commencement of  
Insurance for the purposes of this Regulations  
Ordinance or Enactment

30/07/2020  
(14:06:04)

Excess Sect. I S\$1,500.00

Excess Sect. II S\$1,500.00

EX. ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

29/07/2021

5. Persons or Classes of Persons entitled to drive\*

Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.  
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.\*

- (1) Use for racing, pace-making, reliability trial or speed-testing
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- (3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

\* 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



Issued By

SGML PTE LTD

Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorised Signatory



**Annex**

Transaction ref 20200805103028402017

Please check that the owner and vehicle details are correct:

1. Name	: SG LEASING PTE. LTD.
2. Identification No. Type	: Company
3. Identification No.	: 201317520E
4. Country/Region	: -
5. Vehicle Registration No.	: GBC7127H
6. Previous Vehicle Registration No.	: -
7. Effective Date of Ownership	: 05 Aug 2020
8. Original Registration Date	: 16 Aug 2013
9. First Registration Date	: 16 Aug 2013
10. Vehicle Type	: A50 - Goods (Closed) Van/Van Panel (Delivery)
11. Vehicle Scheme	: Normal
12. Attachment 1	: No Attachment
13. Attachment 2	: -
14. Attachment 3	: -
15. Vehicle Make	: TOYOTA
16. Vehicle Model	: REGIUS ACE 3.0DX DIESEL A
17. Year of Manufacture	: 2013
18. Primary Colour	: Yellow
19. Secondary Colour	: -
20. Passenger Capacity	: 1
21. Chassis/Trailer Chassis No.	: KDH2010118969 / -
22. Propellant	: Diesel
23. Engine No./Motor No.	: 1KD2309393 / -
24. Engine Capacity(cc)/Power Rating(kW)	: 2982 / -
25. Maximum Power Output(kW/bhp)	: - / -
26. Unladen Weight(kg)	: 1820
27. Maximum Laden Weight(kg)	: 3205
28. Open Market Value	: \$28,538.00
29. PARF Eligibility	: No
30. PARF Eligibility Expiry Date	: -
31. Minimum PARF Benefit	: \$0.00
32. No. of Transfers	: 1

**Annex**

Transaction ref 20200805103028402017

Please check that the owner and vehicle details are correct:

33. IU Label No.	: 1042518952
34. COE No.	: 2013060105000444K
35. COE Expiry Date	: 15 Aug 2023
36. COE Category	: C - Goods Vehicle & Bus
37. Quota Premium/Prevailing Quota Premium	: \$56,889.00 / -
38. Actual Quota Premium/PQP Paid	: \$56,889.00
39. Actual ARF Paid	: \$1,427.00
40. CO2 Emission(g/km)	: 239.00
41. CO Emission(g/km)	: -
42. HC Emission(g/km)	: -
43. NOx Emission(g/km)	: -
44. PM Emission(mg/km)	: -
45. Actual CEVS/VES Rebate Utilised	: -
46. CEVS/VES Surcharge Paid	: -
47. Actual Green Vehicle Rebate Utilised	: -
48. Vehicle Lifespan Expiry Date	: 15 Aug 2033
49. Road Tax Amount	: -
50. Road Tax Start Date	: -
51. Road Tax End Date	: -
52. Remarks	: -