

NATIONAL Assessment Centre Services

Date In: 21/06/21	Job description	Date & Time Completed	Done by
Ref No: NA/MCC31006846/13	SAS e-filing		
Veh No: 4N163T	E-mail (within 8hrs, MP 2hrs)		
D.O.A: 02/05/21 1530	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: 5JV1978T	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 :-	Invoice Preparation Checklist	Ant (\$) 1st Bill	Ant (\$) Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
	5) RT: 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:-		
	ON*		
	*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		
Cat 1:	Invoice dated:	Fee Charged	
Cat 2/3:	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	21/06/2021 12:16 (SGT)
Date of Accident	03/05/2021 15:30 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	AFTER EUNOS EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN163T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	VICAN CONSTRUCTION PTE. LTD.
Company Reg No	2XXXXX945N
Email Address	vicancon@yahoo.com
Mobile Phone No	(Phone) +65-89418773
Alternative Phone No	+65-89418773

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	FE83BEOSRDEA
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
Transmission	Manual
CC	2977

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	-
Cover Note Number	0VCF1903670/E01

DRIVER

Name of Driver	JIANG YUFENG
Passport No/FIN	GXXXX406T

Date Of Birth	09/03/1995
Occupation	Outdoor
Date Of Driving Pass	19/12/2019
Driving experience	1 YEAR AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89418773
Alt. Phone Number	-
Email Address	vicancon@yahoo.com
Address	BLK 203 HOUGANG STREET 21
Address complement	#02-89
Postcode	530203
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Change/cross lane
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

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	SJV1978T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
NRIC No	SXXXX975F
Contact Number	-
Address	-

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

SKETCH PLAN

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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.

Policyholder's Signature
Date & Time:

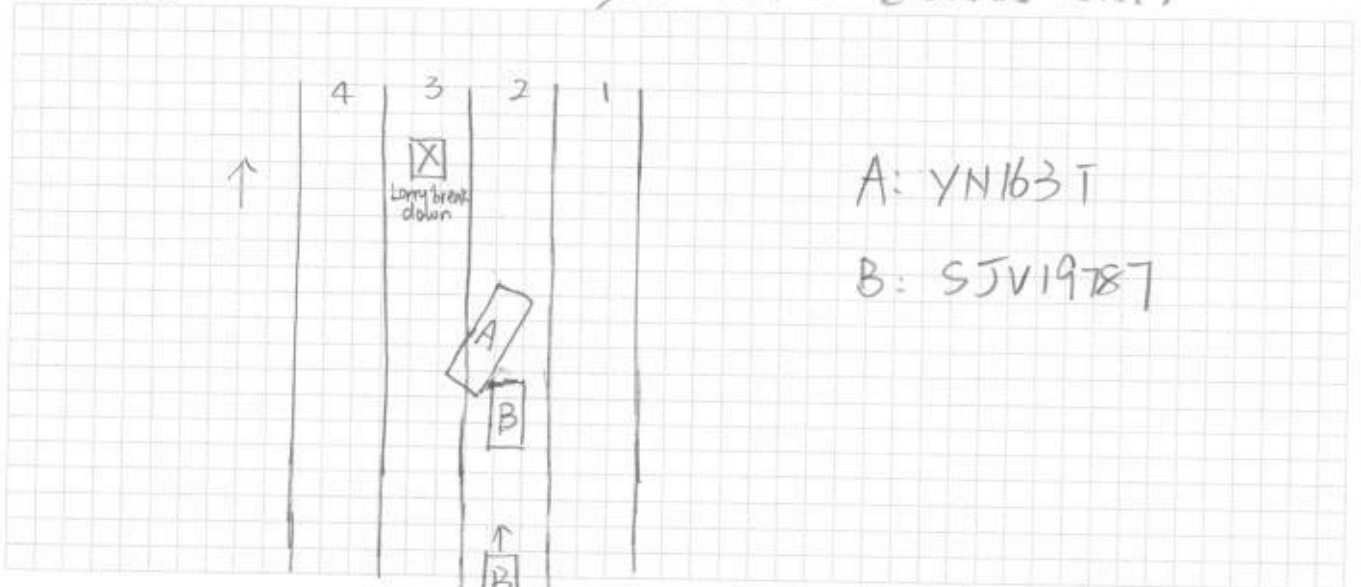


Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN

PIE AFT EUNOS EXIT



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving my lorry YN163T at lane 3, at PIE after Eunos Exit. In front there was a lorry break down, so I slow down my lorry. I give signal, before I was moving to the right lane slowly.

My lorry already most into lane 2, suddenly while SJV1987 was driven by an very old auntie (about 60-70 years old), she didn't stop and hit my lorry rear right part.

I thought the auntie came hit our lorry, but our lorry didn't need repair, so we didn't file report.

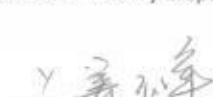
DECLARATION

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


Policyholder's Signature

Date & Time:




Driver's Signature

(If driver is not the policyholder)

Date & Time:

 21/06/21

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

印公司车保单

insurance cent

Date of Accident : 03/05/2021 Accident Time: 15:30 pm (24-HR-Format)
 Accident Place : PIE after Eunus Exit
 Vehicle Reg. No. (Car Plate No.) : YN163T
 Vehicle Make/Model : Mitsubishi Lorry
 Insurance Company : MSIG Policy No. XOVCF1903670/EOI
 Owner or Company Name /IC No. : Vican Construction Pte Ltd
 Owner or Company Contact No. : _____ Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : Jiang Yufeng G3872406T
 DRIVER'S Date Of Birth : 09 Mar 1995 DRIVER'S License Pass Date 18/10/2019
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : 203 Hongang Street #02-89
 DRIVER'S Contact No./ Alt No. : 1) 8941 8773 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : NA
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 1

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 Reg. No: SJV1978T

Vehicle Reg. No: _____

Vehicle Make/Model: Toyota

Vehicle Make/Model: _____

Name Driver: KEE GVEH HONG

Name Driver: _____

IC No. Driver: S2570975F

IC No. Driver: _____

Driver's Contact & Add: _____

Driver's Contact & Add: _____

vican.con@gatev.com

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
 Tel +65 6827 7888, Fax +65 6827 7800
 msig.com.sg

MOTOR VEHICLE COVER NOTE

Road Transport Act 1987 (Malaysia), Road Transport (Amendment) Act 2019 (Malaysia)
 The Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)
 The Motor Vehicles (Third-Party Risks And Compensation) Act (Cap. 189 Of The Revised Edition)
 (Republic Of Singapore)
 The Motor Vehicles (Third-Party Risks And Compensation) Rules, 1996 Edition (Republic Of Singapore)
 Or Any Amendment, Act Or Acts Passed In Substitution Thereof.

02 Mar 2021

1A0676

Third Party Fire & Theft

COVER NOTE No.

: 0VCF1903670/E01

1. Index Mark and Registration Number of Vehicle : YN163T
 2. Chassis Number of Vehicle : FE83BEA11258
 3. Name of Policyholder : VICAN CONSTRUCTION PTE LTD
 4. Effective date of the Commencement of Insurance for the purposes of the Act : 18 Apr 2021 00:00AM
 5. Date of Expiry of Insurance : 03 Sep 2021

6. Persons or Classes of Persons entitled to drive*

(a) Any person who is driving on the Policyholder's order or with their 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.

And provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7. Limitations as to Use*

Use in connection with the Policyholder's business.
 Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 Use for social domestic and pleasure purposes.

The Policy does not cover

- (i) Use for hire or reward or for racing pace-making reliability trail or speed-testing.
 (ii) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

*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.

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) or any Amendment, Act or Acts passed in substitution thereof.

For MSIG Insurance (Singapore) Pte. Ltd.

Not valid unless countersigned by Authorized Person

Approved Insurer

IMPORTANT NOTICE

This temporary Cover Note is valid for a maximum of 14 days only.
 You must exchange the Cover Note for the Certificate of Insurance from the insurer within 14 days from the date of this Cover Note.
 If you are involved in an accident, full details must be forwarded immediately to the Company.

FORM MZ.300

0VCF1903670

MSD/MKC/30-286342

(For the Issuance of Motor Cover Note only)

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)
4 Shenton Way, #21-01 SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
msig.com.sg

Your Ref : YN163T
Our Ref : 256985 (Please quote our reference when replying)

REMINDER

14 Jun 2021

URGENT 2ND REMINDER

VICAN CONSTRUCTION PTE LTD
203 HOUGANG STREET
#02-89
SINGAPORE 530203

Dear Sir/Madam

ACCIDENT INVOLVING YN163T & SJU1978T ALONG PIE TOWARDS EUNOS*(Please ignore this letter if you have already filed an accident report)*

We have not heard from you since we wrote on 07.05.21 & 28.05.21, about your non-reporting of this accident.

It is important that you or your authorised driver report any traffic accident involving the insured vehicle to your insurer within 24 hours of the accident or by the next working day.

Please bring your vehicle (even if it was not damaged) to any of our authorised workshops to make a report with these documents:

1. Driving license
2. Identity card
3. Police report (if any)

We look forward to receiving your accident report within 7 days from this letter. Otherwise, we will have to engage the assistance of the Traffic Police.

Please contact us if you need further clarification.

Thank you.

Yours sincerely

Muhd Ashik B Madi
Executive
Claims Services
Tel : 6594 2548
Fax : 6827 7800
Email : ashik_madi@sg.msig-asia.com

cc: Yarra Trading & Services

This is a system generated letter, hence no signature is required.