

# NATIONAL Assessment Centre Services

Date In: 05/07/21	Job description	Date & Time Completed	Done by
Ref No: NA/CTI21007343/12	SAS e-filing		
Veh No: 5G1064L	E-mail (within 2hrs. AP: 2hrs)		
D.O.A: 04/07/21 2210	i-Motor Claim Form		
OD (TP) Reporting Only	i-Motor W/O (Within: OE 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: SJX912Z	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

NA2103340	<b>Invoice Preparation Checklist</b>	Amt (\$) 1st Bill	Amt (\$) Add Bill
<b>Claimant's Particulars :-</b>	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) 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:-		
	9) N12: Idac Mobile 30		
<b>QC Checked by (Engr-In-Charge):</b>	01*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
<b>Auditors' Comments :-</b>	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
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	05/07/2021 18:03 (SGT)
Date of Accident	04/07/2021 22:10 (SGT)
Exact Location of Accident	Jurong West Street 91, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGW64L
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LAY AUTO LEASING PTE LTD
Company Reg No	2XXXXX521C
Email Address	fiona@layauto.com
Mobile Phone No	(Phone) +65-93874666
Alternative Phone No	+65-93874666

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1600

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMHCSNA00002632101
Cover Note Number	-

#### DRIVER

Name of Driver	GURMINDER SINGH S/O PRITAM SINGH
NRIC No	SXXXX724E

Date Of Birth	17/06/1979
Occupation	Outdoor
Date Of Driving Pass	31/07/2007
Driving experience	14 YEARS
Gender	Male
Mobile Number	(Phone) +65-96616643
Alt. Phone Number	-
Email Address	joel@layauto.com
Address	BLK 604A PUNGGOL ROAD
Address complement	#07-768
Postcode	821604
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 - Head to Rear
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 vehicle 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	Punggol Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18006049999
Alt. Police Station Phone No	(Fax) +65-64468015
Police Station Address	Blk 21A Tebing Lane Singapore 828837
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT T/20210705/2040

#### 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	SJX912Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	MOHAMMAD RIDHAUFI BIN RAMLAN
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	GURMINDER SINGH S/O PRITAM SINGH
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SGW64L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## 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 willful 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

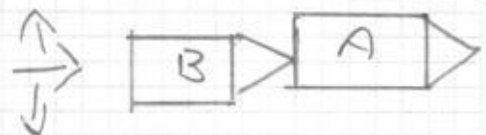
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

A - SGW64L  
B - SJX912Z

May West St. 91.




**Describe Circumstances of the Accident**


As per police report.


7/20210725/2040

**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

 05/10/21  
Witnessed by Reporting Centre Personnel





# SINGAPORE POLICE FORCE



T/20210705/2040

1 of 3

Police Station Of Origin:  
Punggol N.P.C  
21A Tebing Lane SINGAPORE 828837  
Tel No: 1800-6049999

Report No. T/20210705/2040

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/07/2021 13:54	Vide Report No.:	Station Diary No.: 32
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### Informant's Particulars

Name of Informant: GURMINDER SINGH S/O PRITAM SINGH			Address: APT BLK 604A PUNGGOL ROAD #07-768 SINGAPORE 821604		
ID Type / ID No.: NRIC NO / S7917724E			Contact No.: Home/Office: Mobile: 96616643		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 42	Date of Birth: 17/06/1979	Type of Informant: Driver		
Race: Sikh			Language:		Institution / School Name:
Occupation: Private Hire Driver			Driving Licence Information: Class: Date of Expiry:		

### General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/07/2021 22:10	Type of Location: X-Junction
Location:  JURONG WEST STREET 91				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGW64L	Car				Seriously Damaged	0
GJX912Z	Car					0



**SINGAPORE  
POLICE FORCE**



T/20210705/2040

Police Station Of Origin:

Punggol N.P.C

21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

2 of 3

Report No. T/20210705/2040

**CONTINUATION OF REPORT**

**Brief Details.**

On 04/07/21 at about 2210hrs, I was driving my vehicle SGW64L along Jurong West St 91 towards Pioneer Road. I was approaching the junction of Jurong West St 92 when there was a vehicle in front of me making a right turn. As it was a single lane road, I slowed to a stop behind the said vehicle as it was impossible to overtake it.

Out of a sudden, I felt an impact from the rear and realised that another vehicle (SJX912Z) had collided into the rear of my vehicle. I alighted from my vehicle and the driver of the vehicle that collided into did likewise. We took pictures of the damages and exchanged particulars. Thereafter, we left on our separate ways.

On 04/07/21 at about 2330hrs, I sought medical attention at Sengkang General Hospital and was given 05 days (05/07/21 - 09/07/21) of MC (EMD202180704).





**SINGAPORE  
POLICE FORCE**



T/20210705/2040

Police Station Of Origin:  
Punggol N.P.C  
21A Tebing Lane SINGAPORE 828837  
Tel No: 1800-6049999

3 of 3

Report No. T/20210705/2040

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:  
F /  
Sr Staff Sgt KOH SHIZENG

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
05/07/2021 13:54

Officer In Charge Of Case:  
TP / AEIT /  
Insp BOON YEN KIAN  
Contact No.: 65476172

Classification Of Case:

Authentication Stamp  
NP168



**SINGAPORE  
POLICE FORCE**  
SAFEGUARDING EVERYONE

SN153

SIGNATURE

## ACCIDENT STATEMENT

✓ ACCIDENT DATE: 04/07/2021 (DD/MM/YYYY) TIME: 2210 (HH/MM)  
✓ LOCATION: Jurong west street 91

### 1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SGW64L  
b) INSURANCE COMPANY: Chua Tai Png  
c) POLICY NUMBER: \_\_\_\_\_  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: Honda Vezel  
f) TYPE (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: Leisure  
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: Lay Auto Leung (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: 2010521C CONTACT: 73874666  
c) ADDRESS: \_\_\_\_\_

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

### DRIVER GURMINDER SINGH

a) NAME: S/O PRITAM SINGH (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S7917724E CONTACT: 96616643  
c) ADDRESS: BUK 604A PUN9901 ROAD  
#07-768 (S) 821 604

\*d) DATE OF BIRTH: 17/06/1971 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: \_\_\_\_\_

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Owner / Driver

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: Punggol NPC

### 8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: SJX 912Z MODEL: Hyundai  
b) DRIVER'S NAME: Mohammad Ardhauti Bin Ramlan  
c) NRIC/FIN/PASSPORT: S9410478E CONTACT: \_\_\_\_\_

### 9. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: \_\_\_\_\_  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

31/07/2007

Email: joel@layauto.com

fax: \_\_\_\_\_

VIDEO: 93874666

Motor Hire Car

MZ406L/B

R SN

AN0606A

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.

DMHCSNA00002632101

Engine No.: L155552054

Cha. No.: RU11302048

1. Index Mark and Registration

SGW64L

AUTOSAFE

Number of Vehicle

\*\*\*\*\*

2. Name of Policy Holder

LAY AUTO LEASING PTE LTD

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

16/03/2021  
(15:05:41)

Excess Sect. I

S\$2,000.00

Excess Sect. I (Outside Singapore)

S\$4,000.00

Excess Sect. II

S\$1,500.00

4. Date of Expiry of Insurance

15/03/2022

Excess Sect. II (Outside Singapore)

S\$3,000.00

EX ON WINDSCREEN

S\$100.00

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

As per Named Driver(s) stated below.

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:

- (1) Use for the carriage of passengers or goods in connection with the Policyholder's business.
- (2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

- (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.

HIRE PURCHASE CO.: SING INVESTMENTS & FINANCE LTD AS HP OWNER

\* 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: Zhong YueQiang  
Authorised Officer

杨亚美  
Authorised Signatory



# LAY AUTO LEASING PTE LTD

21 TOH GUAN ROAD EAST #01-16/17 TOH GUAN CENTRE S608609

TEL: 6462 5828 FAX: 6468 1179 UEN NO 201310521C

Rental Agreement Number: LA1504-2 LA 05072103

This agreement is made on (Date) 10/01/2021 between (Name) LAY AUTO LEASING PTE LTD  
(Registration No.) 201310521C, a company incorporated in Singapore with its  
registered officer at 21 TOH GUAN ROAD EAST #01-16/17 TOH GUAN CENTRE S608609  
(hereinafter called the "OWNER") which expression shall where the context so admits, include the  
successor(s) in title and Gurminder Singh S/O Pritan Singh after  
called the "HIRER" in respect of the hire of the motor vehicle ("THE VEHICLE") for the period ("THE  
PERIOD") at the rate of the hire rental ("THE RENTAL") set out in the schedule of this agreement ("THE  
SCHEDULE") and upon the terms and conditions stated hereunder.

## SCHEDULE OF AGREEMENT

### 1. PARTICULARS OF THE VEHICLE

- a. Make/Model : Honda Vezel 1.5A
- b. Registration Number : SGW64L
- c. Chassis Number : As per log card
- d. Engine Number : As per log card

### 2. COMMENCEMENT

- a. Effective Date : 10/01/2021
- b. Expiry Date : 10/01/2022

### 3. HIRE RENTAL

- a. Security Deposit : \$500
- b. Daily Hire Rates : \$55
- c. Additional Charges : NIL

### 4. DRIVERS

#### 1<sup>st</sup> Driver

- Name : Gurminder Singh S/O Pritan Singh
- D.O.B : 17/6/1979
- License No. : S7917724E
- Contact No. : 9661 6643 / 9741 8815

SIGNATORY OF HIRER :

*[Signature]*

