

NATIONAL Assessment Centre Services

Date In: 12/08/21	Job description	Date & Time Completed	Done by
Ref No NA/LIA21008448/13	SAS e-filing		
Veh No GBL4569M	E-mail (within 8hrs, Aft 2hrs)		
D.O.A 11/08/21 1425	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: 4L6884M	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

NA2103671	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
		1st Bill	Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		
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		
	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:-		
QC Checked by (Engr-In-Charge):	Q1*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
Auditors' Comments :-	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Cat. 1:	TP (N11) : TP (Non INC) against INC \$20		
Cat. 2 / 3:	9) N12: Idac Mobile 30		
	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	12/08/2021 14:06 (SGT)
Date of Accident	11/08/2021 14:25 (SGT)
Exact Location of Accident	Jurong West, Singapore
Additional Location Information	BLK 503 CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBL4569M
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SUN KEE(PTE)LTD
Company Reg No	1XXXXX749M
Email Address	jmartaauto@gmail.com
Mobile Phone No	(Phone) +65-84883538
Alternative Phone No	+65-84883538

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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	Manual
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	C0120460

DRIVER

Name of Driver	TUNG LIN SIN
NRIC No	SXXXX442Z

Date Of Birth	29/01/1987
Occupation	Outdoor
Date Of Driving Pass	31/08/2012
Driving experience	9 YEARS
Gender	Male
Mobile Number	(Phone) +65-84883538
Alt. Phone Number	-
Email Address	jmartauto@gmail.com
Address	BLK 549 BEDOK NORTH AVE 1
Address complement	#03-454
Postcode	460549
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	Side Swipe
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 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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

MY CAR WAS PARKED STATIONARY INSIDE THE PARKING LOT, SUDDENLY I SAW VEH B REVERSED AND HIT ONTO MY FRT RIGHT SIDE PORTION OF MY VEH.

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	YL6884M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	NG YIN KAH
NRIC No	SXXXX456G
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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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.



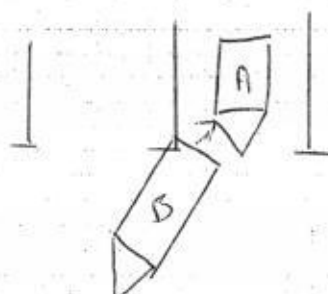
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

BLK 503 JURONG WEST CARPARK



DOA: 11/8/21

A: GBL 4509 M

B: YL 6884 M

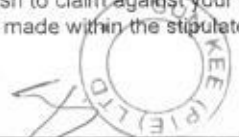
Describe Circumstances of the Accident


My car was parked stationary inside the parking lot, suddenly I saw veh B reversed & hit onto my veh frt RH portion.

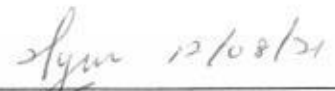
Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Date of Accident : 11/8/21		Time of Accident : 2.25pm	
Exact Location of Accident : BLK 503 Jurong West c/park			
Purpose Of Reporting : OWN DAMAGE CLAIM / 3RD PARTY CLAIM / JUST REPORTING ONLY			
Weather Condition : Clear / Raining		Wet / Dry Private Use / Work	
Owner's Name : Sun Kee (Pte) Ltd		NRIC :	HP :
Driver's Name : Tung Lin Sin		NRIC : 587824422	HP : 84883538
DOB : 29/11/1987	Driving Licence Passing Date : 31/8/2012		Occupation : Indoor / Outdoor
Address : 549 Bedok North Ave 1 #03-454 (460549)			
Relationship Of Driver with Insured : Employee		Email : jmartauto@gmail.com	
Vehicle Number : GBL 4569M		Make & Model : Nissan	
Insurance Company : Liberty		Policy Num :	Coverage :
Any passengers inside vehicle involved (YES / NO) If yes, Vehicle Number & How many pax			
A : 1+0 B : 1+0 C : D :			
Vehicle A Passenger Name :			
Anyone Injured :			
<input checked="" type="radio"/> NO <input type="radio"/> YES Name / NRIC / Which Vehicle :			
Was The Accident Reported To The Police ?			
<input checked="" type="radio"/> NO <input type="radio"/> YES Which Police Station :			
Does The Driver Own Any Other Vehicle ?			
<input checked="" type="radio"/> NO <input type="radio"/> YES Vehicle Number : Insurer :			
Was Any Foreign Vehicle Involved ?			
<input checked="" type="radio"/> NO <input type="radio"/> YES Vehicle Number & Category :			
Was There Any Video Captured By Car Camera ? <input type="radio"/> NO <input type="radio"/> YES			

Third Party's Particular

Vehicle B 's Number : 7L 6894M		Make & Model :	
Driver's Name : Ng Yun Kah		NRIC : 500674566	HP :
Vehicle C 's Number :		Make & Model :	
Driver's Name :		NRIC :	HP :

Witness 's Particular

Name :	NRIC :	HP :
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Motor Cover Note

Name of Producer:

ONG HUI SENG LIFE & GENERAL INSURANCE AGENCY (A0182)

Date of Issue:

19 Jul 2021

Cover Note No.:

C0120460

Quotation/ Proposal/ Policy No.:

98L4569M

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium payable for such insurance will be charged for the time the Company has been on risk.

Details of Schedule**Name of Insured:**

SUN KEE (PTE) LTD

Period of Insurance:

From: 26 Jul 2021 00:00

To: 27 Jul 2022 23:59

Registration No.:

31

30

Make and Model:

NISSAN NV200 1.6L MT PETROL (I) (YDTARCRM20ED2Y598Z)

Type of Body:

VAN

Capacity/Tonnage:**Year of Manufacture/Registration:**

2021/2021

Chassis No.:

JN1YAAM20Z0002378

Engine No.:

HR16190508D

Sum Insured:

MARKET VALUE AT TIME OF LOSS

Name of Finance Company:

NA

Type of Plan:

Comprehensive

Excess:

AS AGREED

The Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189), Motor Vehicles (Third Party Risks and Compensation) Rules, 1960, Road Transport Act, 1987, Road Transport (Amendment) Act 2019, The Motor Vehicles (Third Party Risks) Rules, 1959 and any subsequent revisions to the above Acts and Agreements.

I/We hereby certify that this Cover Note 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.

Not valid unless counter-signed by authorized person.



Date: 19 Jul 2021 13:09



For and on behalf of
LIBERTY INSURANCE PTE LTD

IMPORTANT NOTICE

Administrative Charge is payable for Cover Note issued and Policy not taken up.

Subject to Premium Payment Warranty Clause.

This Cover Note is issued for TEMPORARY USE only and is valid for 30 days from the date of issue, unless replaced by a Certificate of Insurance issued by the Company.

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.: GBL4569M
Vehicle Type: A50 - Goods (Closed) Van/Van Panel (Delivery)
Vehicle Attachment 1: No Attachment
Vehicle Attachment 2: -
Vehicle Make: NISSAN
Chassis No.: JN1YAAM20Z0002378
Motor No.: -
Propellant: Petrol
Engine Capacity: 1598 cc
Maximum Power Output: -
Unladen Weight: 1160 kg
Primary Colour: White
First Registration Date: 31 Jul 2021
Manufacturing Year: 2021
PARF Eligibility: No
No. of Transfers: 0
Actual ARF Paid: \$814.00

Owner Particulars

Owner Name: SUN KEE (PTE) LTD
Owner ID Type: Company
Owner ID: 197901749M
Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 19

Registered Street Name: WOODLANDS SECTOR 1

Registered Unit No.: -

Registered Building Name: -

Registered Postal Code: 738080

COE No. / Expiry Date: 2021080105000204C / 30 Jul 2031

COE Bid Category: C - Goods Vehicle & Bus

QP Paid: \$39,523.00

Transaction Details

Business Transaction Ref. No.: 20210731091050858086

Business Transaction Date: 31 Jul 2021

Business Transaction Time: 09:10:50

Message

The above vehicle has been successfully registered.

The total amount is \$20,573.00.

Vehicle Scheme: Normal

Vehicle Attachment 3: -

Vehicle Model: NV200 1.6 (MT) PETROL

Engine No.: HR16190508D

Trailer Chassis No.: -

Passenger Capacity: 1

Power Rating: -

Maximum Laden Weight: 2040 kg

Secondary Colour: -

Original Registration Date: 31 Jul 2021

Open Market Value: \$16,264.00

Minimum PARF Benefit: \$0.00

Additional Registration Fee Rate: 5.00%

Cover NC:

CO120460

Note

Cover, NO

CO120460

OK

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