

NATIONAL Assessment Centre Services

July 1, 2021

2021/08/01

Date In: 27/08/2021 13:00	Job description	Date & Time Completed	Done by
Ref No: NA2103703	SAS e-illing		
Veh No: 6063T	E-mail (Spide 3hrs, A10 4hrs)		
D.O.A: 26/08/2021 15:10	1-Motor Claim Form		
	1-Motor W/O (W/Inlet; 00 3hrs, TP 4hrs)		
	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/Visor		

OT: TP / Reporting Only

TP Insurer:

Preferred Wksp / INC Assgn Wksp / CW:

TP Insurer:	Veh No: SMU 5060	INC () / Non-INC ()
Owner / Driver ()		
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 ()

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

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

() 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 > \$3,000] ()

Injury:

NA2103703

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

1) All Accident Reporting (50)	
2) DA Survey Assessment (\$100)	INC (\$10)
3) TP Follow Up	\$120
4) PT Follow Through Survey	\$30
5) PT Follow Through Survey (Resurvey)	\$30
6) TLI Inspection	\$160
7) N/A DA + SMRT Survey	
8) N/A Additional Services	
9) N/A	
10) N/A Courtesy Car / Tol Allowance	\$10
11) N/A Repair Coordination	\$25
12) N/A Post Repair Inspection	\$25
13) N/A DV / Collect Loss & Coordination	\$25
14) N/A TP (HIT) / PCHING	\$30
15) N/A Mobile	
16) Invoice dated	
17) Invoice dated	

Fees Charged
Fees 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	27/08/2021 13:00 (SGT)
Date of Accident	26/08/2021 15:10 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	TUNNEL TOWARDS ANG MO KIO
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG6063T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	FVWARD BADMINTON CENTRE P/L
Company Reg No	2XXXXX997E
Email Address	fward88@yahoo.com.sg
Mobile Phone No	(Phone) +65-91881711
Alternative Phone No	+65-91881711

VEHICLE PARTICULARS

Manufacturer	Fiat
Model	Fiorino
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	1248

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00081132000
Cover Note Number	-

DRIVER

Name of Driver	WELLY TJIA BENG LEE
NRIC No	SXXXX550H

Date Of Birth	31/01/1959
Occupation	Outdoor
Date Of Driving Pass	24/04/1981
Driving experience	40 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91881711
Alt. Phone Number	-
Email Address	fvward88@yahoo.com.sg
Address	BLK 126 BUKIT MERAH VIEW #09-370
Address complement	-
Postcode	151126
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 - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

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

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	SMU5040L
Vehicle Manufacturer	Toyota
Vehicle Model	Vios
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MS LIEW HUNG TZE
NRIC No	SXXXX196C
Contact Number	(Phone) +65-97201578
Address	-



Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.
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.

Lelly 27/8/2021

Lelly 27/8/2021

[Signature] 27/8/2021

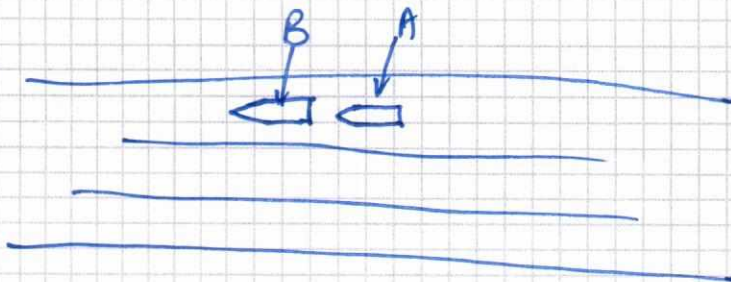
Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time *12-10*

Witnessed by Reporting Centre Personnel

Sketch Plan

CTA TUNJAL TOWARAR ANGMOKIO



A) GBGR 6063T

B) smu 7040L

Describe Circumstances of the Accident

I was driving towards AMK through CTE Tunnel. At about 3.10pm
It was raining
At about 5km Mark, the car in front of car B brakes.
Car B brakes. I too brake, but it just skidded.
With the screeching sound, unfortunately was not able
to avoid the collision.

Declaration

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

Witnessed by Reporting Centre
Personnel

ACCIDENT STATEMENT

ACCIDENT DATE: (26/8/2021) (DD/MM/YYYY), TIME: (15:10) (HH:MM)

LOCATION: CTE Tunnel Towards AMK (At 15km mark)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: 9B6 6063 T
 b) INSURANCE COMPANY: CHINA TAI PING
 c) POLICY NUMBER: MS010346
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: FIAT PANDA
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME:
 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: FUWARD BADMINTON CENTRE P.L (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 200513997E CONTACT: 91881371
 c) ADDRESS: 126 BT MERAH VIEW #09-370
 S151126

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: WALLY TJIA BEN LEE (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S2185550H CONTACT: 91881371
 c) ADDRESS: 126 BT MERAH VIEW #09-370
 S151126

* d) DATE OF BIRTH: (31/01/1959) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

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

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: SMU 5040L MODEL: TOYOTA VIOS
 b) DRIVER'S NAME: HS LIEW HUNG T22
 c) NRIC/FIN/PASSPORT: S8367196C CONTACT: 97201578

9. THIRD PARTY VEHICLE

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

Email: fuward88@yahoo.com.sg
 VIDEO

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

**Business Profile (Company) of FVWARD BADMINTON CENTRE PTE. LTD.
(200513997E)**

Date: 30/05/2021

The Following Are The Brief Particulars of :

UEN	:	200513997E
Company Name.	:	FVWARD BADMINTON CENTRE PTE. LTD.
Former Name if any	:	
Incorporation Date.	:	07/10/2005
Company Type	:	EXEMPT PRIVATE COMPANY LIMITED BY SHARES
Status	:	Live Company
Status Date	:	07/10/2005

Principal Activities

Activities (I)	:	SPORTS AND RECREATION INSTRUCTION (85410)
Description	:	BADMINTON RELATED ACTIVITIES AND EQUIPMENT
Activities (II)	:	WHOLESALE TRADE OF A VARIETY OF GOODS WITHOUT A DOMINANT PRODUCT (46900)
Description	:	

Capital

Issued Share Capital (AMOUNT)	Number of Shares *	Currency	Share Type
4	4	SINGAPORE, DOLLARS	ORDINARY

* Number of Shares includes number of Treasury Shares

Paid-Up Capital (AMOUNT)	Number of Shares	Currency	Share Type
4		SINGAPORE, DOLLARS	ORDINARY

COMPANY HAS THE FOLLOWING ORDINARY SHARES HELD AS TREASURY SHARES

Number Of Shares	Currency
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**Business Profile (Company) of FVWARD BADMINTON CENTRE PTE. LTD.
(200513997E)**

Date: 30/05/2021

Registered Office Address	126 BUKIT MERAH VIEW #09-370 SINGAPORE (151126)
Date of Address	02/01/2009
Date of Last AGM	25/05/2021
Date of Last AR	29/05/2021
FYE As At Date of Last AR	31/12/2020

Audit Firms**NAME****Charges**

Charge No.	Date Registered	Currency	Amount Secured	Chargee(s)
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Officers/Authorised Representative(s)

Name	ID	Nationality/Citizenship	Source of Address	Date of Appointment
Address	Position Held			
JESCENE CHENG SOON YEE	S7681573I	SINGAPORE CITIZEN	OSCARS	07/10/2005
126 BUKIT MERAH VIEW #09-370 SINGAPORE (151126)	Director			
CHEW KOK YEW	A40984477	MALAYSIAN	ACRA	01/09/2020
31 JALAN SAMARINDA 6, TAMAN SATU KRUBONG 75260 MELAKA. MALAYSIA	Chief Executive Officer			
WELLY TJIA BENG LEE	S2175550H	SINGAPORE CITIZEN	ACRA	02/01/2009
126 BUKIT MERAH VIEW #09-370 SINGAPORE (151126)	Secretary			

Shareholder(s)

Name	ID	Nationality/Citizenship	Source of Address	Address Changed
Address	Place of incorporation/ Origin/Registration			
1 JESCENE CHENG SOON YEE	S7681573I	SINGAPORE CITIZEN	OSCARS	26/04/2019

Authentication No. : T21396948D

INFORMATION RESOURCES

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**Business Profile (Company) of FVWARD BADMINTON CENTRE PTE. LTD.
(200513997E)**

Date: 30/05/2021

Shareholder(s)

Name	ID	Nationality/Citizenship Place of incorporation/ Origin/Registration	Source of Address	Address Changed
Address				
126 BUKIT MERAH VIEW #09-370 SINGAPORE (151126)				
Ordinary(Number)	Currency			
4	SINGAPORE, DOLLARS			

Abbreviation

UL - Local Entity not registered with ACRA

UF - Foreign Entity not registered with ACRA

AR - Annual Return

AGM - Annual General Meeting

FS - Financial Statements

FYE - Financial Year End

OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority.

Note :

- The information contained in this product is collated from lodgements filed with ACRA, and/or information collected by other government sources.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sg.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA210529070938 (Free Business Profile by ACRA)

DATE : 30/05/2021

This is computer generated. Hence no signature required.



Authentication No. : T21396948D

Motor Commercial

MZ300/C

N SN

BR0120A

Cov. Type:C

CERTIFICATE OF INSURANCEMotor 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. DMCVSNW00081132000 Engine No.: 199A90006320607
Cha. No.: ZFA22500006F43154

1. Index Mark and Registration GBG6063T AUTOSAFE
Number of Vehicle =====

2. Name of Policy Holder FVWARD BADMINTON CENTRE PTE LTD

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment 11/09/2020
Excess Sect I. S\$450.00
EX ON WINDSCREEN. S\$100.00

4. Date of Expiry of Insurance 10/09/2021

5. Persons or Classes of Persons entitled to drive*

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.

6. Limitations as to use:*

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

The Policy does not cover

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


HIRE PURCHASE CO.: UNITED OVERSEAS BANK LIMITED 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: ACORN INTERNATIONAL NETWORK PTE
Authorised Officer

Authorised Signatory