

# NATIONAL Assessment Centre Services

Date In: 30/08/21	Job description	Date & Time Completed	Done by
Ref No: NA/MSG21009051/13	SAS e-filing		
Veh No: 5GJ51166	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 19/08/21 1845	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: BCB6028	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

	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
<b>Claimant's Particulars :-</b>	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		
QC Checked by (Engr-In-Charge):	5) FT : 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:-		
	Q1:*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
<b>Auditors' Comments :-</b>	TP (N11) : TP (N-n INC) against INC \$20		
Cat. 1:	9) N12: Idac Mobile \$30		
Cat. 2 / 3:	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	30/08/2021 09:37 (SGT)
Date of Accident	19/08/2021 18:45 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS JURONG
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ5116G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KURUBALAN S/O MANICKAM
NRIC No	SXXXX278B
Email Address	kurubalan@hotmail.com
Mobile Phone No	(Phone) +65-90088003
Alternative Phone No	+65-90088003

### VEHICLE PARTICULARS

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

### INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	-
Cover Note Number	80050402

### DRIVER

Name of Driver	KURUBALAN S/O MANICKAM
NRIC No	SXXXX278B

Date Of Birth	31/10/1957
Occupation	Indoor
Date Of Driving Pass	23/05/2001
Driving experience	20 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90088003
Alt. Phone Number	+65-90088003
Email Address	kurubalan@hotmail.com
Address	BLK 15 FARRER PARK RD
Address complement	#08-37
Postcode	210015
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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?	Yes
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

#### FOREIGN VEHICLE 1

Vehicle Registration Number	BLB6028
Vehicle Category	Commercial vehicle

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20210821/7025

#### 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	BLB6028
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Commercial vehicle
Passport No/FIN	ASNAN BIN AG SELAMAT
Contact Number	7XXXXXXXXX5439
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	KURUBALAN S/O MANICKAM
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SERIOUS
Injured person in which vehicle?	SGJ5116G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## ACCIDENT STATEMENT

ACCIDENT DATE: 19/8/2021 (DD/MM/YYYY), TIME: 18:45 (HH:MM)

LOCATION: P1E Toward Jurong

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SGJ 5116 G  
b) INSURANCE COMPANY: MSIG Insurance  
c) POLICY NUMBER: 80050402  
d) POLICY TYPE: COMPREHENSIVE (THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: NISSAN Sunny  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: Pte Use  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

### 2. INSURED / POLICY HOLDER

- A) NAME: Kurubalan s/o Manickam Rengaraju (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S1336278-B CONTACT: 90088003  
c) ADDRESS: Blk 15 Farrer Park Road #08-37  
S 210015

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

#### DRIVER

- a) NAME: As Above (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 31/10/1957 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 23/05/2001

### 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Owner

### 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: Traffic Police

### 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: ~~BLB~~ BLB 6028 MODEL: Prime Lorry  
b) DRIVER'S NAME: Asnan Bin Ag Selamat  
c) NRIC/FIN/PASSPORT: 780706-12-5439 CONTACT: \_\_\_\_\_

### 9. THIRD PARTY VEHICLE

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

\* No of passenger  
(including driver)  
(1)

\* No of passenger  
(including driver)  
(1)

\* No of passenger  
(including driver)  
(1)

Email = Kurubalan @ hotmail . com

fax =

VIDEO = NIL

## 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 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.

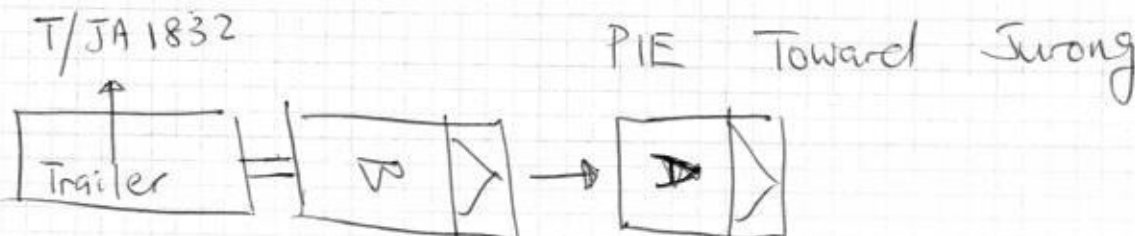
R. K. K. K.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan



(A) SGJ 5116 G

(B) BLB 6028



**Describe Circumstances of the Accident**

Refer To Police Report NO: T/20210824/7025

**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



# SINGAPORE POLICE FORCE



T/20210824/7025

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 4

Report No. T/20210824/7025

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/08/2021 17:17	Vide Report No.:	Station Diary No.:
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### Informant's Particulars

Name of Informant: KURUBALAN S/O MANICKAM RENGARAJU			Address: 15 FARRER PARK ROAD #08-37 SINGAPORE 210015		
ID Type / ID No.: NRIC NO / S1330278B			Contact No.: Home/Office: Mobile: 90088003		
Nationality: SINGAPORE CITIZEN			Email: kurubalan@hotmail.com		
Sex: Male	Age: 63	Date of Birth: 31/10/1957	Type of Informant: Driver		
Race: Indian			Language: English	Institution / School Name:	
Occupation: Advocate/Solicitor			Driving Licence Information: Class:	Date of Expiry:	

### General Information of the Accident

Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 19/08/2021 18:45	Type of Location: Straight Road
Location:  PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
BLB6028	PRIME MOVER LORRY					0
SGJ5116G	Car	NISSAN	SUNNY 1.6EXA	Beige		0

### Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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# SINGAPORE POLICE FORCE



T/20210824/7025

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20210824/7025

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGJ5116G	MSIG INSURANCE (SINGAPORE) PTE. LTD.	300333337	13/07/2021	12/07/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	KURUBALAN S/O MANICKAM RENGARAJU		ID No.	S1330278B
Related Vehicle	SGJ5116G (Car)		Contact No.	90088003
Hospital/Clinic	RAFFLES HOSPITAL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	19/08/2021		Date	19/08/2021
No. of Days granted Medical Leave		05	Degree of	Serious

### Brief Details.

On 19 August 21, at about 1845 hours travel from Thompson Rd into Whitley Road to enter Pan Island Expressway (PIE). The traffic was slow moving. My motor vehicle SGJ 5116G entered the 3rd lane of the PIE. After I joined the PIE, the vehicles were moving at very slow rather snail phase. To my left was turning lane for traffic going to Whitley Road in the direction of Steven Road. While my car was keeping phase with the traffic for about half minute. All of a sudden there was a strong impact to the rear. My car was thrust forward from the impact, I was thrown against my steering. Before I could recover from the sudden impact and shock there was another impact while I was trying to look back. Then my car was pushed further and the impacting Prime Mover with large trailer did not seem to apply the brake. I felt someone was doing it deliberately. After pushing and impacting for about 50 seconds the Huge Lorry/ Prime Mover stopped. I got down with my handphone in Video mode. I asked the driver a Malay Gentleman why he did what he did causing serious damage. The whole of rear booth was smashed in. He said he was looking to his rear and did not

Notice my car. He did even know that he has crashed into my car. He was sorry and panicky. So I related and asked him to confirm the cause of accident for me to record the facts and factors causing the collision.

We did not want to block the traffic, so we quickly exchanged particulars, than went to the point where he crashed into my car to recover the Lorry's front number plate for me to record the Lorry Registration Number. He said it is his company Lorry and it is registered in Johore Bahru.

The name of driver Asnan Bin Ag Selamat holder of Malaysian identity card no. 780706-12-5439

The offending Lorry number BLB 6028 and attached trailer T/JA 1832.

I told him not to worry but to contact me and provide his company and the Lorry's Insurance Details. He promised to come on Saturday to complete reporting formalities in Singapore.



**SINGAPORE  
POLICE FORCE**



T/20210824/7025

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20210824/7025

**CONTINUATION OF REPORT**

The rear tyre were not jammed. So I drove slowly to the Whitley Road, turned into Bukit Timah Road and stopped beside Steven MRT in the Pathway that enters into the school, Singapore Chinese Girls School. As the traffic flow was not heavy, I slowly drove the car to my carpark at Farrer Park Road with the hazard light switched on.

I felt a little disoriented immediately after impact but was able hold myself and deal with the situation. I felt a little dizzy and general pain over the neck, both shoulders

And lower back. I came home had some food and took two Ponstan pain killers and laid down in my bed for about two

Hours, after which I took a taxi to Raffles Hospital. The doctor ordered various x-rays and scan. I stayed for about three hours and I was told by the doctor that some clinical aspects has been outsourced and there will be delay to get results. I was given the option to go home and the doctor promised to call. I was given pain killers and five days medical sick leave.

This morning I had general discomfort and pain along the same areas of the body. I took the prescribed pain killers and that has been quite relief.



**SINGAPORE  
POLICE FORCE**



T/20210824/7025

4 of 4

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20210824/7025

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
SYED ZAYID MUHAMMAD BIN SYED ABDUL  
WAHID ALHINDUAN  
Contact No.: 65476404

Authentication Stamp

NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
24/08/2021 17:17

Classification Of Case:

## MOTOR INSURANCE COVER NOTE

**Cover Note No. 80050402**

The Insured named in the Schedule below having proposed for insurance in respect of the Motor Vehicle described in the Schedule below the risk is hereby HELD COVERED in the terms of the Company's usual form of Policy applicable thereto for the period as stated below 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 otherwise payable for such insurance will be charged for the time the Company has been on risk.

### SCHEDULE


<b>Agent No.</b>	: 219101
<b>Name of Insured</b>	: Kurubalan s/o Manickam
<b>Make and Description of Vehicle</b>	: Nissan Sunny 1.6EXA
<b>Vehicle Registration No.</b>	: SGJ5116G
<b>Year of Manufacture</b>	: 2006
<b>Engine No.</b>	: QG16410274
<b>Chassis No.</b>	: JN1CFAN16Z0101683
<b>Capacity</b>	: 1,597 Cubic Capacity
<b>Cover Type</b>	: Third Party
<b>Sum Insured (SGD)</b>	: Market Value
<b>Period of Insurance</b>	: 13/07/2021 to 12/07/2022
<b>Excess (SGD)</b>	: As Agreed

I/We hereby certify that this Cover Note is issued in accordance with the Provisions of the Motor Vehicles (Third Party Risks & Compensation) Act (Cap. 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

Not valid unless countersigned by the  
**Company's Authorised Representative**

  
 Authorised Representative

**MSIG Insurance (Singapore) Pte. Ltd.**  
 Authorised Insurers

  
 Katherine Yeo  
 Senior Vice President, Brokers

**Date of Issue :** 07/07/2021

**This Cover Note is valid for 30 days from the date of issue.**