

# NATIONAL Assessment Centre Services

Date In: 09/09/21	Job description	Date & Time Completed	Done by
Ref No: NA/CTE21009501/12	SAS e-filing		
Veh No: SKC45187	E-mail (within 2hrs, AP, 2hrs)		
DOA: 08/09/21	i-Motor Claim Form		
OD: (P) Reporting Only	i-Motor W/O (Within: QD 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: SKC7386U	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

NA2103429	<b>Invoice Preparation Checklist</b>	Ant (\$) 1st Bill	Ant (\$) 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 (Non 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	09/09/2021 17:47 (SGT)
Date of Accident	08/09/2021 14:20 (SGT)
Exact Location of Accident	Sims Way, Singapore
Additional Location Information	TRAFFIC LIGHT JUNC AFTER PIE EXIT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU4518T
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TIMOTHY YEO BOON HONG
NRIC No	SXXXX020D
Email Address	p0634715@gmail.com
Mobile Phone No	(Phone) +65-90216555
Alternative Phone No	+65-90216555

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Freed
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	1496

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00095442101
Cover Note Number	-

#### DRIVER

Name of Driver	TIMOTHY YEO BOON HONG
NRIC No	SXXXX020D

Date Of Birth	22/08/1988
Occupation	Outdoor
Date Of Driving Pass	18/03/2008
Driving experience	13 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90216555
Alt. Phone Number	+65-90216555
Email Address	p0634715@gmail.com
Address	BLK 34 BAYSHORE ROAD
Address complement	#29-08
Postcode	469976
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?	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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	HUANG WENQING
Gender	Male

#### PASSENGER 2

Name	VIVIAN ONG YU QI
Gender	Female

#### PASSENGER 3

Name	TAN XING YING CLARENCE
Gender	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
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	SKC7386U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
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	TIMOTHY YEO BOON HONG
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SJU4518T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

##### INJURED 2

Name of injured person	HUANG WENQING
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SJU4518T
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

##### INJURED 3

Name of injured person	VIVIAN ONG YU QI
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SJU4518T
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

##### INJURED 4

Name of injured person	TAN XING YING CLARENCE
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SJU4518T
Were seat belts worn?	-
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.
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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

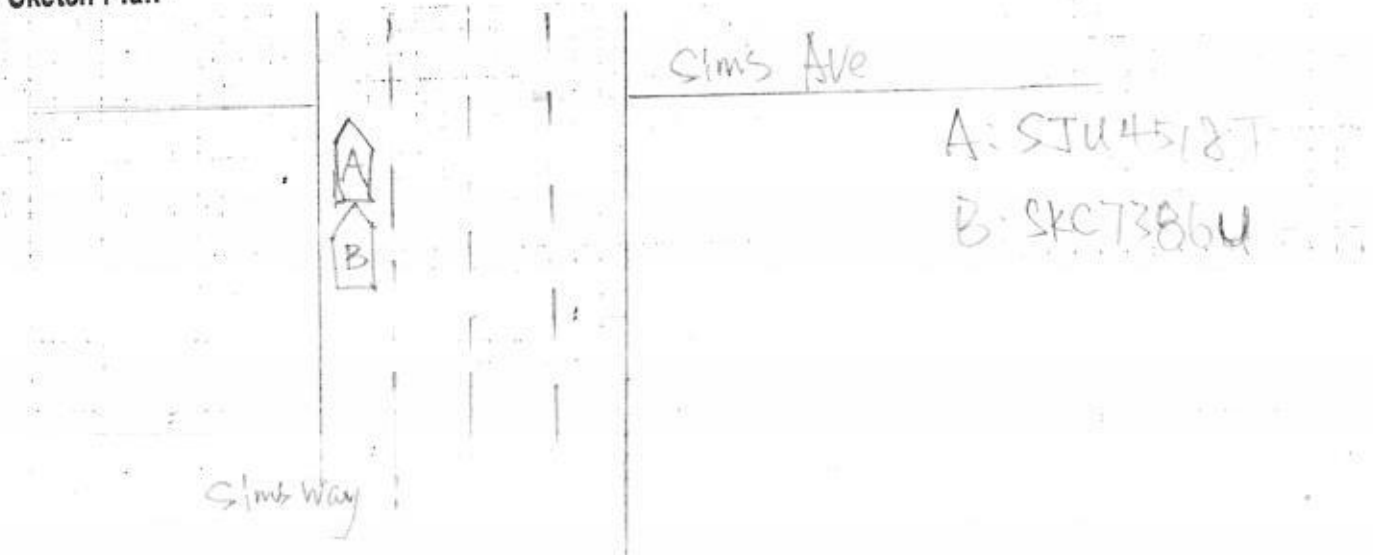
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date &  
Time

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

  
Witnessed by Reporting Centre  
Personnel

### Sketch Plan




### Describe Circumstances of the Accident


On 08.09.2024 @ 14:20pm I was drive vehicle A STU4518T along Sims way from PIE, waiting for traffic light at Sims Ave junction. Suddenly I hear a bang, Sound ~~for~~ and felt an impact from behind vehicle B SKC7386U was collided onto back portion of my vehicle.

### 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

 09/09/24  
Witnessed by Reporting Centre Personnel





# SINGAPORE POLICE FORCE



G/20210909/7022

1 of 4

## POLICE REPORT (NP299)

Report No. G/20210909/7022

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No:1800-2440000

Date/Time Report Made 09/09/2021 11:46	Vide Report No.	Station Diary No.
Name Of Informant TIMOTHY YEO BOON HONG	Address 34 BAYSHORE ROAD #29-08 SINGAPORE 469976	
ID Type / ID No. NRIC NO / S8832020D	Contact No. Home/Office:	Mobile: 90216555
Nationality SINGAPORE CITIZEN	Email Address p0634715@GMAIL.COM	
Occupation Electrical engineering technician (general)	Sex Male	Age 33
Institution/School Name	Date of Birth 22/08/1988	Race Chinese
Date/Time Of Incident 08/09/2021 14:25 - 08/09/2021 15:30	Location Of Incident Traffic light junction after PIE exit to Sims Way	

### Brief details.

I, Timothy Yeo Boon Hong S8832020D was driving vehicle number SJU4518T, Honda Freed. There were 3 other of my colleagues in the car with me at the time of the accident. Huang Wenqing@Isaac Huang, Ong Yu Qi Vivian and Tan Xing Ying Clarence.

My vehicle just exited the PIE and driving towards Sims way. I was driving on the most left lane and drove to a stop at the traffic light which was red.

Around a minute later a silver Toyota altis vehicle number SKC7386U rear ended my car. The impact

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 09/09/2021 11:46
Officer In-Charge Of Case:	Classification Of Case:





was so huge that my car move forward almost 1 car length shattered my rear window and seriously damage my rear door.

The driver of SKC7386U, Kwek Kha Hua, S0760751B exited her car and complain she has shortness of breathe and couldn't step on the break. My colleague(Huang Wenqing@Isaac Huang) called for the ambulance shortly to check on her. The traffic police officer arrive shortly afterwards to take down both drivers particulars and a rough statement on what happened.

The ambulance left after the checks and no one was convey to the hospital.

The other driver's family members arrived on site around 1500hrs.

The Traffic police officer brief both myself and the driver's son in law on what to do afterwards and allow us to leave.

We left the accident site at around 1530hrs.

Later in the evening myself and my 3 colleagues felt some discomfort and went to seek medical treatment.

I felt pain on my left arm and lower back.

We were given medical leave.

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

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

Date/Time:  
09/09/2021 11:46

Classification Of Case:



**SINGAPORE  
POLICE FORCE**



G/20210909/7022

3 of 4

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210909/7022

Timothy Yeo Boon Hong : 2 days  
Huang Wenqing@Isaac Huang : 5 days  
Ong Yu Qi Vivian: 4 days  
Tan xing ying Clarence : 3 days

Subjects Involved			
Suspect			
Person Name	Kwek Kha Hua		
ID Type	NRIC NO	ID No	S0760751B
Gender	Female	Age	78-78
Race	Chinese	Language	Chinese
Occupation	Retiree	Relation To Informant	Nil
Victim			
Person Name	Huang Wenqing@Isaac Huang		
ID Type	NRIC NO	ID No	S8814626C
Gender	Male	Age	33
Race	Chinese	Language	English
Occupation	Electronics engineering technician (general)	Mobile No	96222733
Relation To Informant	Colleague		

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

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

Date/Time:  
09/09/2021 11:46

Classification Of Case:



**SINGAPORE  
POLICE FORCE**



G/20210909/7022

4 of 4

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210909/7022

Person Name	Ong Yu Qi Vivian		
ID Type	NRIC NO	ID No	S9737507J
Gender	Female	Age	23
Race	Chinese	Language	English
Occupation	Electrical engineer (general)	Mobile No	97373605
Relation To Informant	Colleague		
Person Name	Tan Xing Ying Clarence I		
ID Type	NRIC NO	ID No	S8937134A
Gender	Male	Age	32
Race	Chinese	Language	Chinese
Occupation	Electronics engineer (general)	Mobile No	96731700
Relation To Informant	Colleague		
Person Name	TIMOTHY YEO BOON HONG		
ID Type	NRIC NO	ID No	S8832020D
Gender	Male	Age	33
Race	Chinese	Language	English
Occupation	Electrical engineering technician (general)	Address	34 BAYSHORE ROAD #29-08 SINGAPORE 469976
Mobile No	90216555	Is Informant A Victim?	Yes
Person Name	TIMOTHY YEO BOON HONG (Informant)		

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

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

Date/Time:  
09/09/2021 11:46

Classification Of Case:

VEHICLE NO:

SJU4518T

MAKE &amp; MODEL :

Honda Freed

AUTO / MANUAL

DATE OF ACCIDENT	08/09/2021	*C.C.
TIME OF ACCIDENT	14:20 AM / PM	
LOCATION OF ACCIDENT	Sims Way	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	Yeo Boon Hong	
EMAIL:	p0634715@gmail.com	Office: MOBILE: 90216555
NRIC	S8832020D	
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY	
FLEET POLICY:	YES / NO ?	
INSURANCE CO.	Comprehensive / Third Party / Third Party Fire & Theft	
TYPE OF COVERAGE	DMPCSNW000 95442101	
POLICY NO.	AS ABOVE / IF NO.	
NAME OF DRIVER		
NRIC		
DATE OF BIRTH	/ /	
ANY PASSENGER	YES / NO : 3	
NAME OF PASSENGER	Huang Wengqing, Vivian Ong Yu Qi, Tan Xing Ying	
GENDER OF PASSENGER	MALE / FEMALE	clarence
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	03/07/2009	
GENDER	Male / Female	
CONTACT NO.	Mobile: Office: Home:	
EMAIL:		
ADDRESS		
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No.	INSURER:
RELATIONSHIP	Employee / If No.	
WEATHER CONDITION	Clear / Raining / Other :	
ROAD SURFACE	Dry / Wet / Other :	
ANY INJURIES	No / If yes, Who?	
CONTACT NO.		
POLICE REPORT	No / If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO/IF YES, WHO?	
VEHICLE B NO.	SKC7386U	Any Passenger :
NAME	KWEK KHA HUA	
CONTACT NO.		Any Passenger :
VEHICLE C NO.		Any Passenger :
VEHICLE D NO.		Any Passenger :
VEHICLE E NO.		Any Passenger :
VEHICLE F NO.		Any Passenger :
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / NO	
WAS THERE ANY AUDIO RECORDED?	YES / NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / NO	
**WORKSHOP:	stkauto.sg@gmail.com	
Have you been approach by unknown person soliciting (s) /		
offering accident claims assistance?	YES / NO	

Motor Private Car

MX1F

R SN

AN0679A

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, 1956 (Malaysia)

CERTIFICATE No.

DMPCSNW00095442101

Engine No.: L15A2337895

Cha. No.: GB31037450

1. Index Mark and Registration  
Number of Vehicle

SJU4518T

AUTOSAFE

\*\*\*\*\*

2. Name of Policy Holder

TIMOTHY YEO BOON HONG

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

10/06/2021  
(00:00:00)

Named Drivers Ex Sect. I \$5500.00  
Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 \$53,000.00

Ex Sect. I - Age >= 26 \$5500.00

\* Age as at date of accident

EX ON WINDSCREEN \$5100.00

4. Date of Expiry of Insurance

09/06/2022

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

(a) The Policyholder,

(b) Any other person who is driving on the Policyholder's order or with his 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\*

Use for social, domestic and pleasure purposes and for the Policyholder's business.  
The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first \$5500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

\* 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: ABWN PTE LTD  
Authorised Officer

  
Authorised Signatory