

# NATIONAL Assessment Centre Services

Date In: 10/09/21	Job description	Date & Time Completed	Done by
Ref No: NAT102933	SAs e-filing		
Veh No: SL68229	E-mail (within 8hrs. AP: 2hrs)		
D.O.A: 09/09/21 1350	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: SLN1555B	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

NAT102933	<b>Invoice Preparation Checklist</b>	Amt (\$) 1st Bill	Amt (\$) Add Bill
<b>Claimant's Particulars :-</b>	1) AR : Accident Reporting (\$30);		
<b>Driver/Owner:</b>	2) DA : Damage Assessment (\$100); INC (\$80)		
<b>Contact No:</b>	3) TF : Towing Fee \$40/\$45		
<b>Damaged Portion:</b>	4) FT : Follow-Through Survey \$120		
<b>QC Checked by (Engr-In-Charge):</b>	5) FT : Follow-Through Survey (Resurvey) \$30		
<b>Auditors' Comments :-</b>	For claiming against INC Only (wef 10 Jan 2005)		
<b>Cat. 1:</b>	6) TR : Re-inspection \$75		
<b>Cat. 2 / 3:</b>	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		
	TP (N11) : TP (Non-INC) against INC \$20		
	9) N12: Idac Mobile 30		
	Invoice date:1	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	10/09/2021 16:52 (SGT)
Date of Accident	09/09/2021 13:50 (SGT)
Exact Location of Accident	BKE, Singapore
Additional Location Information	TOWARDS PIE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC6822Y
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LQW LEASING
Company Reg No	5XXXX044M
Email Address	ramlandollah@gmail.com
Mobile Phone No	(Phone) +65-88692498
Alternative Phone No	+65-88692498

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Previa
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	2362

#### INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D21MFL0005721
Cover Note Number	-

#### DRIVER

Name of Driver	RAMLAN BIN DOLLAH
NRIC No	SXXXX884E

Date Of Birth	04/04/1962
Occupation	Outdoor
Date Of Driving Pass	14/10/1991
Driving experience	29 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88692498
Alt. Phone Number	-
Email Address	ramlandollah@gmail.com
Address	BLK 907 TAMPINES AVE 4
Address complement	#06-284
Postcode	520907
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PASSENGER
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Ang Mo Kio Division Headquarters
Police Station Phone No	(Phone) +65-18002180000
Alt. Police Station Phone No	(Fax) +65-64814246
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
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	SLN1535B
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	RAMLAN BIN DOLLAH
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SLC6822Y
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.

ASING  
RDC: 53395044M  
RDC: 53395044M



*[Signature]* 10/09/21

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

BKE WAS PIE

**Sketch Plan**



**Describe Circumstances of the Accident**

On the stated date and time, I vehicle A has come to a complete stop on the stated venue due to traffic congestion in front. Suddenly, I felt a huge impact on the rear of my vehicle. The impact was so huge that it made my vehicle propel forward. I then came down to check and realised that it was vehicle B who have collided onto my vehicle.


**Declaration**

We declare the foregoing particulars are true in every respect.

LQW LEASING  
RDC: 53396044H

\_\_\_\_\_  
Policyholder's Signature / Date & Time

  
\_\_\_\_\_  
Driver's Signature (if driver is not the policyholder) / Date & Time

 10/09/21  
\_\_\_\_\_  
Witnessed by Reporting Centre Personnel





**SINGAPORE  
POLICE FORCE**



F/20210909/7054

1 of 1

**POLICE REPORT (NP299)**

Report No. F/20210909/7054

Police Station Of Origin  
Ang Mo Kio Division HQ  
51 Ang Mo Kio Avenue 9 SINGAPORE  
569784  
Tel No:1800-2180000

Date/Time Report Made 09/09/2021 22:29	Vide Report No.	Station Diary No.
Name Of Informant RAMLAN BIN DOLLAH	Address 907 TAMPINES AVENUE 4 #06-284 SINGAPORE 520907	
ID Type / ID No. NRIC NO / S1569884E	Contact No. Home/Office:	Mobile: 88692498
Nationality SINGAPORE CITIZEN	Email Address ramlandollah@gmail.com	
Occupation PHV driver	Sex Male	Age 59
Institution/School Name	Date of Birth 04/04/1962	Race Malay
Date/Time Of Incident 09/09/2021 13:50	Location Of Incident BUKIT TIMAH EXPRESSWAY	

**Brief details.**

On the stated date and time I was ferrying a female passenger on board vehicle SLC6822Y. I was stationary on the stated venue. Suddenly vehicle SLN1535B came from behind and hit onto my vehicle rear portion. The impact causes me injury to my neck, back and shoulders. My knees also feels some pain.  
I later then go to Our Family Physician Clinic and surgery at tampines to seek treatment and was given 5 days MC.

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 22:29
Officer In-Charge Of Case:	Classification Of Case:

Date of Accident : 09/09/2021 Accident Time: 1350 (24-HR-Format)

Accident Place : BKE twds PIE

Vehicle No. (Car Plate No.) : SLC 6822Y Make/Model: Toyota prius

Insurance Company : INDIA Policy No: D21MFL0005721

Owner or Company Name /IC No. : LQW Leasing (53395044M)

Owner or Company Contact No. : — Owner's Hp — Company Tel —

DRIVER'S Name / IC No. : Ramian Bin Dillah (S1569884E)

DRIVER'S Date Of Birth : 04/04/21 DRIVER'S License Pass Date 14/10/1991

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: HIRER

DRIVER'S Address : 907 Tampines Ave4 #06-284 S(520907)

DRIVER'S Contact No./ Alt No. : 1) 8869 2498 2) —

DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)

Email Address : RAMLANDULLAH@gmail.com

Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET

Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (Including Driver): 2

Was the accident reported to the police? YES \ NO

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Any Injury (If YES, Pls state): Driver only.

**Other Party Driver's Particular (if any)**

Vehicle No: <u>SLN1535B</u>	Vehicle No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

**\* NEW - Passenger's name & gender:**

1. Gojek Female passenger



## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1986 ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D21MFL0005721

COVER: Comprehensive

1. **Index Mark and Registration Number of Vehicle** : SLC6822Y  
**Chassis No** : JTEGD54M50A016293  
 2. **Name of Policyholder** : LQW LEASING  
 3. **Effective date of Insurance** : 07 Aug 2021  
 4. **Expiry date of Insurance** : 06 Aug 2022

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

Any person who is driving on the Policyholder's order or with their permission.

The Hirer.

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.

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 the carriage of passengers or goods in connection with the Policyholder's business.

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, speed-testing.
- (2) Use for the carriage of goods other than samples in connection with any trade or business.
- (3) Use for any purpose in connection with the Motor Trade.

\*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.

Excess Section I WITHIN SINGAPORE	: SGD	5,000.00
Excess Section II WITHIN SINGAPORE	: SGD	3,000.00
Windscreen Excess	: SGD	100.00
Hire Purchase Company	: N.A	

WARRANTY EXCESS : SGD 500.00

WARRANTY BENEFIT FOR ENGINE AND GEAR BOX ONLY

THE VEHICLE IS STRICTLY TO BE DRIVEN BY THE PERSON TO WHOM THE VEHICLE IS HIRED & THE HIRER IS NOT ALLOWED TO SUBLET THE VEHICLE TO ANOTHER PARTY.

DRIVERS MUST BE BETWEEN 24 TO 69 YEARS OF AGE & WITH AT LEAST 2 YEARS OF SINGAPORE DRIVING LICENCE.

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).

Agent/Broker : A000087/FINSURETEQ AGENCY PTE LTD  
 Date of Issue : 05/08/2021 17:39:53  
 MZ406 - Hire Car (Hired Driving)

For India International Insurance Pte Ltd



Authorised Signatory

1 TAMPINES NORTH DRIVE 1 #01-28 T-SPACE SINGAPORE 628559

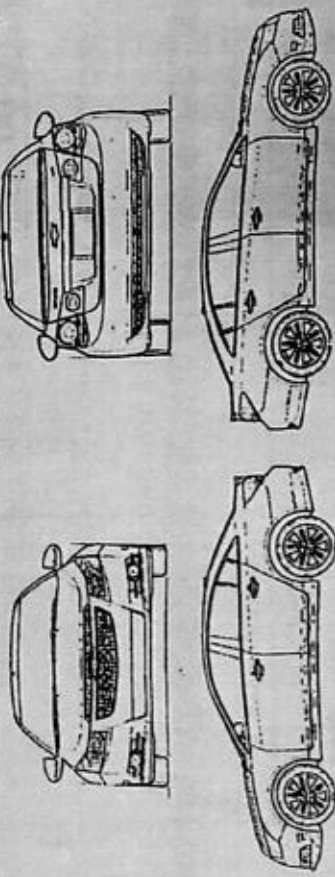
## Rental Agreement Form

<b>Applicant Information</b>	
Name	RAMLAN BIN. DOLLAH
NRIC	S1569884E
Gender	Male / Married
Mobile No	8869 2498
Date Of Birth	14th OCT 1991
Address (Stated in NRIC)	BLK 907 TAMPINES AVE4 #06-284 Singapore (520907)
Correspondence address	Singapore ( )
<b>Employment Information</b>	
Driving License Pass date	
Company	
Company address	
Office Phone	
Fax	
<b>Information of Next of Kin - Guarantor</b>	
Name	SUTITAH BIE SAYET
Relationship	WIFE
NRIC	S1579084D
Mobile No	81110626
Address (Stated in NRIC)	AS ABOVE
<b>Vehicle Details</b>	
Vehicle Registration No	(No. SBA1234U) SL668224
Make / Model	(No. Honda Civic 1.8A White) Toyota Previa 7 Seater. 24A
Transmission	Manual / Automatic / Semi auto
<b>Lease Details</b>	
From	29/7/2020
To	28/01/2021
Agreed sum of lease	\$420/week (Deposit \$420)
Terms of payment	daily / Weekly / Monthly
Collection Date & Time	27/7/2020 1pm
Return Date & Time	
This agreement contract is valid for 6 months. contract will be auto renew if driver never give notice to return in any occurrence of change of vehicle. a new agreement will be written	
<b>Vehicle Details</b>	
Vehicle upon lease	
Fuel upon collection	
Other Remarks	



E	1/4	1/2	3/4	F
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Vehicle Condition - Please mark, damaged / scratched area upon collection



### Terms & Conditions:

- The "Applicant" will abide the following rules upon lease of the vehicle:
  - (a) All regulations and laws governed by Singapore Police Force.
  - (b) Insurance coverage solely to "Applicant" only, any other(e) charges will be borne by the "Applicant" in an event of an accident or similar occurrence.
  - (c) Diligence to operate the vehicle in a proper manner, in any occurrence of negligence, charges would to be borne by "Applicant"
  - (d) Not to use the vehicle to:
    - (i) push or tow another vehicle.
    - (ii) participate in any race or competition
  - (e) Any violation of laws or traffic rules, charges will be borne by "Applicant"
  - (f) "Applicant" is hereby responsible to check and pay any violation as occurred during the period of lease, in an event of occurrence in which the violation is outstanding and to be enclosed by "LOW LEASING", additional charges applies per furnishing
  - (g) Inform correspondence 7 days in advance upon return of vehicle, if "Applicant" choose to omit this line, charge of 2 days rental would be imposed on "Applicant"
- "For "Applicant" whom lease the vehicle for Private Hire purposes
  - Daily/ Weekly/ Monthly rental will be deducted from the Private Hire reimbursement weekly.
  - Payment must make by every Monday or latest by Tuesday 2359hrs "Approval based on correspondence of LOW LEASING."
  - 12% of late charge will be imposed if payment transaction was not completed.
  - In the event if driver is unable to fulfil the payment of the vehicle in 2 days of demand by correspondence, LOW LEASING reserve the rights to repossess the lease vehicle and recover the payment from the "Applicant" Next-of-Kin / guarantor through legal / court proceedings. Additional or Miscellaneous Charges will be borne by "Applicant"
- "Applicant" is required to return LOW LEASING for a weekly periodic maintenance to ensure that the lease vehicle is as per lease condition. "Applicant" will bear all repair / damage / modification done on the lease vehicle to return as per previous condition if this line is ignored.
- Vehicle is only to be used and driven in Singapore. In any occurrence, "Applicant" is to use the vehicle out of Singapore, all cost will be borne by "Applicant". "Applicant" is liable to pay the market value of the vehicle at point of loss and inclusive of all damages and demands of losses to LOW LEASING upon the occurrence of loss vehicle reported.
- Accident Excess SGD 32,500 For Age Above 22 Yrs Old, License 2 Yrs. If Accident Driver Have To Pay For All Repair, Rental And Excess Fee
- If we acknowledge that my/our personal data may/will be disclosed by LOW LEASING to its third party service providers or agents (including its lawyers / law firms / authority of Singapore), which may be situd outside of Singapore, for one or more of the Purposes, as such third party service providers or agents.

I hereby, the "Applicant" have fully read and agrees to the terms of LOW LEASING.

  
 27/7/20.  
 Representative of LOW LEASING