

NATIONAL Assessment Centre Services

200821900004

Date In: 20/09/2021
Ref No: NBR/CT/210099804
Veh No: GBC 833K
D.O.A: 20/09/2021 14:20

Job description
SAS e-illing
E-mail (by date time, A/C time)
1-Motor Claim Form
1-Motor W/O (Within 60 days, TP 100%)
1-Photo Uploaded
Assessment/Survey Report
Assessment Report by Max/Hand to Owner/VV/Ins

Date & Time Completed
Done by

(1) : TP / Reporting Only

TP Insurer:

Preferred Wkep / INO Assen Wkep / OW:

TP Print/Query Vch No: SK7 7463R

Owner / Driver:

Policy No:

Period:

INC () / Non-INC ()

Tel:

Cover Type:

Confirmed by:

Insured/Driver Liability:

(%) [Note: Est Status (WO): NI: 0-20%; PI: 21-75%; FI: 80-100%]

Year of Registration:

Warranty: YES () / NO ()

Deductible (\$)

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

() Walk-In Customer: Customer's Information strictly Confidential & strictly NO Referral of Repolar

() Total Loss Case: to e-mail Insurer URGENTLY

Drive-In () / Towed-In () : Invoice: VRS () / NO () : Towing Co: ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QO Check / Post Repair Inspection

3) Upload Resurvey Photo (Repair Costs > \$3000)

Injury:

NA2103967

Driver/Owner:

Contract No:

Damaged Portion:

QC Checked by (Engin-In-Charge):

1) All Additional Insurance (30%)	INC (40)
2) DA: Damage Assessment (\$100)	\$100.00
3) PT: Follow Up	\$130
4) PT: Follow Up Survey	\$30
5) PT: Follow Up Survey (Resurvey)	\$75
6) PT: Follow Up Survey (W/O 100%)	\$160
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100) PT: Follow Up Survey	

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	22/09/2021 16:45 (SGT)
Date of Accident	20/09/2021 19:20 (SGT)
Exact Location of Accident	Punggol Dr., Singapore
Additional Location Information	TOWARDS PUNGGOL ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK8331K
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ABS LEASING SERVICES PTE LTD
Company Reg No	2XXXXX528D
Email Address	john.pyj@hotmail.com
Mobile Phone No	(Phone) +65-92966056
Alternative Phone No	+65-92739983

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	Auto
CC	2754

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00123522000
Cover Note Number	-

DRIVER

Name of Driver	LER YONG SING
NRIC No	SXXXX746C

Date Of Birth	31/05/1967
Occupation	Indoor
Date Of Driving Pass	09/05/1992
Driving experience	29 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92739983
Alt. Phone Number	-
Email Address	john.pyj@hotmail.com
Address	BLK 297A COMPASSVALE STREET #10-44
Address complement	-
Postcode	541297
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?	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	SKT7463R
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)	-

SKETCH PLAN

IMPORTANT NOTICE

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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.
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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

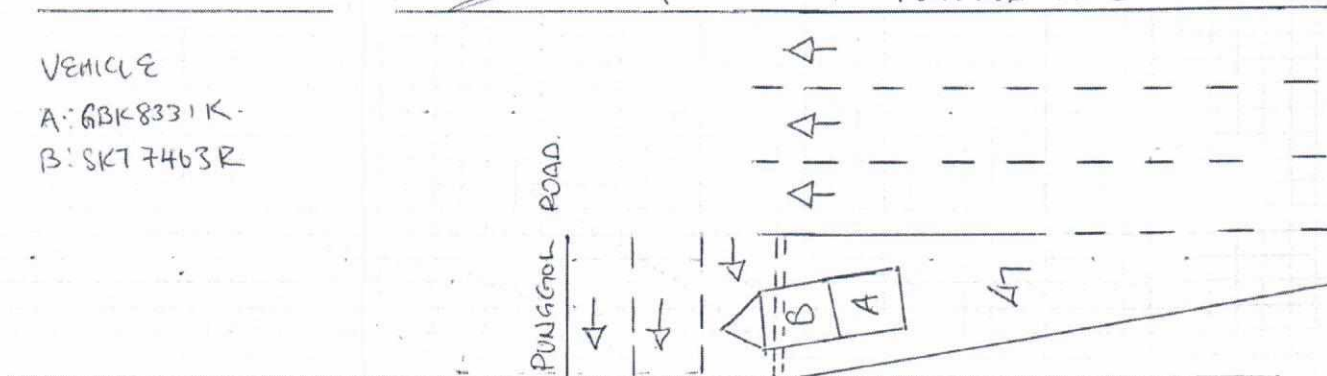
VEHICLE

A: GBK 8331 K

B: SKT 7463 R

PUNGGOL ROAD

PUNGGOL DRIVE



Describe Circumstances of the Accident

ON THE STATED DATE, TIME AND LOCATION, I WAS TRAVELING
ON PUNGOL DRIVE TO PUNGOL ROAD. WHILE ENTERING INTO THE
ZEBRA CROSSING IN FRONT OF MY VEHICLE THERE WAS VEHICLE "B".
I DID NOT NOTICE VEHICLE "B" STOPPED AND COLLIDED ONTO VEHICLE
"B" REAR. THERE WAS A PASSENGER SITTING IN VEHICLE "B" BACK
SIT.

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

VEHICLE NO: Q8K8331K	MAKE & MODEL: TOYOTA HIACE	<input checked="" type="checkbox"/> AUTO <input type="checkbox"/> MANUAL
DATE OF ACCIDENT	20 / 09 / 2021	T.O.C.
TIME OF ACCIDENT	1920	AM / <input checked="" type="checkbox"/> PM
LOCATION OF ACCIDENT	PUNGGOL DRIVE 2 PUNGGOL ROAD.	
EXACT PURPOSE USED AT TIME OF ACCIDENT	<input checked="" type="checkbox"/> EMPLOYMENT / <input type="checkbox"/> PRIVATE USE / <input type="checkbox"/> PRIVATE HIRE	
NAME OF OWNER	ABS LEASING SERVICES PTE LTD	
EMAIL	JOHN.PYJ@HOTMAIL.COM	Office: MOBILE: 9996 6056.
NRIC	201819558D	
CLAIM TYPE	OD / THIRD PARTY / <input checked="" type="checkbox"/> REPORTING ONLY	
FLEET POLICY	<input checked="" type="checkbox"/> YES / <input type="checkbox"/> NO	
INSURANCE CO.	CHINA TAIPING.	
TYPE OF COVERAGE	<input checked="" type="checkbox"/> Comprehensive / <input type="checkbox"/> Third Party / <input type="checkbox"/> Third Party Fire & Theft	
POLICY NO.	DMCVSNW00123522000	
NAME OF DRIVER	AS ABOVE / IF NO: LER YONG SING	
NRIC	S1828746C	
DATE OF BIRTH	31 / 05 / 1967	
ANY PASSENGER	YES / <input checked="" type="checkbox"/> NO	
NAME OF PASSENGER	—	
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	<input checked="" type="checkbox"/> Outdoor / <input type="checkbox"/> Indoor	
DATE OF DRIVING PASS	09 / 05 / 1992	
GENDER	<input checked="" type="checkbox"/> Male / <input type="checkbox"/> Female	
CONTACT NO.	Mobile: 9273 9983 Office: Home:	
EMAIL	JOHN.PYJ@HOTMAIL.COM.	
ADDRESS	297A COMPASSVALE STREET #10-44 541297.	
DOES DRIVER OWN OTHER VEHICLE?	<input checked="" type="checkbox"/> NO / If yes, Reg. No. Address:	
RELATIONSHIP	<input checked="" type="checkbox"/> Employee / If No: <input type="checkbox"/> HIRER.	
WEATHER CONDITION	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Raining / <input type="checkbox"/> Other.	
ROAD SURFACE	<input checked="" type="checkbox"/> Dry / <input type="checkbox"/> Wet / <input type="checkbox"/> Other.	
ANY INJURIES	<input checked="" type="checkbox"/> No / If yes, Who?	
CONTACT NO.	—	
POLICE REPORT	<input checked="" type="checkbox"/> No / If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	<input checked="" type="checkbox"/> NO / IF YES, WHO?	
VEHICLE B NO.	SKT7463R Any Passenger.	
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger.	
VEHICLE D NO.	Any Passenger.	
VEHICLE E NO.	Any Passenger.	
VEHICLE F NO.	Any Passenger.	
ANY WITNESSES		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / <input checked="" type="checkbox"/> NO	
WAS THERE ANY AUDIO RECORDED?	YES / <input checked="" type="checkbox"/> NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / <input checked="" type="checkbox"/> NO	
**WORKSHOP:		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?		
		YES / <input checked="" type="checkbox"/> NO



ABS LEASING SERVICES PTE LTD

WIN 5, 15 Yishun Industrial Street 1 #01-02, Singapore 768091

TEL : 6259 6590 FAX : 6933 9399 Email: enquiry@absleasing.com.sg

UEN No. 201819528D

RENTAL AGREEMENT

No. A20120025

Date: 12 Dec 2020

VEHICLE DESCRIPTION

Vehicle No. : GBK8331K
Make : TOYOTA
Model : HIACE DX 2.8 AUTO
Fuel type : Diesel

HIRER PARTICULARS

Name : THREEMAN LOGISTICS PTE LTD
Co Reg No./ NRIC : 202028753N
Address : 71 WOODLANDS INDUSTRIAL PARK E9 08-08 WAVE 9 Singapore 757048
Fax :
Contact Person : NG JIA HAO
NRIC : S9032553A
Tel : 84688191
Email :

MAIN DRIVER PARTICULARS

Name : NG JIA HAO
NRIC/FIN/Passport No : S9032553A

This Agreement constitutes the entire agreement between the Parties with respect to the subject matter hereof, and may be amended only by the written agreement of the Parties.

IN WITNESS WHEREOF, the parties hereby enter into this Agreement as of the date first above written

RENTAL DETAIL

Rental Start Date & Time : 12 Dec 2020 | 1100
Rental End Date & Time : 11 Oct 2021 | 1100
Rental Period : 10 months
Rental Per Month (excl. GST) : S\$ 1,300.00
Rental Per Month (incl. GST) : S\$ 1,391.00

Payment on :
Insurance Premium (for ABSL arranged Insurance) : CHINA TAIPING

PAYMENT

Deposit : S\$ 500.00
Upfront Rental : S\$ 1,391.00
Total Rental Fee (to be paid on signing of Agreement) : S\$ 1,891.00

IMPORTANT NOTE

Rental Fee is to be fully paid within 3 days from the date of our invoice
Hirer to ensure pumping correct FUEL TYPE listed above.
Hirer to conduct proper checks on the vehicle while using such as sufficient engine oil and coolant water etc.
Any unusual discovery of warning lights in the vehicle, Hirer are to consult ABSL for further assistance.



Signed by and on behalf of
ABS Leasing Services Pte Ltd
Position : Salesman
Name : Chan Siang Shan
Date :

Signed by and on behalf of
Position : DIRECTOR
Name : NG JIA HAO
NRIC : S9032553A
Date :





ABS LEASING SERVICES PTE LTD

WIN 5, 15 Yishun Industrial Street 1 #01-02, Singapore 768091

TEL : 6259 6590 FAX : 6933 9399 Email: enquiry@absleasing.com.sg

UEN No. 201819528D

INV 20120092

RENTAL AGREEMENT

No. A20120025

Date: 12 Dec 2020

VEHICLE DESCRIPTION

Vehicle No. : GBK8331K
Make : TOYOTA
Model : HIACE DX 2.8 AUTO
Fuel type : Diesel

HIRER PARTICULARS

Name : THREEMAN LOGISTICS PTE LTD
Co Reg No./ NRIC : 202028753N
Address : 71 WOODLANDS INDUSTRIAL PARK E9 08-08 WAVE 9 Singapore 757048
Fax :
Contact Person : NG JIA HAO
NRIC : S9032553A
Tel : 84688191
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Rental End Date & Time : 11 Mar 2021 | 1100
Rental Period : 3 months
Rental Per Month (excl. GST) : S\$ 1,300.00
Rental Per Month (incl. GST) : S\$ 1,391.00

Extend until further notice.

Payment on :
Insurance Premium (for ABSL arranged Insurance) : CHINA TAIPING

PAYMENT

Deposit : S\$ 500.00
Upfront Rental : S\$ 1,391.00
Total Rental Fee (to be paid on signing of Agreement) : S\$ 1,891.00

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Hirer to conduct proper checks on the vehicle while using such as sufficient engine oil and coolant water etc.
Any unusual discovery of warning lights in the vehicle, Hirer are to consult ABSL for further assistance.



Signed by and on behalf of
ABS Leasing Services Pte Ltd
Position : Salesman
Name : Chan Siang Shan



Signed by and on behalf of
Position : DIRECTOR
Name : NG JIA HAO
NRIC : S9032553A





中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ407/C

N SN

AN0597A

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, 1959 (Malaysia)

CERTIFICATE No.

DMCVSNW00123522000

Engine No.: 1GD8612795

Cha. No.: GDH2012014313

1. Index Mark and Registration
Number of Vehicle

GBK8331K

AUTOSAFE

=====

2. Name of Policy Holder

ABS LEASING SERVICES PTE LTD

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

11/12/2020
(12:39:23)

Excess Sect I . SS\$1,500.00

Excess Sect. II SS\$1,500.00

4. Date of Expiry of Insurance

10/12/2021

EX ON WINDSCREEN . SS\$100.00

5. Persons or Classes of Persons entitled to drive*

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

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use.*

(1) Use for racing, pace-making, reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

(3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

HIRE PURCHASE CO.: DBS BANK LTD

* 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: ABS INSURANCE AGENCY PTE LTD
Authorised Officer

Authorised Signatory