

NATIONAL Assessment Centre Services

Date In: 9/11/21	Job description	Date & Time Completed	Done by
Ref No: NA/EQ121011424/T1	SAS e-filing	✓	
Veh No: SLR 3605Z	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 8/11/21	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: SKA 6666D	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

Claimant's Particulars :-	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Driver/Owner:	1) AR : Accident Reporting (\$30);		
Contact No:	2) DA : Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF : Towing Fee \$40/\$45		
	4) FT : Follow-Through Survey \$120		
	5) RT : 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:-		
	ON*		
	*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 dated	Fee Charged	

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

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	09/11/2021 13:00 (SGT)
Date of Accident	08/11/2021 09:44 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	THE OCTAGON 105 CECIL STREET S069534
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR3605Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WANG XIANGWEI JASPER
NRIC No	SXXXX724C
Email Address	JWXWGONE@GMAIL.COM
Mobile Phone No	(Phone) +65-91374032
Alternative Phone No	(Office) +65-91374032

VEHICLE PARTICULARS

Manufacturer	Lotus
Model	Elise
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	Manual
CC	1598

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPPHQ21-006291
Cover Note Number	-

DRIVER

Name of Driver	WANG XIANGWEI JASPER
NRIC No	SXXXX724C

Date Of Birth	27/08/1991
Occupation	Indoor
Date Of Driving Pass	25/10/2010
Driving experience	11 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-91374032
Alt. Phone Number	(Office) +65-91374032
Email Address	JWXWGONE@GMAIL.COM
Address	63 CAVENAGH RD
Address complement	#06-07
Postcode	S229618
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 on collision
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 CIRCUMSTANCES OF ACCIDENT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKA6666D
Vehicle Manufacturer	BMW
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHAN KWANG CHENG
NRIC No	SXXXX395F
Contact Number	(Phone) +65-91512125

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

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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.
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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' law yers/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' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

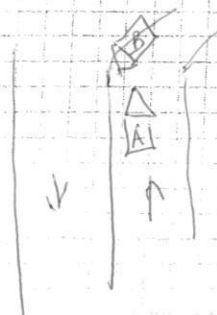
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A - SLR 3605Z

B - SKA 6666 D

The Octagon

105 Cecil St.

On 8 November 2021 at 0944. I was leaving the carpark of the Octagon after seeing my lawyer.

I kept to my lane and avoided a pillar on the right. I saw that the BMW was coming in the mirrors on the top left of the exit and I stopped to wait for him to let me notice and let me pass.

However, he continued to turn, ignoring my horns when he got nearer and eventually hit my stationary car.

He immediately reversed his car and came to me to apologise before I could photograph the incident (it was caught on my car dash camera). He claimed he did not see my car and was not looking at the mirror.

We exchanged contacts, took photos of the vehicles.

Declaration

We declare the foregoing particulars are true in every respect.

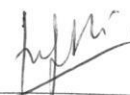
Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel



Date of Accident : 8/11/21 Accident Time: 0944 (24-HR-Format)
Accident Place : The Octagon, 105 Cecil Street, 2069534.
Vehicle Reg. No. (Car Plate No.) : SLR3605Z
Vehicle Make/Model : Lotus
Insurance Company : EQ insurance Policy No. _____
Owner or Company Name / IC No. : _____
Owner or Company Contact No. : _____ Owner's Hp 91374032 Company Tel _____
DRIVER'S Name / IC No. : Wang Xiangnei Jasper
DRIVER'S Date Of Birth : 27/08/91 DRIVER'S License Pass Date 25/10/2010
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others; _____
DRIVER'S Address : 63 Cavenagh Rd #06-07 5229618
DRIVER'S Contact No. / Alt No. : 1) 91374032 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : jwxwgone@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): 1
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

Other Party Driver's Particular (if any)

Vehicle Reg. No: SKA6666D
Vehicle Make/Model: BMW
Name Driver: Chan Kwang Cheng
IC No. Driver: E0011395F
Driver's Contact & Add: 91512125

Vehicle Reg. No: _____
Vehicle Make/Model: _____
Name Driver: _____
IC No. Driver: _____
Driver's Contact & Add: _____

PRIVATE CAR
Comprehensive Premier

Certificate No. : DMPPHQ21-006291

Comprehensive Plan - Any Workshop

Form: MX3

Excess:

Insured/Named Driver: S\$6,000.00

Ins/N Drvr-OutsideSG: S\$12,000.00

WdScrn/Snroot/Mnroof: S\$500.00

1. Index Mark and Registration Number of Vehicles

SLR3605Z

2. Name of Policyholder

WANG XIANGWEI JASPER

3. Effective Date of the Commencement of Insurance for the purpose of the Act

27/08/2021

4. Date of Expiry of Insurance

26/08/2022

5. Person or Classes of persons entitled to drive*

(a) The Policyholder

(b) The specific person(s) whose name is lodged in the Policy.

EQI Motor Accident
Hotline

6311 3211



* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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 has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover :

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing and on race track

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) use for any purpose in connection with the Motor Trade

(e) use by any other persons than those defined as entitled to drive in paragraph 5 above

*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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Genie Financial Services Pte Ltd

B000006/Anika Insurance Brokers & Consultants Pte Ltd

Date of Issue : 23/08/2021 11:07

Authorised Signatory
EQ Insurance Company Limited

Exp No. : DMPPHQ20-005870