

NATION 11 Assessment Centre Services

820821 CROODY

Date In: 27/12/2021 14:30	Vehicle Description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: X/BA/C92210/3178/1	E-mail (w/claim stat. Ab. 2hrs):		
Veh No: SBL 7777J	i-Motor Claim Form		
EOA: 25/12/2021 15:40	i-Motor W/O (Within 24 Hrs. 1P 4000)		
TP: TP Reporting Only	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: SJR 8201H	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 or 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 (\$) | Amt (\$) |
|---|----------|----------|
| 1st Bill | Add Bill | |
| 1) AR: Accident Reporting (\$30) | | |
| 2) DA: Damage Assessment (\$100), INC (\$30) | | |
| 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 2015) | | |
| 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 (N11 INC) against INC \$20 | | |
| 9) N12: Idac Mobile \$10 | | |

Invoice dated: _____ Fee Charged: _____

Invoice dated: _____ Fee Charged: _____

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

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	27/12/2021 14:30 (SGT)
Date of Accident	25/12/2021 15:40 (SGT)
Exact Location of Accident	205 Serangoon Central, Singapore 550205
Additional Location Information	OPEN SPACE CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBL7777J
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LEE SZE PENG
NRIC No	SXXXX525Z
Email Address	hosiowpoh@yahoo.com.sg
Mobile Phone No	(Phone) +65-97373869
Alternative Phone No	+65-97373869

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E250
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1991

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00171262100
Cover Note Number	-

DRIVER

Name of Driver	LEE SZE PENG
NRIC No	SXXXX525Z

Date Of Birth	11/05/1967
Occupation	Indoor
Date Of Driving Pass	18/11/1996
Driving experience	25 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-97373869
Alt. Phone Number	+65-97373869
Email Address	hosiowpoh@yahoo.com.sg
Address	23 DUNSFOLD DRIVE
Address complement	-
Postcode	359385
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	Collided into Parked Vehicle
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Female

PASSENGER 2

Name	UNKNOWN
Gender	Female

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	SJK8201H
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AXA Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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' 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

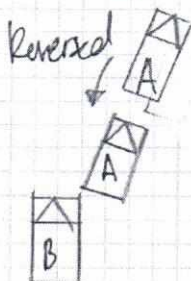
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



OPHE CORPAC @ 205 Shreechowan Pn/RAC

(A) SBL7777J

(B) SJL8201H

Describe Circumstances of the Accident

On 25/12/2021 at about 1549 hrs. I was about to park my vehicle at open space Carpark at 205 Serangoon Central. As I reversed my vehicle, I accidentally hit onto vehicle SJK #201H. I left a note to the owner to contact me. That's all.

Declaration

We declare the foregoing particulars are true in every respect.

Lee
Policyholder's Signature / Date & Time

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

27/12/2021
Witnessed by Reporting Centre Personnel

(J)

Date of Accident : 27.12.2021 Accident Time: 15:40 (24-HR-Format)
Accident Place : Open Space Carpark @ 205 Sunniboon Centre L
Vehicle No. (Car Plate No.) : S13L7777J Make/Model: Mercedes Benz E250 Exclusive (K18 U100)
Insurance Company : China Policy No: BMKSNW00170262100
Owner or Company Name / IC No. : Lee Ze Peng (S18105272)
Owner or Company Contact No. : Owner's Hp 97373869 Company Tel
DRIVER'S Name / IC No. : Same as above
DRIVER'S Date Of Birth : 11-05-1967 DRIVER'S License Pass Date 18-11-1996
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Owner
DRIVER'S Address : 23 Dunsfold Drive S(359395)
DRIVER'S Contact No./ Alt No. : 1) 2) 97373869
DRIVER'S Occupation : ☒ INDOOR ☐ OUTDOOR (e.g. working inside or outside office)
Email Address : HoSiowph@yahoo.com.sg
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): 3 pax include driver
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): No

Other Party Driver's Particular (if any)

Vehicle No: SJK 8201H (AXH)	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) 8

Motor Private Car

MX1E

N SN

AN0472A

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. DMPCSNW00170262100

Engine No.: 27492031530680

Cha. No.: WDD2130452A483635

1. Index Mark and Registration
Number of Vehicle

SBL7777J

AUTOSAFE

2. Name of Policy Holder

LEE SZE PENG

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations.
Ordinance or Enactment17/09/2021
(00:00:00)

Named Drivers Ex Sect. I S\$750.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 S\$3,000.00

Ex Sect. I - Age >= 26 S\$500.00

* Age as at date of accident

EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

16/09/2022

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 S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

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

CCL INSURANCE AGENCY PTE LTD

BLK 9006 TAMPINES ST.93

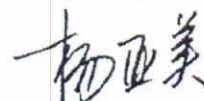
#01-198 SINGAPORE 528840

TEL: 6344 9990 FAX: 6342 0088 6344 7554

Issued By:

Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorised Signatory

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	525Z
Vehicle Details	
Vehicle No.:	SBL7777J
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Jan 2022
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	E250 EXCLUSIVE (R18 LED)
Primary Colour:	Black
Manufacturing Year:	2018
Engine No.:	27492031530880
Chassis No.:	WDD2130452A483635
Maximum Power Output:	155.0 kW (207 bhp)
Open Market Value:	\$60,509.00
Original Registration Date:	17 Sep 2018
First Registration Date:	17 Sep 2018
Transfer Count:	0
Actual ARF Paid:	\$80,917.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Sep 2028
PARF Rebate Amount:	\$60,687.00
Intended COE Rebate Details	
COE Expiry Date:	16 Sep 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$33,900.00
COE Rebate Amount:	\$22,468.00
Total Rebate Amount:	\$83,155.00

The information contained herein is correct as at 27 Dec 2021

OK