

# NATIONAL Assessment Centre Services

Date In: <b>17/01/2022</b>	Job description	Date & Time Completed	Done by
Ref No: <b>CA/MSG 22000572/m4</b>	SAS e-filing		
Veh No: <b>SDZ 8189C</b>	E-mail (within 8hrs. ABC 2hrs)		
D.O.A: <b>14/01/2022 16:45</b>	i-Motor Claim Form		
OD <input checked="" type="radio"/> 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: <b>SBB 138C</b>	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	Am't (\$)	Am't (\$)
		1st Bill	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		
Cat 1:	Invoice dated	Fee Charged	
Cat 2 / 3:	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	17/01/2022 10:31 (SGT)
Date of Accident	14/01/2022 16:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	HOLLAND ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDZ8189C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YAFARIDAH BINTE MOHAMMED
NRIC No	SXXXX384C
Email Address	jmartaauto@gmail.com
Mobile Phone No	(Phone) +65-91314524
Alternative Phone No	+65-91314524

### VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Tiguan
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	1395

### INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	A 300337330 QMY
Cover Note Number	-

### DRIVER

Name of Driver	NUR NADYAH BINTE PERWRIE
NRIC No	SXXXX158G

Date Of Birth	08/09/1997
Occupation	Indoor
Date Of Driving Pass	12/01/2016
Driving experience	6 YEARS
Gender	Female
Mobile Number	(Phone) +65-91314524
Alt. Phone Number	-
Email Address	NADYAHP@HOTMAIL.COM
Address	BLK 152 JALAN TECK WHYE
Address complement	#01-15
Postcode	680152
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	YAHYA BIN RAHMAT
Gender	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT : T/20220115/7009

#### 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 WORKSHOP
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SBB138C
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Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	BRENDAN LIM CHENG HAI
NRIC No	SXXXX655E
Contact Number	(Phone) +65-97706193
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	NUR NADYAH BINTE PERWRIE
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK & BACK (SLIGHT)
Injured person in which vehicle?	SDZ8189C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

### INJURED 2

Name of injured person	YAHYA BIN RAHMAT
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK & BACK (SLIGHT)
Injured person in which vehicle?	SDZ8189C
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.
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.

  
Policyholder's Signature / Date & Time

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

 17/01/2022  
Witnessed by Reporting Centre Personnel

### Sketch Plan



Holland Rd

DOA: 14/1/22

A: SPZ 8189 C

B: SBB 138 C

Refer to Police Report : T/20220115/7009.

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Witnessed by Reporting Centre  
Personnel





# SINGAPORE POLICE FORCE



T/20220115/7009

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 4

Report No. T/20220115/7009

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/01/2022 12:59	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: NUR NADYAH BINTE PERWRIE			Address: 152 JALAN TECK WHYE #01-15 SINGAPORE 680152		
ID Type / ID No.: NRIC NO / S9731158G			Contact No.: Home/Office: Mobile: 91314524		
Nationality: SINGAPORE CITIZEN			Email: NADYAHP@HOTMAIL.COM		
Sex: Female	Age: 24	Date of Birth: 08/09/1997	Type of Informant: Driver		
Race: Eurasian			Language: English		Institution / School Name:
Occupation: Student			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 14/01/2022 16:45	Type of Location: Traffic Light
Location:  HOLLAND ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Static vehicle hit from rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SBB138C	Car		Mercedes	Silver		1
SDZ8189C	Car	VOLKSWAGO N	Tiguan	Blue		2

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE  
POLICE FORCE**



T/20220115/7009

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220115/7009

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDZ8189C	MSIG INSURANCE (SINGAPORE) PTE. LTD.	300337330	31/08/2021	30/08/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	BRENDAN LIM CHENG HAI		ID No.	S1734655E
Related Vehicle	SBB138C (Car)		Contact No.	97706193
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL	
Driver				
Name	NUR NADYAH BINTE PERWRIE		ID No.	S9731158G
Related Vehicle	SDZ8189C (Car)		Contact No.	91314524
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	15/01/2022		Date	15/01/2022
No. of Days granted Medical Leave	05	Degree of	Slight	
Passenger				
Name	YAHYA BIN RAHMAT		ID No.	S0159765E
Related Vehicle	SDZ8189C (Car)		Contact No.	96962525
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	15/01/2022		Date	15/01/2022
No. of Days granted Medical Leave	04	Degree of	Slight	





**SINGAPORE  
POLICE FORCE**



T/20220115/7009

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220115/7009

**CONTINUATION OF REPORT**

Brief Details.

I was driving along Holland Rd towards city, I approached the traffic light and I stopped at the traffic light. Suddenly my car was hit from the rear.  
After the collision, me and the other party drove into a side road to exchange particulars. I do have a front dash camera recording the incident and also pictures from the scene.



**SINGAPORE  
POLICE FORCE**



T/20220115/7009

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220115/7009

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
MOHAMAD ZULFAZDLI BIN ABDULLAH  
Contact No.: 65476204

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

Date/Time:  
15/01/2022 12:59

Classification Of Case:

Date of Accident : 14/1/22		Time of Accident : 1645 hrs	
Exact Location of Accident : Holland Rd			
Purpose Of Reporting : OWN DAMAGE CLAIM / 3RD PARTY CLAIM / JUST REPORTING ONLY			
Weather Condition : Clear / Raining		Wet / Dry <input checked="" type="radio"/> Private Use / Work	
Owner's Name : <del>Yasrah</del> Yafaridah		NRIC : 517863846	HP :
Driver's Name : Nur Nadayah Binte Periwah		NRIC : 597311586	HP : 91314524
DOB : 8/9/1997	Driving Licence Passing Date : 12/1/2016		Occupation : Indoor / Outdoor
Address : 152 Jln Tekk Whye 401-15 (680152)			
Relationship Of Driver with Insured : Daughter		Email : jmartauto@gmail.com	
Vehicle Number : SDZ 8189C		Make & Model : Volkswagen (Tiguan) (1395cc)	
Insurance Company : MSIG		Policy Num :	Coverage :
Any passengers inside vehicle involved ( YES / NO ) If yes, Vehicle Number & How many pax			
A : 1 + 1    B : 1 + 1    C :    D :			
Vehicle A Passenger Name : woman			
Anyone Injured :			
<input type="radio"/> NO		<input checked="" type="radio"/> YES <i>Jahya bin Rahmat</i> } neck & back <i>Nur Nadayah Binte Periwah</i>	
Name / NRIC / Which Vehicle : Tiguan			
Was The Accident Reported To The Police ?			
<input type="radio"/> NO		<input checked="" type="radio"/> YES    Which Police Station :	
Does The Driver Own Any Other Vehicle ?			
<input checked="" type="radio"/> NO		<input type="radio"/> YES    Vehicle Number :    Insurer :	
Was Any Foreign Vehicle Involved ?			
<input checked="" type="radio"/> NO		<input type="radio"/> YES    Vehicle Number & Category :	
Was There Any Video Captured By Car Camera ? <input type="radio"/> NO <input checked="" type="radio"/> YES    with witness			

### Third Party's Particular

Vehicle B 's Number : 5BB 138C		Make & Model :	
Driver's Name :		NRIC :	HP :
Vehicle C 's Number :		Make & Model :	
Driver's Name :		NRIC :	HP :

### Witness 's Particular

## CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

### MOTORMAX PLUS Comprehensive

Certificate No. A 300337330 QMY

Excess : SGD2,000

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle  
SDZ8189C

2. Name of Policyholder  
Yafaridah binte Mohammed

3. Effective Date of the Commencement of Insurance for the purposes of the Act  
31/08/2021

4. Date of Expiry of Insurance  
30/08/2022

5. Persons or Classes of Persons entitled to drive\*  
Yafaridah binte Mohammed, Nur Nadyah bte Perwrie  
Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\*Provided that the person driving is permitted in accordance with the licensing or other laws or 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 only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward 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.

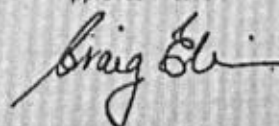
\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP. REFER TO MSIG.COM.SG FOR LIST OF AUTHORISED WORKSHOPS.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

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 any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.  
Approved Insurers



Craig Ellis  
Chief Executive Officer