

NATIONAL Assessment Centre Services SK102210002

Date In: 18/01/2022 11:31	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: X138/EQI220006304	E-mail (within 2hrs. After 2hrs):		
Veh No: SK108585P	I-Motor Claim Form		
DOA: 17/01/2022 04:05	I-Motor W/O (Within 10: 2hrs. 12: 2hrs)		
OD: TP / Reporting Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Vksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel: (Fax: (
TP Particulars:	Veh No: YQ2967L	INC () / Non-INC ()	
Owner / Driver: (Tel: ()
Policy No: ()	Period: ()
Cover Type: ()
Confirmed by: (Date: ()
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 (\$)	Amt (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	1st Bill	Add Bill
Contact No:	2) DA: Damage Assessment (\$100); INC (\$30)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors' Comments:-	5) FT: Follow-Through Survey (Resurvey) \$30		
Cat. 1:	For claiming against INC Only (wef 10 Jan 2015)		
Cat. 2 / 3:	6) TR: Re-inspection \$75		
	7) NI: Issue 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: Issue Mobile \$10		
	Invoice dated	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	18/01/2022 11:21 (SGT)
Date of Accident	17/01/2022 04:05 (SGT)
Exact Location of Accident	66 Kallang Bahru, Singapore 330066
Additional Location Information	CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SND8585P
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TAN JIAN AN (CHEN JIAN'AN)
NRIC No	SXXXX808B
Email Address	jeffchan168168@gmail.com
Mobile Phone No	(Phone) +65-90275785
Alternative Phone No	+65-84683373

VEHICLE PARTICULARS

Manufacturer	Maserati
Model	GRANTURISMO
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	4244

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPPHQ21-006677
Cover Note Number	-

DRIVER

Name of Driver	CHAN SHENG WEI
NRIC No	SXXXX206C

Date Of Birth	25/05/1985
Occupation	Indoor
Date Of Driving Pass	24/12/2009
Driving experience	12 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-84683373
Alt. Phone Number	-
Email Address	jeffchan168168@gmail.com
Address	BLK 66 KALLANG BAHRU #04-503
Address complement	-
Postcode	330066
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	PARTNER
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	Hit and run / Vandalism / Damaged whilst parked
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?	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	YQ2967L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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) -

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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

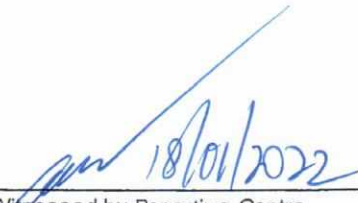
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

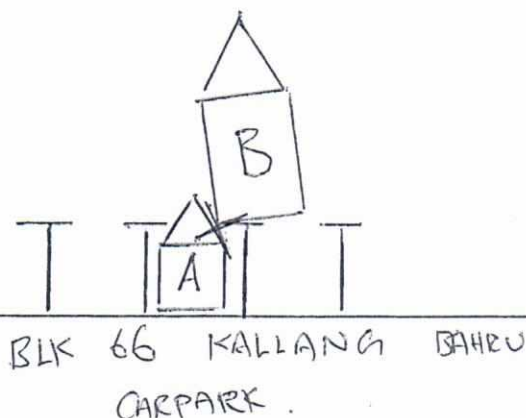


Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan




VEHICLE
A: WD8585P
B: YQ2967L


Describe Circumstances of the Accident

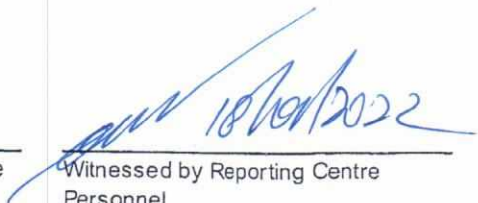
ON THE MENTION DATE AND TIME, MY VEHICLE SNO858SP
WAS PARKED AT MY HOUSE DOWNSTAIR CARPARK. VEHICLE "B"
YQ2967L REVERSE HIS TRUCK AND COLLIDED ONTO MY VEHICLE
FRONT PORTION. AFTER THAT THE VEHICLE "B" LEFT. MY IN
CAR CAMERA RECORDED EVERYTHING.

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

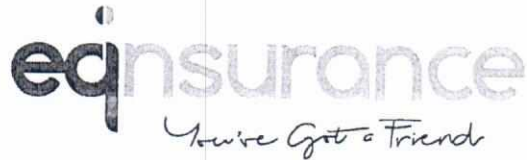
VEHICLE NO: SND 8585 P

MAKE & MODEL: MASERATI GRANDTURISMO AUTO / MANUAL

DATE OF ACCIDENT	17 / 01 / 2022	C.C. 4.2A
TIME OF ACCIDENT	0403HRS - <u>AM</u> / PM	
LOCATION OF ACCIDENT	BK 66 KALLANG BAHRU (CARPAIRK)	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / <u>PRIVATE USE</u> / PRIVATE HIRE	
NAME OF OWNER	TAN JIAN AN	
EMAIL	JEFFCHAN168168@GMAIL.COM	Office: MOBILE 9027 5785
NRIC	S851580813	
CLAIM TYPE	OD / <u>THIRD PARTY</u> / REPORTING ONLY	
FLEET POLICY	YES / <u>NO</u> / ?	
INSURANCE CO.	EQ INSURANCE	
TYPE OF COVERAGE	<u>Comprehensive</u> / Third Party / Third Party Fire & Theft	
POLICY NO.	DMPDHQ21-006677	
NAME OF DRIVER	AS ABOVE / IF NO: CHAN SHENG WEI	
NRIC	S8516206C	
DATE OF BIRTH	25 / 05 / 1985	
ANY PASSENGER	YES / <u>NO</u>	
NAME OF PASSENGER		
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	24 / 12 / 2009	
GENDER	<u>Male</u> / Female	
CONTACT NO.	Mobile: 8468 3373 Office: Home:	
EMAIL	JEFFCHAN168168@GMAIL.COM	
ADDRESS	BLK 66 KALLANG BAHRU #04-505 833086	
DOES DRIVER OWN OTHER VEHICLES?	<u>NO</u> / If yes: Reg No. INSURER	
RELATIONSHIP	Employee / If No: PARTNER	
WEATHER CONDITION	<u>Clear</u> / Raining / Other	
ROAD SURFACE	<u>Dry</u> / Wet / Other	
ANY INJURIES	<u>No</u> / If yes: Who?	
CONTACT NO.		
POLICE REPORT	<u>No</u> / If yes: Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	<u>NO</u> / IF YES: WHO?	
VEHICLE B NO.	YQ 2967L 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 WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	<u>YES</u> / <u>NO</u>	
WAS THERE ANY AUDIO RECORDED?	<u>YES</u> / <u>NO</u>	
SCENE ACCIDENT PHOTOS TAKEN?	<u>YES</u> / <u>NO</u>	
**WORKSHOP:		
Have you been approach by unknown person soliciting (s) /		

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg
reg no. 1978-00490-N

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF 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.

**PRIVATE CAR
Comprehensive**

Certificate No.: DMPPHQ21-006677

Form: MX3

Excess:

Insured/Named Driver SGD3,000.00

Ins/N Drvr-OutsideSG SGD6,000.00

WdScrn/Snroof/Mnroof SGD500.00

1. Index Mark and Registration Number of Vehicles
SND8585P

2. Engine No. and Chassis No.
M139P179650 / ZAMGH45C000062106

3. Name of Policyholder
TAN JIAN AN (CHEN JIAN'AN)

4. Effective Date of the Commencement of Insurance for the purpose of the Act
08/09/2021

5. Date of Expiry of Insurance
22/12/2022

6. Person or Classes of Persons entitled to drive*
(a) The Policyholder
(b) The specific person(s) whose name is lodged in the Schedule.

EQI Motor Accident
Hotline

6311 3211

*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 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 has not been cancelled at the time of accident loss or damage.

7. Limitations 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.