

NATIONAL Assessment Centre Services

Date In: 07/02/2022 14:53	Job description	Date & Time Completed	Done by
Ref No: NA/CTI 22001149/m4	SAS e-filing		
Veh No: Sny 4606R	E-mail (w/Don 8hrs, AIC 2hrs)		
D.O.A: 31/01/2022 12:45	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: SLB 728G	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

NA 2200313

Invoice Preparation Checklist

Amt (\$) Amt (\$) 1st Bill Add Bill

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2/3:

- AR : Accident Reporting (\$30);
- DA : Damage Assessment (\$100); INC (\$80)
- TF : Towing Fee \$40/\$45
- FT : Follow-Through Survey \$120
- FT : Follow-Through Survey (Resurvey) \$30
- TR : Re-inspection \$75
- N1 : Idac DA + SMRT Survey \$160
- NTUC Additional Services:-
- OD*
 - *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
 - N12: Idac Mobile \$0

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	07/02/2022 14:53 (SGT)
Date of Accident	31/01/2022 12:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE NEAR TO EXIT 7D
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMY4606R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG WEI MING
NRIC No	SXXXX090H
Email Address	NGMING835@GMAIL.COM
Mobile Phone No	(Phone) +65-94889544
Alternative Phone No	+65-94889544

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Camry
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	1998

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00085092100
Cover Note Number	-

DRIVER

Name of Driver	NG WEI MING
NRIC No	SXXXX090H

Date Of Birth	15/08/1987
Occupation	Outdoor
Date Of Driving Pass	04/02/2010
Driving experience	11 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94889544
Alt. Phone Number	+65-94889544
Email Address	NGMING835@GMAIL.COM
Address	BLK 271 QUEEN STREET
Address complement	#05-204
Postcode	180271
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 - Change/cross lane
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?	Yes
Police Station Name	Tanglin Division Headquarters
Police Station Phone No	(Phone) +65-18003910000
Alt. Police Station Phone No	(Fax) +65-63964900
Police Station Address	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT : E/20220201/7019

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	SLB728G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	CHEE YAM HWEE
NRIC No	SXXXX732G
Contact Number	(Phone) +65-81388518
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

1. Please report correctly the details of the accident to speed up the claims process.
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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

Witnessed by Reporting Centre Personnel

Sketch Plan

A = SMY 4606 R

B = SLB 728 G

CTE near to Exit 7D.



— Refer to the police report : E/20220201/7019. —

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



POLICE REPORT (NP299)

Report No. E/20220201/7019

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No:1800-3910000

Date/Time Report Made 01/02/2022 16:28	Vide Report No.	Station Diary No.
Name Of Informant NG WEI MING	Address 271 QUEEN STREET #05-204 SINGAPORE 180271	
ID Type / ID No. NRIC NO / S8724090H	Contact No. Home/Office:	Mobile: 94889544
Nationality SINGAPORE CITIZEN	Email Address NGMING835@GMAIL.COM	
Occupation Interior designer	Sex Male	Age 34
Institution/School Name	Date of Birth 15/08/1987	Race Chinese
Date/Time Of Incident 31/01/2022 12:45 - 31/01/2022 13:00	Location Of Incident CENTRAL EXPRESSWAY	

Brief details.

Heavy traffic with slow moving vehicles at all 4 lanes at CTE near to Exit 7D. My vehicle (SMY4606R) was at Lane 2, while the offending vehicle (SLB728G) was at Lane 1. Mr Chee (SLB728G) insist on cutting to Lane 2, with my vehicle beside him. I gave multiple warning horn to warned he is too close to my vehicle, but was ignored, resulted with Mr Chee colliding his vehicle onto my right front bumper. Mr Chee had the intention to drive off and I horned to stop him. When we exited our vehicle, he admitted it's his negligence in ensuring a safe distance between his vehicle to mine as he was eager to move from Lane 1 towards Exit 7D, where he will need to cut 4 lanes in order to exit. He later asked via text on the resolution to the repair of my vehicle but later advise that we shall report the accident For insurer to

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 01/02/2022 16:28
Officer In-Charge Of Case:	Classification Of Case:



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20220201/7019

manage. As I was unable to make a formal accident report to IDAC due to CNY closure, I am making a police report as proof of the said accident occurring on the noon of 31/01/2022.

Subjects Involved			
Victim			
Person Name	NG WEI MING		
ID Type	NRIC NO	ID No	S8724090H
Gender	Male	Age	34
Race	Chinese	Language	English
Occupation	Interior designer	Address	271 QUEEN STREET #05-204 SINGAPORE 180271
Mobile No	94889544	Is Informant A Victim?	Yes
Person Name	NG WEI MING (Informant)		

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

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

Date/Time:
01/02/2022 16:28

Classification Of Case:

4:05



< 1



Joseph Chee



Yesterday

🔒 Messages and calls are end-to-end encrypted. No one outside of this chat, not even WhatsApp, can read or listen to them. Tap to learn more.

Hi Zen,
Joseph here.. Let me know when good to call about our car incident..
Thanks

1:12 PM

Would like to sort out how to get your car fix and regrets the inconveniences caused

1:16 PM

Hi Joseph, I just call my workshop. We settle it by \$800 for painting and rental of car for 2days.

1:18 PM ✓✓

Can i call you

1:19 PM

I feel is better to text here.

1:20 PM ✓✓



Missed voice call at 1:21 PM

Noted.. would like to leverage on my insurance coverage and for them to manage accordingly.

1:28 PM

Could you report the incident to



4:05



Joseph Chee



I feel is better to text here.

1:20 PM ✓✓

Missed voice call at 1:21 PM

Noted.. would like to leverage on my insurance coverage and for them to manage accordingly.

1:28 PM

Could you report the incident to your car insurance so that they could help to manage your claims

1:30 PM

Missed voice call at 1:38 PM

Let engage our insurance companies respectively..

1:46 PM

Of if that is the case then I will report it..

1:58 PM ✓✓

Can you please give me your car plat number so I can report to my insurance accordingly? Thanks

2:00 PM

Smy4606r

2:01 PM ✓✓

Thanks

2:01 PM



ACCIDENT STATEMENT

ACCIDENT DATE: 31 / 01 / 2022 (DD/MM/YYYY), TIME: 12 : 45 (HH:MM)

LOCATION: CTE near to Exit 7D

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: Smy 4606 R
 b) INSURANCE COMPANY: CTI
 c) POLICY NUMBER: DMPC8NW00085092100
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: Toyota Camry Auto (1998cc)
 f) TYPE: (SEDAN / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: private use
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE THIRD PARTY CLAIM / REPORTING ONLY

2. INSURED / POLICY HOLDER

- a) NAME: Ng Wei Ming (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S87240904 CONTACT: 9488 9544
 c) ADDRESS: Blk 271 Queen Street #05-204 (S) 180271

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: As Above (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* d) DATE OF BIRTH: 15 / 08 / 1987 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)
 f) YEARS OF DRIVING EXPERIENCE: 04/02/2010

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)
 IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLB 728 G MODEL: _____
 b) DRIVER'S NAME: Chae Yan Hwee
 c) NRIC/FIN/PASSPORT: S 1825732 G CONTACT: 8138 8518

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email = NGMING835@GMAIL.COM

fax =

VIDEO = NO

* No of passenger
 (including driver)
(1)

* No of passenger
 (including driver)
()

* No of passenger
 (including driver)
()

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.

DMPCSNW00085092100

Engine No.: 1AZE294623

Cha. No.:MR053BK5104024922

1. Index Mark and Registration
 Number of Vehicle

SMY4606R

AUTOSAFE

=====

2. Name of Policy Holder

NG WEI MING

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

26/04/2021
 (11:31:45)

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:

27/05/2022

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\$500 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. : STANDARD CHARTERED BANK(S) LIMITED

* 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:

Chua Suat Lay Sally

Authorised Officer

Authorised Signatory