

# NATION AL Assessment Centre Services

SN08222G0001

Date In: 16/02/2022 10:34	Job description	Date & Time Completed	Done by
Ref No: 1/30/C1922001486/Y	SAS e-filing		
Veh No: GBL2489Z	E-mail (within 2hrs. After 2hrs)		
DOA: 16/02/2022 08:19	I-Motor Claim Form		
OD: (TP) Reporting Only	I-Motor W/O (within 10. 2hrs. 10. 2hrs)		
	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: GBL1297J	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 ( ) / Towel-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co. ( )

Remarks:-	Date & Time Completed	Done by
(INC hotline: 6788 6616)		
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 (\$) Est Bill	Am't (\$) 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		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors' Comments:-	5) RT: Follow-Through Survey (Resurvey) \$30		
CALL:	For claiming against INC Only (wef 10 Jan 2015)		
Cat. 2 / 3:	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	9) N12: Idac Mobile \$30		
	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	16/02/2022 10:34 (SGT)
Date of Accident	16/02/2022 08:19 (SGT)
Exact Location of Accident	Geylang, Singapore
Additional Location Information	JUNCTION WITH HAIG ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBL2489Z
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DUNDEE
Company Reg No	5XXXX032A
Email Address	laukweemeng@yahoo.com
Mobile Phone No	(Phone) +65-98623655
Alternative Phone No	+65-98623655

#### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1597

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00086472100
Cover Note Number	-

#### DRIVER

Name of Driver	LAU KWEE MENG
NRIC No	SXXXX346I

Date Of Birth	08/03/1968
Occupation	Indoor
Date Of Driving Pass	06/01/1993
Driving experience	29 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-98623655
Alt. Phone Number	-
Email Address	laukweemeng@yahoo.com
Address	BLK 94C BEDOK NORTH AVENUE 4 #05-1389
Address complement	-
Postcode	462094
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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	Raining
Road Surface	Wet

#### 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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	DAUGHTER
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?	Yes
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD1297J
Vehicle Manufacturer	Nissan
Vehicle Model	Nv350
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver .....	SHAFIQ
Passport No/FIN .....	GXXXX160W
Contact Number .....	(Phone) +65-90951189
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1



## 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 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. 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.

09.57am

*Chandany* 16 Feb 2022

Policyholder's Signature / Date & Time

09.57am

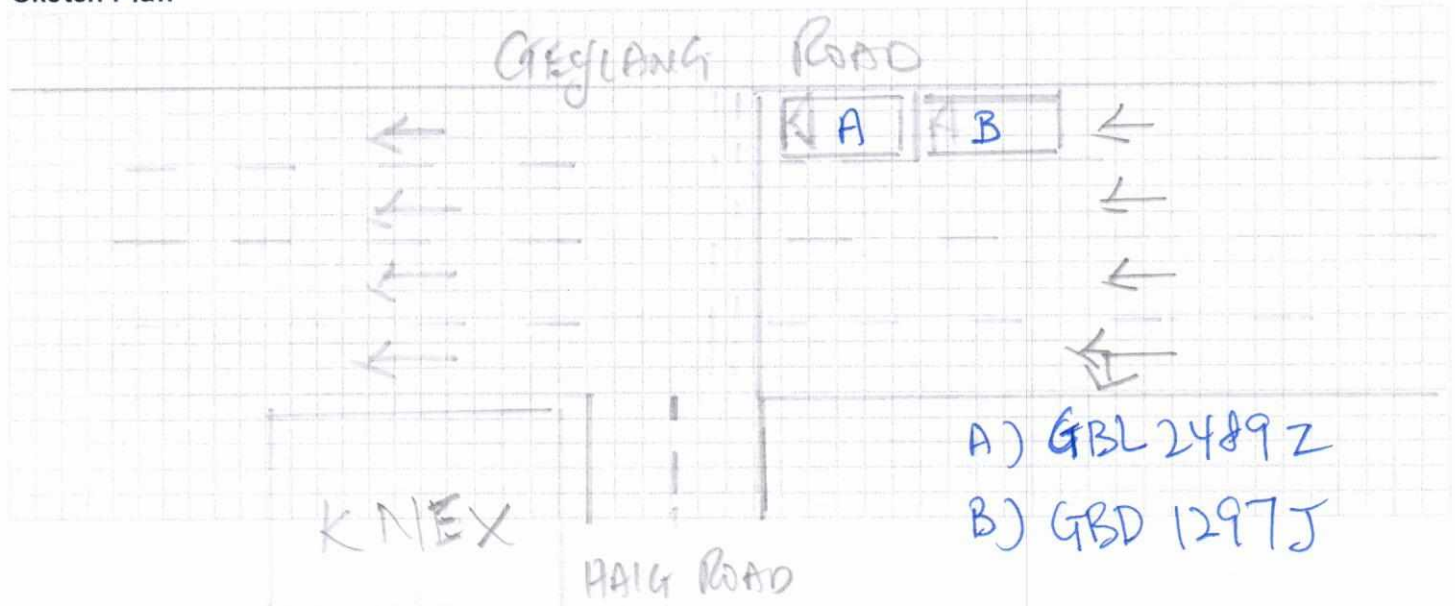
*Chandany* 16 Feb 2022

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

16/02/2022

Witnessed by Reporting Centre Personnel

### Sketch Plan



**Describe Circumstances of the Accident**

At about 8.19am on 16 Feb 2022, when I was traveling along Geylang Road, towards Paya Lebar at the junction of Haig Road. (At the pedestrian crossing of Kinx and Tanjong Katong Complex).

The traffic light turns to 'amber' and I was slowing down and stopped at the traffic light.

Then this Nissan NV350 was traveling at a high speed and knocked my vehicle from behind.

Photos of the two vehicles and videos before and after the accident was captured and presented to Idac.

Thank you.

**Declaration**

I/We declare the foregoing particulars are true in every respect.

09.57am  
16 Feb 2022

Policyholder's Signature / Date & Time

09.57am  
16 Feb 2022

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

16/02/2022

Witnessed by Reporting Centre Personnel



## ACCIDENT STATEMENT

ACCIDENT DATE: 16 / 02 / 2022 (DD/MM/YYYY), TIME: 08 : 19 (HH:MM)

LOCATION: At the junction of Kinex and Tanjong Katong Complex

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBL2489Z  
b) INSURANCE COMPANY: China Taiping Insurance (Singapore) Pte Ltd  
c) POLICY NUMBER: DM CVN W 000 86472100  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: NV200  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: Working  
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: DUNDEE (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S6806346Z CONTACT: 98623655  
c) ADDRESS: Block 94C Bedok North Avenue 4  
#05-1389 SINGAPORE 462094

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: LAN KWEE MENG (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S6806346Z CONTACT: 98623655  
c) ADDRESS: Block 94C Bedok North Avenue 4  
#05-1389 SINGAPORE 462094

\* d) DATE OF BIRTH: 08/03/1968 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 06/01/1993

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: GB01297J MODEL: NISSAN NV350  
b) DRIVER'S NAME: Shafiq  
c) NRIC/FIN/PASSPORT: 98483160W CONTACT: 90951189

### 9. THIRD PARTY VEHICLE

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

Email: lanKwee meng@yahoo.com  
VIDEO Yes



中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

N SN

ANG450A

Cov. Type C

### CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1953 (Malaysia)

CERTIFICATE No.

DMCVSNW00086472100

Engine No. HR16121262D

Chassis No. VM20163764

1. Index Mark and Registration  
Number of Vehicle

GBL2459Z

AUTOSAFE

2. Name of Policy Holder

DUNDEE

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

19/07/2021  
(10:37:55)

Excess Sect 1. S\$400.00  
EX ON WINDSCREEN. S\$100.00

4. Date of Expiry of Insurance

18/07/2022

5. Persons or Classes of Persons entitled to drive\*

Any person who is driving on the Policyholder's order or with their 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\*

- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

\* 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

INXPIRE N SOLUTIONS  
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com





# Cyber Yard Ent Pte Ltd

A: 60 Jalan Lam Huat #03-34, Carros Centre, S(737869)  
M: +65-86797979 M: +65 87788448 Fax: +65 69800698  
E: cyberyardent@gmail.com  
Facebook: Cyber Yard Ent Pte Ltd  
Reg No: 201815408W GST No: 201815408W

Date

17/7/21

## PARTICULARS OF BUYER / SELLER

Name: Dundee Nric / ROC No: 53435032A  
Address: 94C Bedok North Ave 4 #05-1389 S 462094  
Contact No (HP): 98623655 Office: \_\_\_\_\_ Home: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## PARTICULARS OF VEHICLE - PURCHASE / SALE

VEH REGN NO.	<u>GBL 2489Z</u>	PETROL / DIESEL	<u>P</u>	LIST PRICE	\$ <u>55,879/2</u>
MAKE	<u>Nissan</u>	OWNER	<u>1</u>	PRICE AGREED	\$ <u>52,879/2</u>
MODEL	<u>NU200</u>	LADEN		LOAN AMOUNT	\$ <u>—</u>
TYPE OF BODY		UNLADEN		DOWNPAYMENT	\$ <u>—</u>
DATE OF REGN	<u>26/4/21</u>	YOM		LTA TRANSFER FEE	\$ <u>25</u>
ENGINE NO.		COLOUR	<u>Grey</u>	MISC	\$ <u>—</u>
CHASSIS NO.				ADMIN FEE	\$ <u>—</u>
OMV VALUE		PARF		ADV. INSTALLMENT	\$ <u>—</u>
COE VALUE		EXPIRY	<u>25/4/31</u>	INSURANCE	\$ <u>1323.24</u>
REMARKS	<u>Free Sola, wooden Plank, Carpet.</u>			TOTAL	\$ <u>54227.24</u>
				LESS DEPOSIT	\$ <u>20000/2</u>
				LESS TRADE IN	\$ <u>15000/2</u>
				NETT PAYABLE	\$ <u>19227.24</u>

## PARTICULARS OF TRADE IN VEHICLE

VEH REGN NO.	<u>GY2103I</u>	ORD	<u>27/1/05</u>	PRICE AGREED	\$ <u>15000/2</u>
MAKE & MODEL	<u>Toyota Litecie</u>			OUTSTANDING AMT	\$ <u>—</u>
HP COMPANY				LESS DEPOSIT	\$ <u>—</u>
DUE DATE				BALANCE	\$ <u>—</u>

## INSURANCE

INSURANCE CO.	\$	LOAN AMOUNT	\$
PERIOD FROM	TO	RATE & TERMS	%
OWN EXCESS \$	OTHERS	FINAL INSTALLMENT	\$

## FINANCE PAYABLE

\* In the event of the purchaser's & Failing to pay the balance, the vendor shall have the right to seize the car and forfeit the deposit paid by the purchaser  
\* It is agreed that the buyer will fully responsible for the vehicle for any illegal acts which may arise from the use thereof including traffic offences as from

19/7/21

4.45

\* confirm that I have viewed the vehicle and wish to purchase in the condition of as and where it is at the time of purchase

Received amount of

CASH \$ 20000 Cash 46

CHEQUE / CO NO \$19227.24



AUTHORISED SIGNATORY

NAME:

SIGNATURE OF SELLER/ BUYER

NAME:

## Apply Transfer Of Vehicle Ownership (Acknowledgement)

### Vehicle Details

Vehicle No.:	GBL24892	Vehicle Scheme:	Normal
Vehicle Type:	A50 - Goods (Closed) Van/Van Panel (Delivery)	Vehicle Model:	NV200 DX 1.6 AUTO
Vehicle Make:	NISSAN	Engine No.:	HR16181262D
Chassis No.:	VM20163764	Trailer Chassis No.:	-
Motor No.:	-	Passenger Capacity:	1
Propellant:	Petrol	Power Rating:	-
Engine Capacity:	1597 cc	Maximum Laden Weight:	1940 kg
Unladen Weight:	1220 kg	Secondary Colour:	-
Primary Colour:	Grey	Maximum Power Output:	-
IU Label No.:	1043367605	Original Registration Date:	26 Apr 2021
First Registration Date:	26 Apr 2021	Open Market Value:	\$20,963.00
Manufacturing Year:	2021	Minimum PARF Benefit:	\$0.00
PARF Eligibility:	No	Actual ARF Paid:	\$1,049.00
No. of Transfer:	0		
COE No./Expiry Date:	2021042605000806N / 25 Apr 2031		
COE Bid Category:	C - Goods Vehicle & Bus		
PQP Paid:	\$30,913.00		

### Next Owner Particulars

Next Owner ID Type: Business  
Next Owner ID: 53435032A  
Next Owner Name: DUNDEE

### Transaction Details

Business Transaction Ref. No.: 20210719164436076173  
Business Transaction Date: 19 Jul 2021  
Business Transaction Time: 16:44:36

### Message

You have successfully initiated the transfer of your vehicle. The next owner has to confirm the transfer by 24 Jul 2021.

OK      Save as PDF