

NATIONAL Assessment Centre Services

Date In: 20/04/2022	Job description	Date & Time Completed	Done by
Ref No: NA/CTI 2200 3654/m4	SAS e-filing		
Veh No: Smy 7228D	E-mail (Within 8hrs, AIC 2hrs)		
D.O.A: 18/04/2022 17:10	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: Smm 2517R	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 2201060

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist

- | | Amt (\$)
1st Bill | Amt (\$)
Add Bill |
|---|----------------------|----------------------|
| 1) AR : Accident Reporting (\$30); | | |
| 2) DA : Damage Assessment (\$100); INC (\$80) | | |
| 3) TF : Towing Fee \$40/\$45 | | |
| 4) FT : Follow-Through Survey \$120 | | |
| 5) iT : 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:- | | |
| OP* | | |
| *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 \$0 | | |

Invoice dated

Invoice dated

Fee Charged

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	20/04/2022 17:09 (SGT)
Date of Accident	18/04/2022 17:10 (SGT)
Exact Location of Accident	52A Telok Blangah Dr, Singapore 101052
Additional Location Information	MULTI-STOREY CARPARK DECK 2B
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMY7228D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YEO CHOO WAH
NRIC No	SXXXX682B
Email Address	tommytehtg@yahoo.com.sg
Mobile Phone No	(Phone) +65-91005205
Alternative Phone No	+65-91005205

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	2494

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00075932100
Cover Note Number	-

DRIVER

Name of Driver	TEH TENG GUONG
NRIC No	SXXXX252J

Date Of Birth	17/05/1965
Occupation	Outdoor
Date Of Driving Pass	06/09/1986
Driving experience	35 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91167995
Alt. Phone Number	-
Email Address	tommytehtg@yahoo.com.sg
Address	BLK 54 TELOK BLANGAH DRIVE
Address complement	#13-30
Postcode	100054
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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)	0
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	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/20220420/7031

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	SMM2517R
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car



SKETCH PLAN

IMPORTANT NOTICE

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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

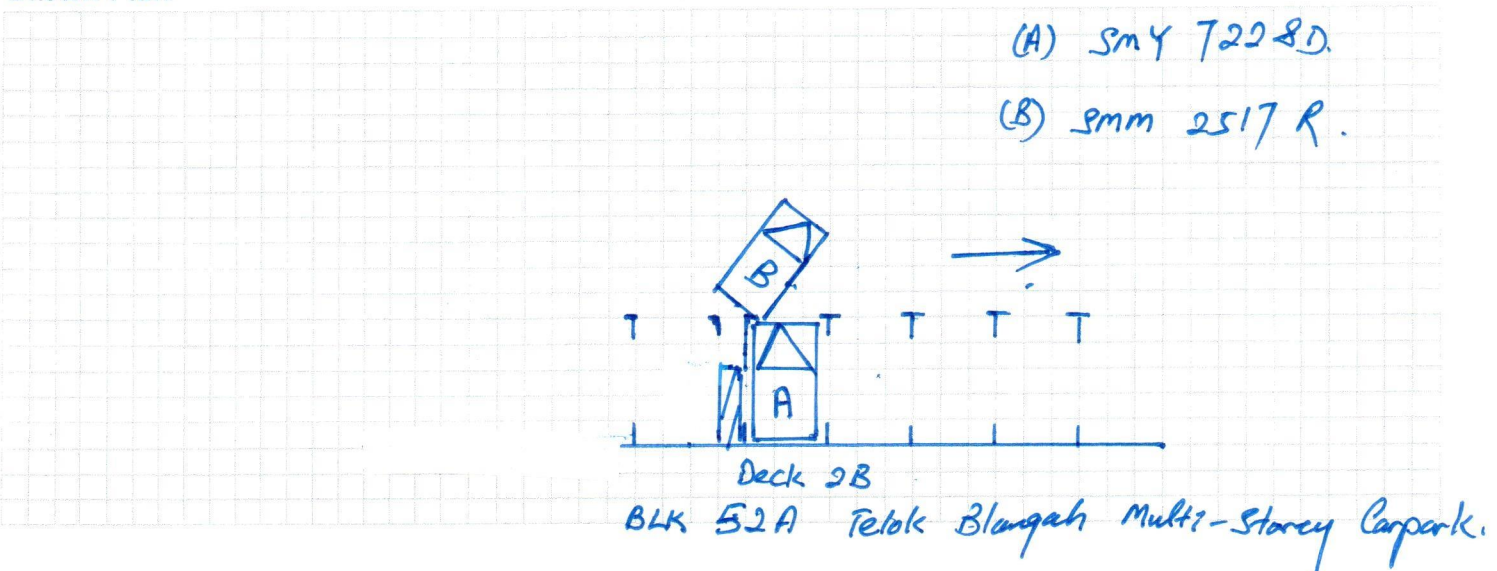
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Pls refer To Police Report No:

7/20220420/7031

Declaration

I/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

R 20/4/22

Witnessed by Reporting Centre
Personnel



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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/04/2022 15:53	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: TEH TENG GUONG		Address: 54 TELOK BLANGAH DRIVE #13-30 SINGAPORE 100054	
ID Type / ID No.: NRIC NO / S1702252J		Contact No.: Home/Office: Mobile: 91167995	
Nationality: SINGAPORE CITIZEN		Email: tommytehtg@yahoo.com.sg	
Sex: Male	Age: 56	Date of Birth: 17/05/1965	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation:		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 18/04/2022 17:10	Type of Location: Car Park
Location: TELOK BLANGAH DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 20 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMM2517R	Car	TOYOTA	PRIUS PLUS	Silver		0
SMY7228D	Car	TOYOTA	CAMRY	Black	Slightly Damaged	0



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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TEH TENG GUONG	ID No.	S1702252J
Related Vehicle	SMY7228D (Car)	Contact No.	91167995
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,2A,3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 17/04/2022 at @ 2100hrs, i parked my vehicle (SMY7228D) in the multi-storey carpark Deck 2B of Blk 52A Telok Blangah Drive and went back home. On 20/04/22 morning, i drove my car out to pick up my friend, then he notice that there were damaged to my vehicle. I then download the video in the car and noticed on 18/04/2022 at @ 1710hrs, a car (SMM2517R) had reversed and collided onto the front left portion of my vehicle, while reversing into the parking lot on my left. The video shown the car drove off after the collision. My car front bumper and headlight were damaged.



**SINGAPORE
POLICE FORCE**



T/20220420/7031

3 of 3

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

Report No. T/20220420/7031

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 /
STEPHANIE, CHEUNG TSZ YING
Contact No.: 96208032

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

Date/Time:
20/04/2022 15:53

Classification Of Case:

VEHICLE NO:	SMY 7228D		MAKE & MODEL:	Toyota Camry, <u>AUTO</u> MANUAL	
DATE OF ACCIDENT:	18 / 04 / 2022		CC:	2.5 (2494cc)	
TIME OF ACCIDENT:	17 10 HRS				
LOCATION OF ACCIDENT:	BLK 52A Telok Blangah Multi-storey Carpark.				
EXACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT / <u>PRIVATE USE</u> / PRIVATE HIRE				
NAME OF OWNER:	YEO CHOO WAH.				
TEL NO:	H/P: 9100 5205		OFFICE:	HOME:	
NRIC:	S 1697682B				
ADDRESS:	BLK 54 Telok Blangah Drive #13-30 (S) 100254				
EMAIL:	-				
CLAIM TYPE:	OD / <u>THIRD PARTY</u> / REPORTING ONLY				
FLEET POLICY:	YES / <u>NO</u>				
INSURANCE COMPANY:	China Taiping.				
TYPE OF COVERAGE:	<u>Comprehensive</u> / Third Party / Third Party Fire & Theft				
POLICY NO:	DMPCSNW000T5932100.				
NAME OF DRIVER:	AS ABOVE / IF NO: TEH TENG GUONG				
NRIC:	S 1702252J		ANY PASSENGER:	N.A.	
DATE OF BIRTH:	17 / 05 / 1965		LICENCE PASSED DATE:	06 / 09 / 1986	
OCCUPATION:	<u>OUTDOOR</u> / INDOOR				
GENDER:	<u>MALE</u> / FEMALE				
CONTACT NO:	H/P: 9116 7995		OFFICE:	HOME:	
ADDRESS:	BLK 54 Telok Blangah Drive #13-30 (S) 100254.				
EMAIL:	tommytehtg@yahoo.com.sg.				
DOES DRIVER OWNED ANY VEHICLE:	<u>NO</u> / IF YES, REG NO:		INSURER:		
RELATIONSHIP:	<u>Husband</u>				
WEATHER CONDITION:	<u>CLEAR</u> / RAINING / OTHERS:				
ROAD SURFACE:	<u>DRY</u> / WET / OTHER:				
ANY INJURIES:	<u>NO</u> / IF YES, WHO?				
NAME & CONTACT:					
NAME & CONTACT:					
POLICE REPORT:	NO / IF YES, WHERE?		<u>Traffic Police (On-line)</u>		
NOTICE OF INTENDED PROSECUTION GIVEN?	<u>NO</u> / IF YES, WHO?				
VEHICLE B REG NO:	SMM 2517 R		ANY PASSENGERS: <u>Not sure.</u>		
NAME OF DRIVER:			CONTACT NO:		
VEHICLE C REG NO:			ANY PASSENGERS:		
VEHICLE D REG NO:			ANY PASSENGERS:		
VEHICLE E REG NO:			ANY PASSENGERS:		
VEHICLE F REG NO:			ANY PASSENGERS:		
VEHICLE G REG NO:			ANY PASSENGERS:		
ANY WITNESS? IF YES, NAME:	N.A.		WITNESS CONTACT: <u>N.A.</u>		
WAS THERE ANY VIDEO CAPTURE?	<u>YES</u> / NO				
WAS THERE ANY AUDIO RECORDED?	YES / <u>NO</u>				
ACCIDENT SCENE PHOTOS TAKEN?	YES / <u>NO</u>				
ACCIDENT PORTION:	<u>Front left Portion.</u>				
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?			YES / <u>NO</u>		
WORKSHOP PARTICULAR:	<u>Twincar Automotive Pte Ltd.</u>				
CONTACT NO:	68420051 / 67440510				
CONTACT PERSON:	<u>JOSEPH TAN.</u>				
FAX NO:	67410510				
WORKSHOP EMAIL:	sales@n51.com.sg				

Motor Private Car

MX1F

E SN

AN0705A

Cov. Type:C

CERTIFICATE OF INSURANCEMotor 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.

DMPCSNW00075932100

Engine No.: 2ARU334498

Cha. No.:MR053AK5004011281

1. Index Mark and Registration
Number of Vehicle

SMY7228D

AUTOSAFE

=====

2. Name of Policy Holder

YEO CHOO WAH

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment13/04/2021
(11:23:41)

Named Drivers Ex Sect. I

S\$1,000.00

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

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.: OCBC 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: _____
Tan Mingjie
Authorised Officer

Authorised Signatory