

NATIONAL Assessment Centre Services

Date In: 23/05/2022	Job description	Date & Time Completed	Done by
Ref No: NA / LIP 22004841/m4	SAS e-filing		
Veh No: YQ 3473M	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 20/05/2022 10:30	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: SGH 233U	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 2201397	Invoice Preparation Checklist		Amt (\$)	Amt (\$)	
			1st Bill	Add Bill	
Claimant's Particulars :-	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) FT : 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:-				
QC Checked by (Engr-In-Charge):	ON*				
	*N5: Courtesy Car / Tpt Allowance \$5				
	*N6: Repair Co-ordination \$10				
	*N7: Post Repair Inspection \$25				
Auditors' Comments :-	*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	23/05/2022 18:12 (SGT)
Date of Accident	20/05/2022 10:30 (SGT)
Exact Location of Accident	57 New Upper Changi Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YQ3473M
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	H.W AGRI-FOOD TRADING PTE. LTD.
Company Reg No	2XXXXX739W
Email Address	ohsinsurance@yahoo.com
Mobile Phone No	(Phone) +65-98796053
Alternative Phone No	+65-98796053

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	NPR75UH5A
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 - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	5193

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SD21V12861/VCV/R04
Cover Note Number	-

DRIVER

Name of Driver	TAN KAR CHUN
NRIC No	SXXXX327A

Date Of Birth	27/12/1962
Occupation	Outdoor
Date Of Driving Pass	27/10/2010
Driving experience	11 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98796053
Alt. Phone Number	-
Email Address	ohsinsurance@yahoo.com
Address	211 JURONG EAST STREET 21
Address complement	#06-327
Postcode	600211
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT.

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	SGH233U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ANG TIN YONG
NRIC No	SXXXX637E
Contact Number	-
Address	-

SKETCH PLAN

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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.

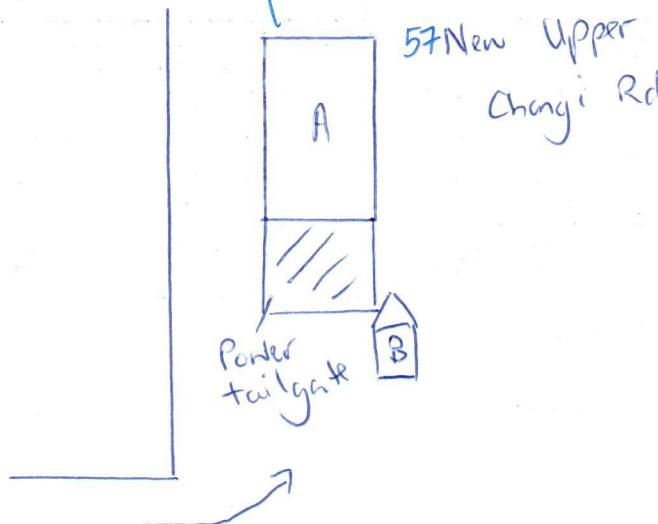


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



DOA: 20/5/22

A: 4Q 3473#M

B: SQH 233U

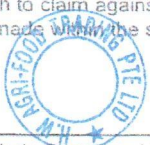
Describe Circumstances of the Accident


My lorry was parked stationary with my power tailgate opened, suddenly veh 3 drive pass & hit onto the edge of my power tailgate

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.


Policy holder's Signature / Date & Time


Driver's Signature (if driver is not the policy holder) / Date & Time

 23/5/22
Witnessed by Reporting Centre Personnel

Date of Accident : 20/5/22		Time of Accident : 10:30 am	
Exact Location of Accident : 57 New Upper Changi Rd			
Purpose Of Reporting : OWN DAMAGE CLAIM / 3RD PARTY CLAIM / JUST REPORTING ONLY			
Weather Condition : Clear / Raining		Wet / Dry	
Private Use / Work			
Owner's Name : H.W. Agri-Food Trading PL		NRIC : 200207739W	HP : 98796053
Driver's Name : Tan Kar Chun		NRIC : 82707327A	HP : 98796053
DOB : 27/12/1962	Driving Licence Passing Date : 27/10/2010		Occupation : Indoor / Outdoor
Address : 211 Jurong East Street 21 #06-327 (S) 600211.			
Relationship Of Driver with Insured : Employee		Email : ohsinsurance @ yahoo - com	
Vehicle Number : YQ 3473 M		Make & Model : Isuzu (m) NPR75UH5A (5193cc)	
Insurance Company : Liberty		Policy Num : SD21V12861/VCV/R04	Coverage : Comprehensive
Any passengers inside vehicle involved (YES / NO) If yes, Vehicle Number & How many pax			
A : 0	B : 1 + 1	C :	D :
Vehicle A Passenger Name : woman			
Anyone Injured :			
<input checked="" type="radio"/> NO		<input type="radio"/> YES Name / NRIC / Which Vehicle :	
Was The Accident Reported To The Police ?			
<input checked="" type="radio"/> NO		<input 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 checked="" type="radio"/> NO <input type="radio"/> YES			

Third Party's Particular

Vehicle B's Number : SGM 233U		Make & Model :	
Driver's Name : Ang Tin Yong		NRIC : S1421637E	HP :
Vehicle C's Number :		Make & Model :	
Driver's Name :		NRIC :	HP :

Witness's Particular

Address : 211 Jurong East Street 21 #06-327 (S) 600211.



Insurance



ACCIDENT RESPONSE
ROADSIDE ASSISTANCE
FLOOD ASSISTANCE

Singapore 669428
Tel: (65) 6221 8611
Website: <http://www.libertyinsurance.com>

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
ROAD TRANSPORT (AMENDMENT) ACT 2019
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959

Certificate No	SD21V12861 /VCV /R04
Form	MZ300A
Date Of Issue	08-SEP-2021

1. Index Mark and Registration No. of Vehicle: YQ3473M
2. Chassis number of Vehicle: JAANPR75HM7100259
3. Name of Policyholder: H.W AGRI-FOOD TRADING PTE. LTD.
4. Effective date of Commencement of Insurance for the purposes of the Act: 12-SEP-2021 00:00 AM
5. Date of Expiry of Insurance: 11-SEP-2022 23:59 PM

6. 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 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 and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7. 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 and pleasure purposes.

8. The Policy does not cover:

- 1. Use for hire or reward or for racing, pace-making, reliability trials 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 the Road Transport Act, 1987 are not to be included under these headings.

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.

For and on behalf of
LIBERTY INSURANCE PTE. LTD.
Approved Insurers

Authorised Signature

9. Information only:

COVERAGE :

Comprehensive, Unlimited Windscreen, Third Party Working Risk, Additional Accessories - Police Tailgate

VEHICLE INSURED:

MARKET VALUE AT THE TIME OF LOSS

EXCESS:

Section I S\$1000, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers S\$1000, Windscreen Excess S\$100

INSURANCE COMPANY:

PRODUCER NAME:

ONG HUI SENG LIFE & GENERAL INSURANCE AGENCY

08/13-SEP-21

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2021, 9:18 AM