

NATIONAL Assessment Centre Services

Date In: 07/06/22	Job description	Date & Time Completed	Done by
Ref No: NA/LIP22005395/13	SAS e-filing		
Veh No: 5LL9789T	E-mail (within 8hrs, AP: 2hrs)		
DOA: 06/06/22 1740	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: SGX3938R	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

NA2201591	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			1st Bill	Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);			
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
	5) RT: Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection \$75			
	7) NI: 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			
	*N8: DV / Collect Excess Coordination \$5			
Auditors' Comments :-	TP (N11): TP (Non INC) against INC \$20			
Cat. 1:	9) N12: Idac Mobile \$0			
Cat. 2 / 3:	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	07/06/2022 15:20 (SGT)
Date of Accident	06/06/2022 17:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TWDS CHANGI
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL9789T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MOOI MENG WAI(MEI MINGWEI)
NRIC No	SXXXX872J
Email Address	cuiping@carway.com.sg
Mobile Phone No	(Phone) +65-98772849
Alternative Phone No	+65-98772849

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Civic
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	1597

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SI22V01911/VPC/R03
Cover Note Number	-

DRIVER

Name of Driver	MOOI MENG WAI(MEI MINGWEI)
NRIC No	SXXXX872J

Date Of Birth	02/08/1971
Occupation	Indoor
Date Of Driving Pass	09/02/2001
Driving experience	21 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98772849
Alt. Phone Number	+65-98772849
Email Address	cuiping@carway.com.sg
Address	BLK 15 JOO SENG RD
Address complement	#07-73
Postcode	360015
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 - Head to Rear
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

PLS REFER TO THE ATTACHED STATEMENT.

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 WORKSHOP
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGX3938R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	POH WEN BIN
NRIC No	SXXXX885G
Contact Number	(Phone) +65-90035141

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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.

MMK 07/06/22

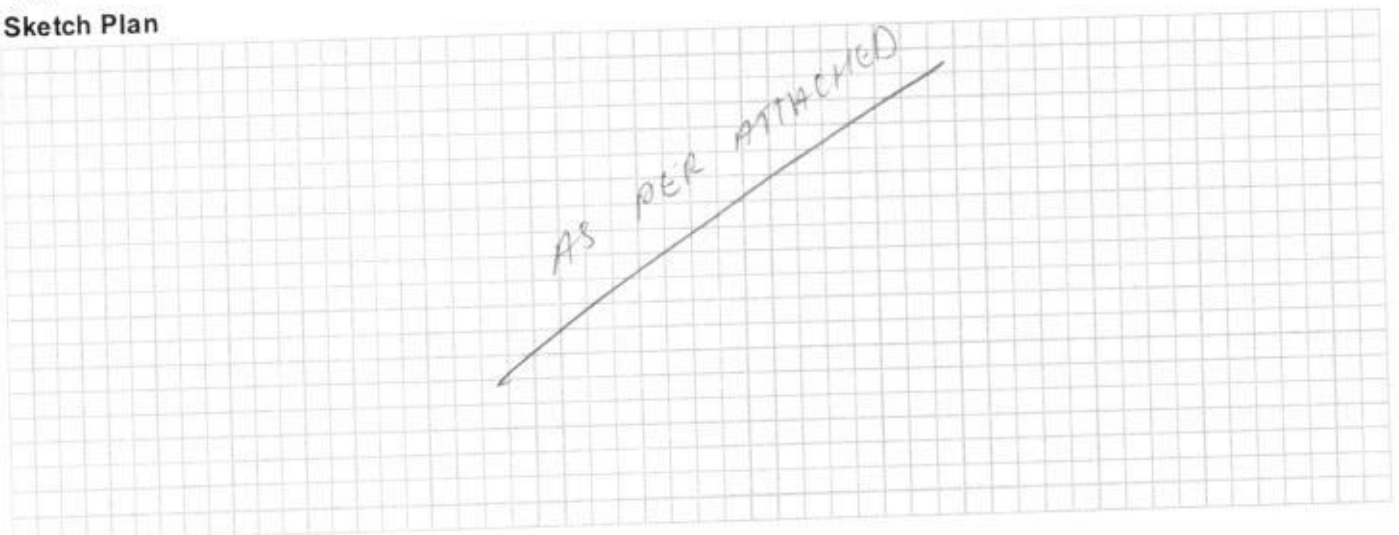
Policyholder's Signature / Date & Time

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

Shyn 07/06/22

Witnessed by Reporting Centre Personnel

Sketch Plan



Pan-Island Expressway (PIE) Exit 1 From Tuas Towards Changi Airport

Map: Directions

- Map
- Building Directory
- What's Nearby
- Get Tips
- Getting Here

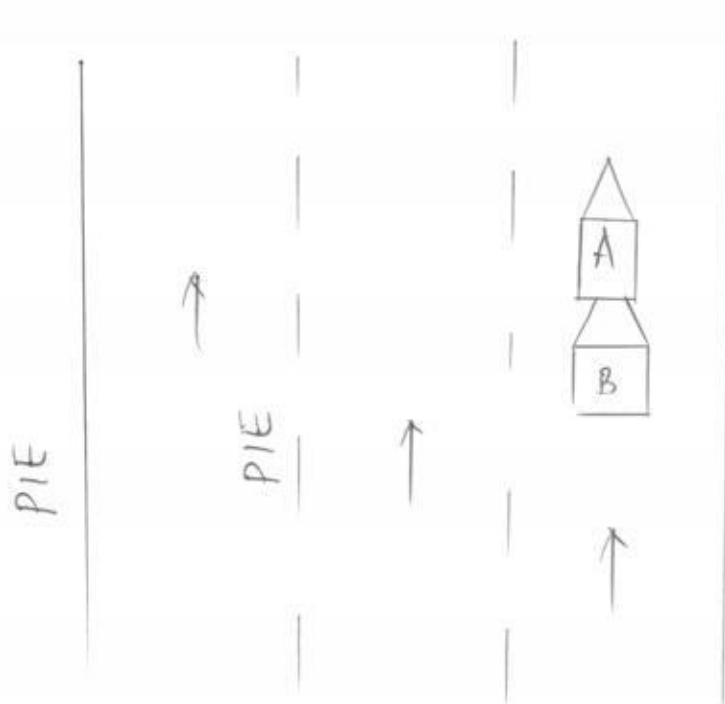
5 Things You Shouldn't Do If Hes Cheating On You

Pan-Island Expressway (PIE) Exit 1 From Tuas Towards

part



Accident site



A - SLL 9789T
B - SGV 3938R

on the
S7124872/J

Describe Circumstances of the Accident

Pls refer to the attached statement.

Declaration

We declare the foregoing particulars are true in every respect.

207 inc 07/06/22

Policyholder's Signature / Date &
Time

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

shym 07/06/22

Witnessed by Reporting Centre
Personnel

Accident Statement

On 06th June 2022 at about 1740 Hrs, my vehicle (SLL9789T) was travelling along PIE towards Changi. The vehicles in front of me stopped and I followed suit. I managed to stop my vehicle in order to avoid the collision with the vehicle in front of me. Suddenly and without warning, a vehicle (SGX3938R) hit onto the rear of my vehicle. I have an in-car camera captured the said accident and accident photos were taken at the scene.

I am making a claim against third party.



Name: Mooi Meng Wai
I/C: S7124872J

ACCIDENT STATEMENT

ACCIDENT DATE: (06/06/22) (DD/MM/YYYY), TIME: (17:40) (HH:MM)

LOCATION: PIE T WAS CHANGI

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLL9789T
b) INSURANCE COMPANY: _____
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: _____ AUTO / MANUAL
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
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: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 98772849
c) ADDRESS: _____

* 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: 02/08/1971 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 09/2/2001

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

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: SGX3938R MODEL: _____
b) DRIVER'S NAME: POH WEN BIN
c) NRIC/FIN/PASSPORT: S85288856 CONTACT: 90035141

9. THIRD PARTY VEHICLE

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

carway

Email =

fax =

VIDEO = yes, with workshop

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

Name of Policyholder: MOOI MENG WAI (MEI MINGWEI)		Certificate No.: SI22V01911/ VPC / R03
Date of Issue: 10 Feb 2022	Effective Date of Commencement: 17 Mar 2022 00:00	Date of Expiry: 16 Mar 2023 23:59
Registration No.: SLL9789T	Chassis No.: MRHFC5650GT001029	Type of Certificate: MX1

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.

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.

Limitations as to use:

Use only 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.

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.

*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 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.



For and on behalf of
LIBERTY INSURANCE PTE LTD
 Approved Insurers

For Information Only:

Coverage(s):	Comprehensive, Unlimited Windscreen, NCD Protection
Sum Insured:	MARKET VALUE AT THE TIME OF LOSS
Excess:	Section I S\$600, Additional Excess for Young & Inexperienced Drivers S\$3000, Windscreen Excess S\$100
Name of Finance Company:	OCBC BANK LTD
Name of Producer:	KAH MOTOR COMPANY SDN BERHAD (A1572-7)

CARWAY LEASING & RENTAL

53 Ubi Avenue 1 #03-01 Paya Ubi Industrial Park, Singapore 408934

R.O.C No: 53264813K

☎ 6744 0777

☎ 6744 2377

RENTAL AGREEMENT

No: CLR - 220138R

Make / Model:	Vehicle No:	IU No:
NISSAN JUKE 1.6 A	SKH 2455 K	1124802504

HIRER'S PARTICULARS		DRIVER'S PARTICULARS (if different from Hirer)	
Name	: MOOI MENG WAI	Name	:
Address	: BLK 15 JOO SENG ROAD #07-73 SG 360015	Address	: SG
Email	:	Telephone (HP)	:
Telephone (HP)	:	(O)	:
NRIC / PP No	: S7124872J	NRIC / PP No	:
Occupation	:	Occupation	:
Nationality	: SINGAPOREAN	Nationality	:
D.O.B	: 2 AUG 1971	D.O.B	:
Driving Lic No	: S7124872J	Driving Lic No	:
Driving Experience:	21 Yrs	Driving Experience:	Yrs

CHARGES			
Day (s)	@ S\$	Day	S\$
Week (s)	@ S\$	/ Week	S\$
Month (s)**	@ S\$	/ Month	S\$
<i>Note ** (Monthly rental cycle = 30 Days)</i>			
Additional Rental Payable (eg: M'sia Usage) -		0 Days	S\$
Advanced Deposit (REFUNDABLE)			S\$
Subtotal			S\$
Less Deposit BY:			S\$
Balance Payable BY:			S\$
* Theft / Fire / Accident (Direct / Conflict Cases) Excess Liability			
Singapore	: Own S\$ 2,000.00	TP	S\$ 2,000.00
Malaysia	: Own S\$ 3,000.00	TP	S\$ 3,000.00
* Hirer / Driver shall be fully responsible for ALL cost incurred if the insurance company repudiated liability or rejected any claims raised.			

Important Notes:

- 1) I, the Hirer, agreed to hold whatever responsibilities for any damage(s) caused by vehicular accident, traffic offence(s) and/or any other penalty(ies) in connection with the use of the said vehicle during the period when it is in my custody including in M'sia.
- 2) In the event of the accident, Hirer is fully liable for the towing charges from the accident scene to the repairer PLUS loss of earnings while the damaged vehicle is under repair (if any).
- 3) The vehicle can only be used within Singapore ONLY. PENALTY of S\$80.00 / day will be imposed for unauthorised usage to M'sia.
- 4) SMOKING IS STRICTLY PROHIBITED IN THE VEHICLE.

In the event of smoking, cleaning fees of \$150.00 will apply.

I/We declare that the above particulars are true and correct in every respect and I/We have read and understood the terms and conditions of the hire agreement printed overleaf.

Signature of Hirer / Date

Signature of Driver / Date

(if different from Hirer)

Terms & Conditions:

The Hirer is OBLIGED to fulfil/complete the full Rentals stated in this Rental Agreement. Should there be any early termination by the Hirer, the Hirer shall pay ALL remaining Rentals in this Hire Agreement and return the vehicle to the owner.

Date Out: 06-Jun-22	Date In:
Time Out: Hrs	Time In: Hrs
Delivery / Self-Collection	Self-Delivery / Collection

Hire period expires on: _____ at _____ Hrs.