

NATIONAL Assessment Centre Services

Date In: 13/06/22	Job description	Date & Time Completed	Done by
Ref No: NA/C722005574/13	SAS e-filing		
Veh No: smy4599c	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 12/06/22 1745	i-Motor Claim Form		
OD: (1P) 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: smk7382P	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 2201655	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		1st Bill	Add Bill
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			
QC Checked by (Engr-In-Charge):	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:-			
	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 30			
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	13/06/2022 16:29 (SGT)
Date of Accident	12/06/2022 17:46 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	T-JUNC OF LOR 2 TOA PAYOH
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMY4599C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YAP BOCK CHENG
NRIC No	SXXXX847Z
Email Address	bcyap59@hotmail.com
Mobile Phone No	(Phone) +65-83820159
Alternative Phone No	+65-83820159

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
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	1598

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00051632200
Cover Note Number	-

DRIVER

Name of Driver	YAP BOCK CHENG
NRIC No	SXXXX847Z

Date Of Birth	14/12/1959
Occupation	Indoor
Date Of Driving Pass	05/09/1978
Driving experience	43 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83820159
Alt. Phone Number	+65-83820159
Email Address	bcyap59@hotmail.com
Address	BLK 191 LOR 4 TOA PAYOH
Address complement	#25-650
Postcode	310191
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	Side Swipe
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	SMK7382P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
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.

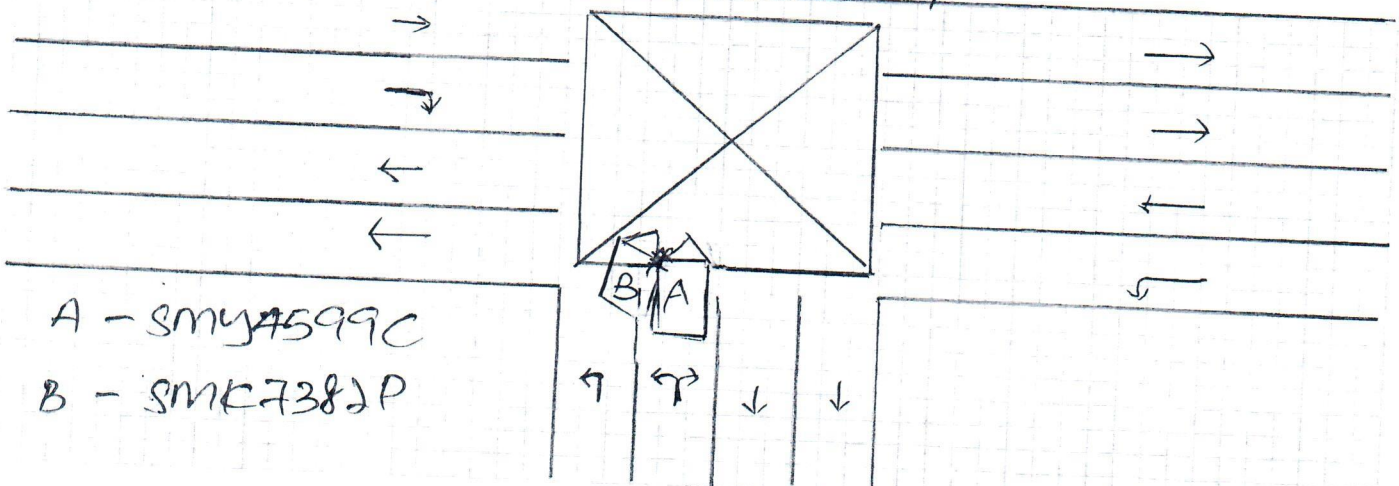
Policyholder's Signature / Date & Time
13/6/22 1230hrs

Driver's Signature (If driver is not the policyholder) / Date & Time
13/6/22 1230hrs

Witnessed by Reporting Centre Personnel

Sketch Plan

Lor 2 Toa Payoh



Describe Circumstances of the Accident

ON 12/06/2022 AT ABOUT 12:45 HRS, I WAS TRAVELLING ALONG
T-JUNCTION OF LORONG 2 TO A PAYOH. AS THE TRAFFIC LIGHT
IS IN FAVOUR TO ME, I PROCEEDED TO TURN LEFT FROM
LANE 1. VEHICLE B, WHO WAS AT LANE 2 (TURN LEFT
LANE ONLY) WAS TRYING TO TURN RIGHT AND COLLIDED
INTO THE FRONT LEFT HAND PORTION OF MY VEHICLE.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &

Time 13/6/22

1234hrs




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

& Time

13/6/22

1234hrs

 13/06/22

Witnessed by Reporting Centre
Personnel

VEHICLE NO: SMY4599CMAKE & MODEL : Hyundai Avante ☒ AUTO / MANUAL

DATE OF ACCIDENT	<u>12 / 06 / 2022</u>	*C.C: <u>1598</u>
TIME OF ACCIDENT	<u>1246hrs</u>	AM / <input checked="" type="radio"/> PM
LOCATION OF ACCIDENT	<u>T-Junction of Lorong 3 - Toa Payoh</u>	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	<u>YAP BOCK CHENG</u> Email: <u>BCYAP59@HOTMAIL.COM</u>	
TELP NO	Mobile: <u>8382 0159</u> Office: <u>-</u> Home: <u>-</u>	
NRIC	<u>S13728472</u>	
CLAIM TYPE	OD / <input checked="" type="radio"/> THIRD PARTY / REPORTING ONLY	
FLEET POLICY:	YES / <input checked="" type="radio"/> NO ?	
INSURANCE CO.	<u>China Taiping</u>	
TYPE OF COVERAGE	Comprehensive / <input checked="" type="radio"/> Third Party / Third Party Fire & Theft	
POLICY NO.	<u>DMPCSNW00051632200</u>	
NAME OF DRIVER	AS ABOVE / IF NO: <u>YAP BOCK CHENG</u>	
NRIC	<u>S13728472</u>	
DATE OF BIRTH	<u>14 / 12 / 1959</u>	
ANY PASSENGER	YES / <input checked="" type="radio"/> NO	
NAME OF PASSENGER		
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / <input checked="" type="radio"/> Indoor	
DATE OF DRIVING PASS	<u>05 / 09 / 1978</u>	
GENDER	Male / Female	
CONTACT NO.	Mobile: <u>8382 0159</u> Office: <u>-</u> Home: <u>-</u>	
EMAIL:	<u>BCYAP59@HOTMAIL.COM</u>	
ADDRESS	<u>Blk 191 Lorong 4 Toa Payoh #5-650 S (310191)</u>	
DOES DRIVER OWN OTHER VEHICLES?	<input checked="" type="radio"/> NO / If yes, Reg No. <u>INSURER.</u>	
RELATIONSHIP	Employee / If <input checked="" type="radio"/> owner	
WEATHER CONDITION	<input checked="" type="radio"/> Clear / Raining / Other.	
ROAD SURFACE	<input checked="" type="radio"/> Dry / Wet / Other.	
ANY INJURIES	<input checked="" type="radio"/> No / If yes, Who?	
CONTACT NO.		
POLICE REPORT	<input checked="" type="radio"/> No / If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	<input checked="" type="radio"/> NO / IF YES, WHO?	
VEHICLE B NO.	<u>SMK7382P</u> Any Passenger: <u>1 - Female</u>	
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	<input checked="" type="radio"/> YES / NO	
WAS THERE ANY AUDIO RECORDED?	YES / <input checked="" type="radio"/> NO	
SCENE ACCIDENT PHOTOS TAKEN?	<input checked="" type="radio"/> YES / NO	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / <input checked="" type="radio"/> NO	



Motor Private Car

MX1F

N SN

AN0083A

Cov. Type:C

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.

DMPCSNW00051632200

Engine No.: G4FMMU261673

Cha. No.:KMHLN41ETNU154955

1. Index Mark and Registration
Number of Vehicle

SMY4599C

2. Name of Policy Holder

YAP BOCK CHENG

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

09/03/2022
(00:00:00)

Named Drivers Ex Sect. I S\$500.00
Additional Ex Other than Named Drivers:

4. Date of Expiry of Insurance

08/03/2023

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.: HONG LEONG FINANCE 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:

Chua Suat Lay Sally
Authorised Officer

Authorised Signatory



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.

ORIGINAL

THE SCHEDULE

Agency : AN0083A Class of Policy : Motor Private Car Policy No. : DMPCSNW00051632200
Account : AN0083A Issued on : 22/02/2022 in SINGAPORE
Client : Y081692I Acceptance Date : 22/02/2022

Period of Insurance : 09/03/2022 to 08/03/2023 , both dates inclusive

Insured's Name : YAP BOCK CHENG

Address : 191 LORONG 4 TOA PAYOH
#25-650
Singapore 310191

Business/Occupation : TECHNICIAN

Premium	:	Basic Annual Premium	:	S\$2,015.00
	:	No Claim Discount -50%	:	S\$ 1,007.50
	:	Promotion Discount	:	S\$ 100.75
	:	Total Annual Premium	:	S\$906.75
	:	Premium Due	:	S\$906.75
	:	Premium GST	:	S\$63.47
	:	Total Due	:	S\$970.22

Risk No.1	Motor Private Car		
Make/Model	: Hyundai CN7 AVANTE 1.6 DOHC CVT S/No. of seats	:	5
Registration	: SMY4599C	Body Type	: Saloon
Engine No.	: G4FMMU2616/3	Capacity cc's	: 1598
Chassis No.	: KMHLN41ETNU154955	Certificate Ref.	: MX1F
Year of Manuf/Regn	: 2021/2021		
Type of Cover	: Comprehensive		
Financial Interest	: HONG LEONG FINANCE LTD		

Sum Insured:Market value at the time of loss

Named Drivers Ex Sect. I : S\$500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 : S\$3,000.00

Ex Sect. I - Age >= 26 : S\$500.00

*An additional excess of \$3,000 shall apply for Inexperienced Driver with less than 1 year Singapore Driving Licence.

The maximum additional excess of \$3,500 shall apply if the driver is both Young (Age <=25) and Inexperienced (less than 1 year Singapore Driving Licence). Unless otherwise stated in the policy.

* Age as at date of accident

EX ON WINDSCREEN : S\$100.00

Named Drivers THE INSURED : YAP BOCK CHENG

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