

NATIONAL Assessment Centre Services

Date In: 27/06/22	Job description	Date & Time Completed	Done by
Ref No. NAICT7220061101r3	SAS e-filing		
Veh No. 565 4143L	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 25/06/22 2255	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: 62 7127C	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

Claimant's Particulars: NA2201772	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);			
Contact No:	2) DA: Damage Assessment (\$100); INC (\$30)			
Damaged Portion:	3) TF: Towing Fee \$40/\$45			
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120			
Auditors' Comments:	5) FT: Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-Inspection \$75			
	7) N1: Idao DA + SMRT Survey \$160			
	8) NTUC Additional Services:			
	ON*			
	*N5: Courtesy Car / Tp 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: Idno Mobile 30			
	Invoice dated	Fee Charged		
	Invoice dated	Fee Charged		

IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:


Original Report No: SN09226R0007 Vehicle Registration No: SGS 4143L
Name (as shown in NRIC): Jonathan ong wei song NRIC/FIN/Passport No: S9045391B
(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
Address: 735 Yishun Street 72 #08-17 Singapore (760735)
Contact (Tel): 97218719 Mobile No.: -
Email Address: Jonathanows@gotmail.com
Date of Accident: 25/06/2022 Time of Accident: 2245
Place of Accident: 735 Yishun Street 72 carpark
Insurance Company: China Taiping Insurance

(B) ADDITIONAL INFORMATION /AMENDMENTS:


I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Update Phone number : H/P: 97218719

Add in pic of damaged



Policyholder / Driver's Signature
Date:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:

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	27/06/2022 14:44 (SGT)
Reported by	Both
Date of Accident	25/06/2022 22:55 (SGT)
Exact Location of Accident	735 Yishun Street 72, Singapore 760735
Additional Location Information	CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGS4143L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JONATHAN ONG WEI SONG
NRIC No	SXXXX391B
Email Address	JONATHAN_OWS@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97218719
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	EURO R
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	Manual
CC	1998

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00081112200

DRIVER

Name of Driver	JONATHAN ONG WEI SONG
NRIC No	SXXXX391B
Date Of Birth	28/11/1990
Occupation	Indoor

Date Of Driving Pass	11/03/2010
Driving experience	12 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94218719
Alt. Phone Number	-
Email Address	JONATHAN_OWS@HOTMAIL.COM
Address	735 Yishun Street 72 #08-17
Address complement	-
Postcode	760735
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	Collided into Parked Vehicle
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Woodlands Division Headquarters
Police Station Phone No	(Phone) +65-18004660000
Police Station Address	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GZ7127C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

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.

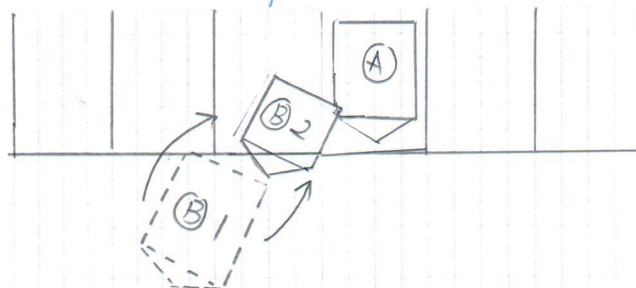
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

BUK 735 YISHUN ST72
S1766735 CARPARK.



VEHICLE A SFS 4143L

B GZ 7127C.

Describe Circumstances of the Accident

PLEASE REFER TO THE POLICE REPORT NO: 2/20220626/7001

Declaration

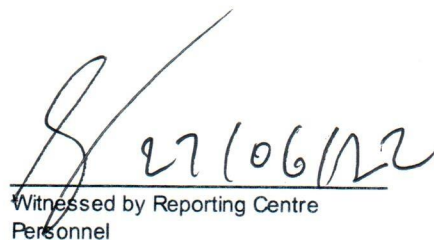
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



27/06/22

Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE



L/20220626/7001

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POLICE REPORT (NP299)

Report No. L/20220626/7001

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000

Date/Time Report Made 26/06/2022 03:22	Vide Report No.	Station Diary No.
Name Of Informant JONATHAN ONG WEI SONG	Address 735 YISHUN STREET 72 #08-17 SINGAPORE 760735	
ID Type / ID No. NRIC NO / S9045391B	Contact No. Home/Office:	Mobile: 97218719
Nationality SINGAPORE CITIZEN	Email Address JONATHAN OWS@HOTMAIL.COM	
Occupation Trailer driver	Sex Male	Age 31
	Date of Birth 28/11/1990	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 25/06/2022 22:45 - 25/06/2022 23:25	Location Of Incident 735 YISHUN STREET 72 #08-17 SINGAPORE 760735	

Brief details.

At around 9.40pm I reach home and park my car at Blk 731 Yishun street 72 and I bring up son home after having dinner . I clean up my son and make him sleep at around 10.30pm when I was at the kitchen I heard a bang sound . Than I look out of my kitchen window saw a white van was reversing beside my car than I want to take a quick shower. After shower I feel abit weird so I went down to the car park and take a look on my car and someone hit on to my car without leaving any note on my car. After texting and asking around my friends and I decided to call police at 12.07am. My car has damaged on the front left bumper and the front grille was broken. My car number plate SGS 4143 L

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 26/06/2022 03:22
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



L/20220626/7001

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20220626/7001

Subjects Involved			
Victim			
Person Name	JONATHAN ONG WEI SONG		
ID Type	NRIC NO	ID No	S9045391B
Gender	Male	Age	31
Race	Chinese	Language	English
Occupation	Trailer driver	Address	735 YISHUN STREET 72 #08-17 SINGAPORE 760735
Mobile No	97218719	Is Informant A Victim?	Yes
Person Name	JONATHAN ONG WEI SONG (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 26/06/2022 03:22
Officer In-Charge Of Case:	Classification Of Case:

Date of Accident : 25/06/22 Accident Time: 2255 HRS. (24-HR-Format)
 Accident Place : BLK 735 VISHUN ST 72 #08-17 S1760735 CARPARK
 Vehicle No. (Car Plate No.) : SGS 4143L Make/Model: HONDA ACCORD EURO R.
 Insurance Company : CHINA TAIPING Policy No: DMPCSNW0008111200
 Owner or Company Name /IC No. : JONATHAN ONG WEI SONG (SG045391B)
 Owner or Company Contact No. : 9721 8719 Owner's Hp 9721 8719 Company Tel
 DRIVER'S Name / IC No. : JONATHAN ONG WEI SONG (SG045391B)
 DRIVER'S Date Of Birth : 28/11/1996 DRIVER'S License Pass Date 11/03/2010
 Relationship of Owner & Driver : Spouse\Parent\Children\Sibling\Employee\Others: OWNER
 DRIVER'S Address : BLK 735 VISHUN ST 72 #08-17 S1760735
 DRIVER'S Contact No./ Alt No. : 1) 9721 8719 2) 9721 8719
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : JONATHAN - OWS @ HOTMAIL . COM
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 00
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at time of accident: Private use \ Work Purpose
 Any Injury (If YES, Pls state): 00

Other Party Driver's Particular (if any)

Vehicle. No: <u>(B) GZ 7127C</u>	Vehicle. No: _____
Vehicle Make \Model: _____	Vehicle Make \Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

* **NEW – Passenger's name & gender:**



Motor Private Car

MX1F

N SN

AN0723A

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.	DMPCSNW00081112200	Engine No.: K20A6540213	Cha. No.:CL71300210
1. Index Mark and Registration Number of Vehicle	SGS4143L	AUTOSAFE	=====
2. Name of Policy Holder	JONATHAN ONG WEI SONG		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	25/03/2022 (10:09:39)	Named Drivers Ex Sect. I	S\$1,750.00
		Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	S\$3,000.00
		Ex Sect. I - Age >= 26	S\$500.00
4. Date of Expiry of Insurance	24/03/2023	* 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.: SSL HOLDINGS PTE. 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: SSL & CO PTE LTD
Authorised Officer


Authorised Signatory