

# NATIONAL Assessment Centre Services

Unit 1 (Job No)

SL0922A30006

Ref No: 08/10/2022 15:44	Job description	Date & Time Completed	Done by
Ref No: X1B18MO20096931	SAS e-filing		
Ref No: SL06244	E-mail (write date, ABC etc)		
Ref No: 20/03/2022 09:00	1-Motor Claim Form		
	1-Motor W/O (write date, ABC etc, TP 4hrs)		
	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wkip		

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## 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 Actual 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	03/10/2022 15:44 (SGT)
Reported by	Both
Date of Accident	30/09/2022 09:50 (SGT)
Exact Location of Accident	108 Yishun Ring Rd, Singapore 760108
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ6244S
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TOH LENG CHAI
NRIC No	SXXXX862D
Email Address	lctoh76@gmail.com
Mobile Phone No	(Phone) +65-96722552
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D21MTPV01016591

### DRIVER

Name of Driver	TOH LENG CHAI
NRIC No	SXXXX862D
Date Of Birth	25/12/1976
Occupation	Indoor

Date Of Driving Pass	07/04/1995
Driving experience	27 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96722552
Alt. Phone Number	-
Email Address	lctoh76@gmail.com
Address	BLK 334A YISHUN STREET 31 #13-83
Address complement	-
Postcode	761334
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 - Major/Minor Rd
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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
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	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

PLEASE REFER TO POLICE REPORT T/20221003/7055

#### 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 TRAFFIC POLICE

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLG2778Y
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Etiqa Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	TOH LENG CHAI
Gender	Male
Phone No	(Phone) +65-96722552
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SERIOUS INJURY
Injured person in which vehicle?	SLQ6244S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No



## 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

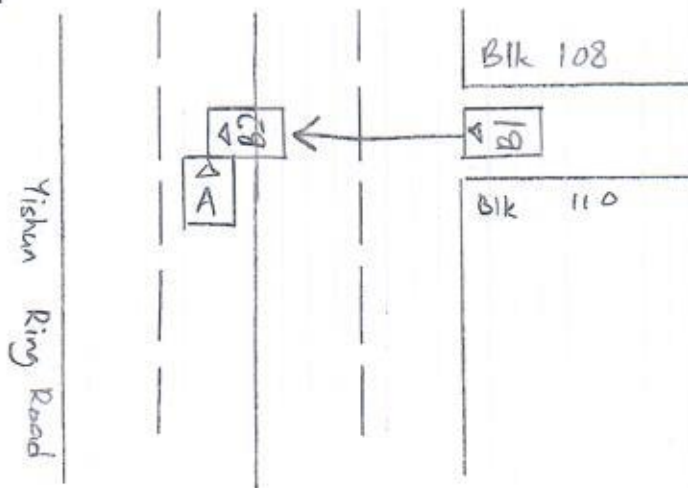
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel

### Sketch Plan



A = SLQ 6244S  
B = SLG 2778Y

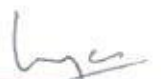
**Describe Circumstances of the Accident**

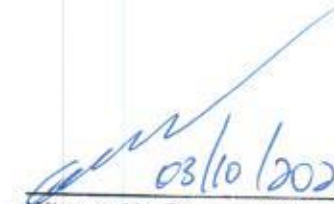
Refer police report T/20221003/7055

**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

  
03/10/2022  
Witnessed by Reporting Centre  
Personnel





# SINGAPORE POLICE FORCE



T/20221003/7055

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

1 of 3

Report No. T/20221003/7055

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 03/10/2022 11:20		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TOH LENG CHAI		Address: 334A YISHUN STREET 31 #13-83 SINGAPORE 761334			
ID Type / ID No.: NRIC NO / S7641862D		Contact No.: Home/Office:		Mobile: 96722552	
Nationality: SINGAPORE CITIZEN		Email: lctoh76@gmail.com			
Sex: Male	Age: 45	Date of Birth: 25/12/1976	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: CRITICAL INFRASTRUCTURE SPECIALIST		Driving Licence Information: Class: 3		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/09/2022 09:50	Type of Location: Straight Road
Location:  YISHUN RING ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLG2778Y	Car			Silver		2
SLQ6244S	Car	TOYOTA	TOYOTA COROLLA ALTIS 1.6L CVT	Silver	Seriously Damaged	1



**SINGAPORE  
POLICE FORCE**



T/20221003/7055

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

2 of 3

Report No. T/20221003/7055

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLQ6244S	TENET SOMPO INSURANCE PTE. LTD.	D21MTPV0101659 1	09/12/2021	08/12/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TOH LENG CHAI		ID No. S7641862D
Related Vehicle	SLQ6244S (Car)		Contact No. 96722552
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	30/09/2022		Date 02/10/2022
No. of Days granted Medical Leave	10	Degree of	Serious

**Brief Details.**

On 30.09.2022 at about 0950 hrs. I was travelling at yishun ring road. Suddenly, the vehicle B come out from carpark exit, it rushed out hit the bush and fly to hit my vehicle.

I felt pain to my neck, right hand and back after the accident. I was given ten days from "Khoo Teck Puat Hospital"

I had a video from my in-car camera and pass to traffic polis. I get the acknowledgement slip ref: report no: #L/20220930/0041





**SINGAPORE  
POLICE FORCE**



T/20221003/7055

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

3 of 3

Report No. T/20221003/7055

**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 /  
SYED MUHAMMAD BIN SYED FARID ALBAR  
Contact No.: 65476209

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

Date/Time:  
03/10/2022 11:20

Classification Of Case:



**SINGAPORE POLICE FORCE**  
**ACKNOWLEDGEMENT SLIP**

Ref: Report No: #L/20220930/0041

I, Sgt (3) To3415 Sufian  
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of TP  
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 1X 64GB Sandisk

2

3

4

5

6

7

8

9

10

from S1353691J Sim Boon Kuan  
(Name, NRIC or Passport No. / Rank and No.)

of 310C Ang Mo Kio Ave 1  
(Address / Police Station / NPC / NPP)

on 30/09/22 at 1110 hrs  
(Date) (Time)

Witnessed by / \* Handed over by:  
(\* Delete if applicable)

Received by:

(Signature)

Signature

(Name, NRIC or Passport No. / Rank and No.)

Sgt To3415  
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks:

lodge accident report once discharge  
to Fizeh.  
65476256



(5)

Date of Accident : 30.09.2022 Accident Time : 0950 (24-HR-Format)

Who reported the accident? : Owner / Driver / Both

Accident Place : Blk 108 Yishun Ring Road

Vehicle No (Car Plate No) : SLQ 6244S Make/Model: Toyota Corolla Altis

Insurance Company : Sompo Policy No: D21MTPV01016591

Fleet Policy : YES / NO

Type of Coverage : Comprehensive / Third Party / Third Party Fire & Theft

Name of Owner / IC No : Toh Leng Chai (S7641862D)

Owner Contact No : 96722552 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_

Driver Name / IC No : As above

Driver's Date of Birth : 25.12.1976 Driver's License Pass Date: 07 Apr 1995

Relationship of Driver : Spouse / Parents / Children / Sibling / Employee / Other: Owner

Driver's Address : Blk 334A Yishun Street 31 #13-83 S 761334

Driver's Contact No : 1) \_\_\_\_\_ 2) \_\_\_\_\_

Driver's Occupation : INDOOR / OUTDOOR (e.g. working inside or outside office)

Email Address : lctoh76@gmail.com

Weather & Road Surface : CLEAR & DRY / RAINING & WET / AFTER RAIN & WET

Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance

Number of Passenger(include Driver) : 1 person (owner)

Was there any video footage? : YES / NO

Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose

Any injury (If Yes, Pls State) : Yes

**Other Party Driver's Particular (if any)**

VEH B : <u>SLG 2778Y (Eliga)</u>	Name & Contact No: _____
VEH C : _____	Name & Contact No: _____
VEH D : _____	Name & Contact No: _____
VEH E : _____	Name & Contact No: _____

\*NEW - Passenger's Name & Gender:

*hyc*

### Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
 ROAD TRANSPORT ACT 1987 (MALAYSIA)  
 ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)  
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1999 (MALAYSIA)

Certificate/Policy No. : D21MTPV01016591  
 Insured : TOH LENG CHAI  
 Motor Vehicle (Registration No.) : SLQ8244S  
 Coverage : Comprehensive - ExcelDrive GOLD  
 Policy Commencement Date : 09 DECEMBER 2021 00:00  
 Policy Expiry Date : 08 DECEMBER 2022 23:59  
 Maximum Liability (Section I) : Market value at time of loss  
 Excess\* : \$500 - Section I  
 Voluntary Excess\* : N.A.  
 Windscreen Excess\* : S\$100.00 for each and every applicable claim.  
 \* Subject to GST wherever applicable

**Persons or Classes of Persons entitled to drive\***

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the Insured,
  - a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
  - b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

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 (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

**Limitations As To Use**

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

**ExcelDrive Workshops and Accident Reporting**

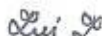
It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at [www.sompo.com.sg](http://www.sompo.com.sg) or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP.30

**Sompo Insurance Singapore Pte. Ltd.**



**Authorised Signatory**

Date/Time of Issue : 18 NOVEMBER 2021 11:56

**IMPORTANT NOTICE**

- a. Keep the Certificate in your Motor Vehicle.
- a. Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a Motor Vehicle without a valid policy of insurance under the Act.
- a. On the sale of the Motor Vehicle or if for any reason the insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).
- a. This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 11D03209 & D CREATORS CI Code: 22A 3DVDOLD2J01YDOAA