

# NATIONAL Assessment Centre Services

Date In: 11/11/2022	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NAVLIP22011317/a4	E-mail (within 8hrs. Aft 2hrs)		
Veh No: SLN 1673K	i-Motor Claim Form		
D.O.A: 1/11/2022 0000	i-Motor W/O (Within: QD 2hrs. TP 4hrs)		
OD: TP Reporting Only	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: SMV 695A	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

NA2203172	<b>Invoice Preparation Checklist</b>	Amnt (\$) 1st Bill	Amnt (\$) 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		
QC Checked by (Engr-In-Charge):	5) FT : Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	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:-		
	OD*		
	*N5: Courtesy Car / Tpt 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: Idac Mobile 30		
Est 1:	Invoice dated	Fee Charged	
Est 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 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	11/11/2022 11:40 (SGT)
Reported by	Driver
Date of Accident	01/11/2022 00:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF THOMSON AND MOULMEIN ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN1673K
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	BOSS CAR LEASING PTE LTD
Company Reg No	2XXXXX709H
Email Address	dreamcarrentals@gmail.com
Mobile Phone No	(Phone) +65-81288789
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Wish
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1794

### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SD22V02829/VPZ/R01

### DRIVER

Name of Driver	ASHWIN SIVAKUMAR S/O KRISHNAN
NRIC No	SXXXX790B
Date Of Birth	17/02/1978
Occupation	Outdoor

Date Of Driving Pass	16/09/2010
Driving experience	12 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93258281
Alt. Phone Number	-
Email Address	dreamcarrentalsg@gmail.com
Address	BLK 134 BUKIT BATOK WEST AVE 6 #04-461
Address complement	-
Postcode	650134
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RENTAL LEASING
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
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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED REPORT

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMV695A
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

### IMPORTANT NOTICE

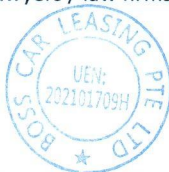
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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

11/11/2022

Witnessed by Reporting Centre Personnel

NO SKETCH AVAILABLE

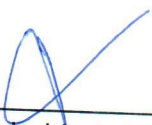
Describe Circumstances of the Accident

Refer to police no

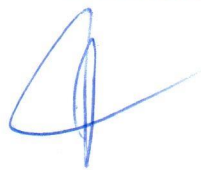
G/2022/110/7098


Declaration

I / 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

 11/11/2022  
Witnessed by Reporting Centre  
Personnel



**POLICE REPORT (NPB99)**

Report No. G/20221110/7098

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No:1800-2440000

Date/Time Report Made 10/11/2022 19:17	Vide Report No.	Station Diary No.
Name Of Informant NEO BEE CHOO	Address 155 KAKI BUKIT AVENUE 1 #02-01 SHUN LI INDUSTRIAL PARK SINGAPORE 416012	
ID Type / ID No. NRIC NO / S1728369C	Contact No. Home/Office: Mobile: 81288789	
Nationality SINGAPORE CITIZEN	Email Address dreamcarrentalsg@gmail.com	
Occupation Management executive	Sex Female	Age 57
Institution/School Name	Date of Birth 15/04/1965	Race Chinese
Date/Time Of Incident 10/11/2022 18:55 - 10/11/2022 19:00	Location Of Incident LORONG 10 GEYLANG	

**Brief details.**

OUR VEHICLE NUMBER : SLN 1673K WAS RENTED TO HIRER NAME: ASHWIN SIVAKUMAR S/O KRISHNAN NRIC NO: S7801790B FROM 1/11/2022 - 10/11/2022

WE RECEIVED LETTER FROM OUR INSURANCE COMPANY (LIBERTY) THAT SLN 1673K WAS INVOLVED IN RTA ON 1/11/2022 ALONG JUNCTION OF THOMSON & MOULMEIN ROAD WITH SMV 695A

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: 10/11/2022 19:17
Officer In-Charge Of Case:	Classification Of Case:



POLICE REPORT (NPB99)

CONTINUATION OF REPORT

Report No. G/20221110/7098

ON 9/11/2022 SPOKEN AND CONFIRM WITH MR. ASHWIN ON THE ACCIDENT WHICH HE ADMITTED AND HE FAILED TO INFORM US REASON BEING THAT HE HAS NO MONEY TO PAY FOR THE REPAIRS. HE AGREES TO COME TO OUR OFFICE TO DO THE ACCIDENT REPORT ON 10/11/2022 BUT HE FAILED TO TURN UP AND REMAIN UNCONTACTABLE.

ON 10/11/2022 @ 1712 HOURS OUR COMPANY STAFF WENT DOWN TO THE CAR LOCATION AT GEYLANG LOR 10 ROADSIDE PARKING LOT TO TAKE BACK OUR BADLY DAMAGED VEHICLE TO OUR WORKSHOP TO REPAIR.

HIRER ALSO FAILED TO PAY THE RENTAL TILL TO DATE

Subjects Involved			
Victim			
Person Name	NEO BEE CHOO		
ID Type	NRIC NO	ID No	S1728369C
Gender	Female	Age	57
Race	Chinese	Language	English
Occupation	Management executive	Address	155 KAKI BUKIT AVENUE 1 #02-01 SHUN LI INDUSTRIAL PARK SINGAPORE 416012
Mobile No	81288789	Is Informant A Victim?	Yes
Person Name	NEO BEE CHOO (Informant)		

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:  
10/11/2022 19:17

Classification Of Case:



**SINGAPORE  
POLICE FORCE**



G/20221110/7098

3 of 3

**POLICE REPORT (NPB99)**

**CONTINUATION OF REPORT**

Report No. G/20221110/7098

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Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:  
10/11/2022 19:17

Classification Of Case:

1673 New Address!

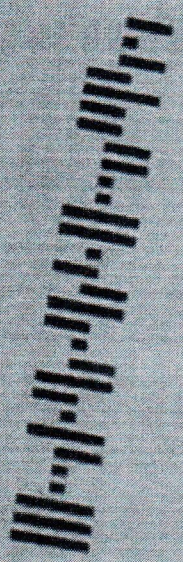
DBS Bank Ltd  
12 Marina Boulevard, Marina Bay Financial Centre Tower 3, Singapore 018982  
[www.dbs.com.sg](http://www.dbs.com.sg)

018982

ASHWIN SIVAKUMAR S/O KRISHNAN  
BLK 134 BUKIT BATOK WEST AVENUE 6  
#04-461  
SINGAPORE 650134

030801A295-447

Statement of Unposted Transactions  
Details of Your Post



Date of Accident : 1/11/2022 Accident Time : \_\_\_\_\_ (24 -HR-Format)

Accident Place (A) : Junction of Thomson and Moulmein Rd.

Vehicle Reg. No.(Car Plate No.): SLN 1673K

Vehicle Make/Model : Toronto wish

Insurance Company : Liberty Policy No SD22402829/Y22/R01

Owner or Company Name/IC No : Boss Car Leasing Pte Ltd

Owner or company Contract No: \_\_\_\_\_ Owner's Hp 81288789 Company Tel \_\_\_\_\_

DRIVER'S Name / IC No : Ashwin Sivakumars IC No: 59801790B

DRIVER'S Date Of Birth : 17/02/1978 DRIVER'S Licence Pass Date: 16 Sep 2019

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Other Hirer

DRIVER'S Address : Blk 134 Bukit Barok West Ave 6

DRIVER'S Contract No /Alt No :1) \_\_\_\_\_ 2) 93258281

DRIVER'S Occupation : INDOOR \ OUTDOOR \ (e.g. Working inside or outside office)

Email Address : dreamcarrental.sg@gmail.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) ( | ) Anybody injured in the accident: Yes / NO

Passenger Name : \_\_\_\_\_ (Male / Female)

Was there any video captured by car camera : YES \ NO

Exact purpose for what vehicle was being used at the time of accident : Private use \ Work Purpose . Rental Leasing.

(B) Other Party Driver's Particulars ( If any ) (C)

Vehicle Reg No: SMV 695A Vehicle Reg No: \_\_\_\_\_

Vehicle Make \ Model: \_\_\_\_\_ Vehicle Make \ Model : \_\_\_\_\_


Driver Name : \_\_\_\_\_ Driver Name: \_\_\_\_\_

Driver IC No : \_\_\_\_\_ Driver IC No: \_\_\_\_\_

Driver's Contract & Add: \_\_\_\_\_ Driver's Contract & Add: \_\_\_\_\_

## 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

<b>Certificate No</b>	<b>SD22V02829 /VPZ /R01</b>										
<b>Form</b>	MZ406D										
<b>Date Of Issue</b>	21-FEB-2022										
<b>1.Index Mark and Registration No. of Vehicle:</b>	SLN1673K										
<b>2.Chassis number of Vehicle:</b>	JTDER12W903002539										
<b>3.Name of Policyholder:</b>	BOSS CAR LEASING PTE LTD										
<b>4.Effective date of Commencement of Insurance for the purpose of the Act:</b>	24-FEB-2022 00:00 AM										
<b>5.Date of Expiry of Insurance:</b>	23-FEB-2023 23:59 PM										
<b>6.Persons or Classes of Persons entitled to drive*:</b> <p>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 t</p>											
<b>7.Limitations as to use*:</b> A) Use for carriage of passengers or goods in connection with the Policyholder's business. B) Use for social, domestic, pleasure and business purposes of any person to whom the vehicle is hired. C) Use for the carriage of passengers for hire or reward under Private Hire Vehicle (PHV) by the person to whom the vehicle is hired.											
<b>8.Policy does not cover:</b> A) Use for racing, pace-making, reliability trial or speed-testing. B) Use whilst drawing a trailer except the towing (other than for reward) 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 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 <b>LIBERTY INSURANCE PTE LTD</b> Approved Insurers  _____ Authorised Signature											
<b>For Information only:</b> <table style="width: 100%;"> <tr> <td style="width: 30%;"><b>COVERAGE :</b></td> <td>Third Party Fire &amp; Theft, PHV Extension (Geographical Area: Singapore only)</td> </tr> <tr> <td><b>SUM INSURED:</b></td> <td>MARKET VALUE AT THE TIME OF LOSS</td> </tr> <tr> <td><b>EXCESS:</b></td> <td>All Claims S\$2000, Additional Excess - All Claims - Young, Elderly &amp; Inexperienced Drivers S\$2000</td> </tr> <tr> <td><b>FINANCE COMPANY:</b></td> <td>TAI THONG LEE TRADING PTE LTD</td> </tr> <tr> <td><b>PRODUCER NAME:</b></td> <td>NEWSTATE STENHOUSE (S) PTE LTD</td> </tr> </table>		<b>COVERAGE :</b>	Third Party Fire & Theft, PHV Extension (Geographical Area: Singapore only)	<b>SUM INSURED:</b>	MARKET VALUE AT THE TIME OF LOSS	<b>EXCESS:</b>	All Claims S\$2000, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers S\$2000	<b>FINANCE COMPANY:</b>	TAI THONG LEE TRADING PTE LTD	<b>PRODUCER NAME:</b>	NEWSTATE STENHOUSE (S) PTE LTD
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<b>FINANCE COMPANY:</b>	TAI THONG LEE TRADING PTE LTD										
<b>PRODUCER NAME:</b>	NEWSTATE STENHOUSE (S) PTE LTD										

PLVC/-/21-FEB-22

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21-FEB-22