

NATIONAL Assessment Centre Services

Date In 19/12/2022	Job description	Date & Time Completed	Done by
Ref NO NA/CT/22012667/W	SAS e-filing		
Veh NO SLE 6124	E-mail (within 8hrs. APT 2hrs)		
DOA 17/12/2022	i-Motor Claim Form		
OD / TP / Reporting Only	i-Motor W/O (Within: OD 2hrs. TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Veh No: **SGQ 1311 Z** 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:	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:	Invoice Preparation Checklist	Amt (\$)	
		1st Bill	Add Bill
NA2203518	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TP: 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) NI: 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 \$0		
	Invoice date: / /	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 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	19/12/2022 18:37 (SGT)
Reported by	Driver
Date of Accident	17/12/2022 10:55 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	KPE entrance from Punggol direction (Tunnel)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE6124T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Luar Hui Woon (Lain Huiwen)
NRIC No	SXXXX241E
Email Address	siangyunid@gmail.com
Mobile Phone No	(Phone) +65-97460393
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Forester
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	1995

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00248162203

DRIVER

Name of Driver	Wong Tuck Hon
NRIC No	SXXXX573Z
Date Of Birth	05/02/1980
Occupation	Indoor

Date Of Driving Pass	31/10/2008
Driving experience	14 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81988203
Alt. Phone Number	-
Email Address	siangyunid@gmail.com
Address	Blk 497F Tampines Street 45
Address complement	#09-134
Postcode	524497
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	4
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	-

PASSENGER 1

Name	Luar Hui Woon (Lai Huiwen)
Gender	Female

PASSENGER 2

Name	Wong Shiya
Gender	Female

PASSENGER 3

Name	Wong Junkai
Gender	Male

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

Refer to Police Report No. T/20221217/7021.

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 Yes, With driver

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SGQ1311Z
 Vehicle Manufacturer Lexus
 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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLS7287B
 Vehicle Manufacturer Kia
 Vehicle Model Cerato
 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) -

PASSENGER 1

Name Passenger
 Gender Female

ACCIDENT STATEMENT

ACCIDENT DATE: (17 / 12 / 2022) (DD/MM/YYYY), TIME: (10 : 55) (HH:MM)

LOCATION: KPE entrance from Punggol direction (Tunnel)

1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SLE 6124 T

b) INSURANCE COMPANY: CTI

c) POLICY NUMBER: DMPCSNWO0248162203

d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)

e) MAKE & MODEL: Subaru - Forester Auto / MANUAL

f) TYPE: (SEDAN / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)

g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)

h) PURPOSE OF USING AT ACCIDENT TIME Private

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: Luar Hui Woon (Lai Huiwen) (MALE / FEMALE)

b) NRIC/FIN/PASSPORT: S8204241E CONTACT: 9746 0393

c) ADDRESS: Blk 497F Tampines St 45, 09-134, 524497

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

a) NAME: Wong Tuck Hon (MALE / FEMALE)

b) NRIC/FIN/PASSPORT: S80035732 CONTACT: 8148 8203

c) ADDRESS: Blk 497F Tampines St 45, 09-134, 524497

* d) DATE OF BIRTH: (05 / 02 / 1980) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE 31 / 10 / 2008

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Spouse

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: Traffic Police

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: SGQ 1311 2 MODEL: _____

b) DRIVER'S NAME: _____

c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: SIS 7287 B MODEL: _____

e) DRIVER'S NAME: _____

f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

no. of passenger
(including driver)
(4) F,M,F

no. of passenger
(including driver)
()

no. of passenger
(including driver)
(2) F

Email = Siangyanid@gmail.com

Fax = -

VIDEO = Yes, with 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 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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

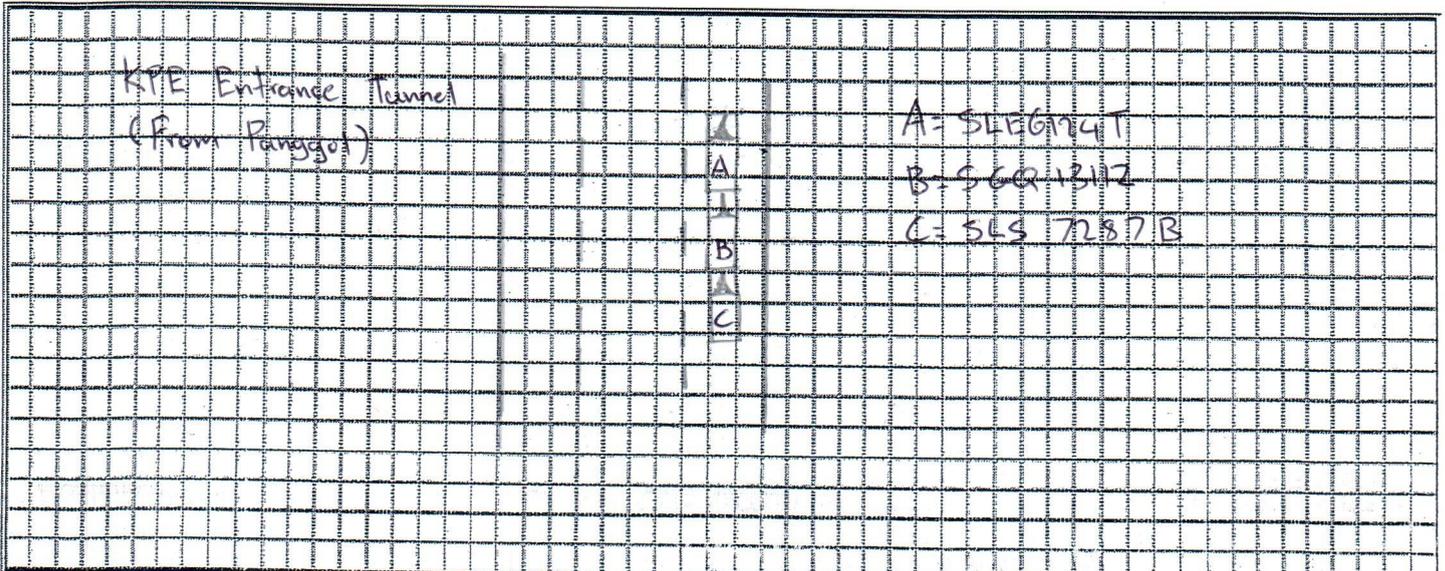
[Signature]

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

[Signature] 19/12/2022

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



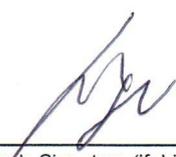
Describe Circumstance of the Accident

Refer to Police Report No. T/2022/217/7021.

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time



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

 19/12/2022

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)



**SINGAPORE
POLICE FORCE**



T/20221217/7021

1 of 4

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

Report No. T/20221217/7021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/12/2022 13:38	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: WONG TUCK HON		Address: 497F TAMPINES STREET 45 #09-134 SINGAPORE 524497	
ID Type / ID No.: NRIC NO / S8003573Z		Contact No.: Home/Office:	Mobile: 81988203
Nationality: SINGAPORE CITIZEN		Email: siangyunid@gmail.com	
Sex: Male	Age: 42	Date of Birth: 05/02/1980	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation:		Driving Licence Information: Class: 3	Date of Expiry: 31/10/2043

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 17/12/2022 10:55	Type of Location: Straight Road
Location: KPE entrance from punggol direction. tunnel				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SGQ1311Z	Car	LEXUS		Black	Slightly Damaged	0
SLE6124T	Car	SUBARU	forester	White	Slightly Damaged	3



**SINGAPORE
POLICE FORCE**



T/20221217/7021

2 of 4

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

Report No. T/20221217/7021

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLS7287B	Car		KIA CERATO	Red	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLE6124T	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW002481 62203	23/11/2022	22/11/2023

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	WONG TUCK HON		ID No.	S8003573Z	
Related Vehicle	SLE6124T (Car)		Contact No.	81988203	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: 31/10/2043	
Date	NIL		Date	NIL	
No. of Days granted Medical Leave	NIL		Degree of	NIL	
Passenger					
Name	LUAR HUI WOON		ID No.	S8204241E	
Related Vehicle	SLE6124T (Car)		Contact No.	81988203	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL		Date	NIL	
No. of Days granted Medical Leave	NIL		Degree of	NIL	



**SINGAPORE
POLICE FORCE**



T/20221217/7021

3 of 4

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

Report No. T/20221217/7021

CONTINUATION OF REPORT

Passenger				
Name	WONG JUNKAI		ID No.	T1415680H
Related Vehicle	SLE6124T (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
Passenger				
Name	WONG SHIYA		ID No.	T1833277E
Related Vehicle	SLE6124T (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
Passenger				
Name	Unknown Passenger		ID No.	NIL
Related Vehicle	SLS7287B (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL

Brief Details.

happened at kpe tunnel entrance (from punggol direction). All the cars in front suddenly braked. i braked in time to avoid collision with the front car. the black Lexus car behind me, also braked in time. but the 3rd car red KIA banged into the Lexus car and pushed the Lexus car and banged into mine. My bumper and sensors all spoilt.



**SINGAPORE
POLICE FORCE**



T/20221217/7021

4 of 4

Report No. T/20221217/7021

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

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 /
IRMAN BIN MOHAMAD SAID
Contact No.: 65476145

This report is lodged at Bukit Batok NPP Kiosk 1
NP168

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

Date/Time:
17/12/2022 13:38

Classification Of Case:

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)

MX1F
 R SN
 AN0478A
 Cov. Type:C

CERTIFICATE No.	DMPCS NW00248162203	Engine No.: FB20YE46090 Cha. No.: JF1SJ5KC5JG112367
1. Index Mark and Registration Number of Vehicle	SLE6124T	AUTOSAFE =====
2. Name of Policy Holder	LUAR HUI WOON (LAI HUIWEN)	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	23/11/2022 (00:00:00)	Named Drivers Ex Sect. I S\$1,500.00 Additional Ex Other than Named Drivers:
4. Date of Expiry of Insurance	22/11/2023	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.	

Agent Assistance (IH)
Hotline: 6287 7077

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. : DBS BANK LTD AS HP OWNER
** 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

 Issued By: _____
 INSURE HUB PTE LTD
 Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.


 Authorised Signatory