

NATIONAL Assessment Centre Services (Ref: 1-23-0000)

Date In: 03/01/2023 14:25 Job description: SAS e-filing Date & Time Completed: 03/01/2023 Done by: [Signature]

Ref No: XIBA 123000024/4 E-mail (within 3hrs, AIC 2hrs)

Vol No: STAM 2135C i-Motor Claim Form

D.O.A: 03/01/2023 06:45 i-Motor W/O (within: OD 2hrs, YF 1hr)

Reporting Only i-Photo Uploaded

Assessment/Survey Report

Ass't Report by Fax / Hand to Owner/Whse

TP Insurer:

Preferred Wksp / INC Assign Wksp / QW: ()

TP Particulars: Ych No: 8km 2032X 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 repeller.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks: () INC Hotline: 0788 6010

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()

Date Time Actions

Invoice Preparation Checklist:

- 1) AR: Accident Reporting (330)
- 2) DA: Damage Assessment (\$100) INC (\$50)
- 3) TP: Towing Fee \$100
- 4) FT: Follow-Through Survey \$30
- 5) FT: Follow-Through Survey (Resurvey) \$30
- 6) TR: Repairer's Fee \$30
- 7) NI: NIHAU DA, SMART Survey \$140
- 8) NTUC Additional Fee: ()
- 9) NI: NIHAU DA, SMART Survey \$140
- 10) NI: NIHAU DA, SMART Survey \$140
- 11) NI: NIHAU DA, SMART Survey \$140
- 12) NI: NIHAU DA, SMART Survey \$140
- 13) NI: NIHAU DA, SMART Survey \$140
- 14) NI: NIHAU DA, SMART Survey \$140
- 15) NI: NIHAU DA, SMART Survey \$140
- 16) NI: NIHAU DA, SMART Survey \$140
- 17) NI: NIHAU DA, SMART Survey \$140
- 18) NI: NIHAU DA, SMART Survey \$140
- 19) NI: NIHAU DA, SMART Survey \$140
- 20) NI: NIHAU DA, SMART Survey \$140

Important Particulars:

Owner/Owner:

Contact No:

Damaged Portion:

Checked by (Engr-In-Charge):

For Comments:

Signature:

Date:

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	03/01/2023 14:25 (SGT)
Reported by	Driver
Date of Accident	03/01/2023 06:45 (SGT)
Exact Location of Accident	Mountbatten Rd, Singapore
Additional Location Information	JUNCTION WITH HAIG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM3135C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHENG WEE HAN
NRIC No	SXXXX037D
Email Address	kimmiesg@yahoo.com
Mobile Phone No	(Phone) +65-90908711
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	218i
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1499

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMPPHQ22-001387

DRIVER

Name of Driver	ONG HSE-YIN
NRIC No	SXXXX229D
Date Of Birth	01/01/1977
Occupation	Indoor

Date Of Driving Pass	17/04/2001
Driving experience	21 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91903051
Alt. Phone Number	-
Email Address	kimmiessg@yahoo.com
Address	15A SERAYA ROAD
Address complement	-
Postcode	437253
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	Collision - Cross Junction
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)	2
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	KATE CHENG
Gender	Female

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

PLEASE REFER TO SKETCH PLAN

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 OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKM2032X
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

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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

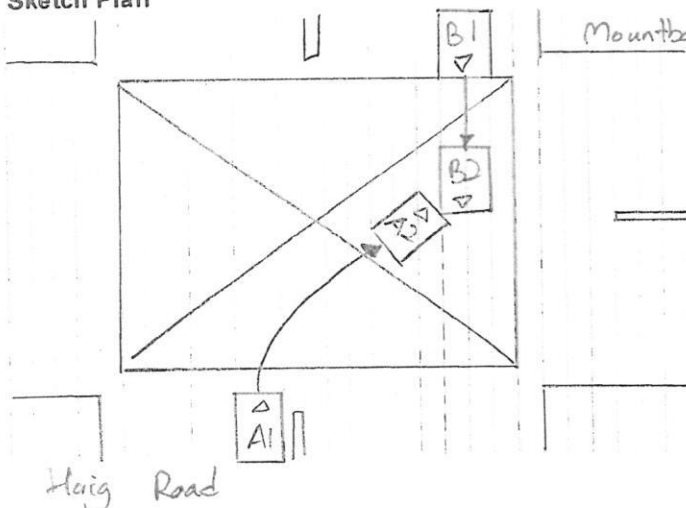
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A = SMM 3135C

B = SKM 2032X

Describe Circumstances of the Accident

On 03.01.2023 at about 06:45hrs. I was travelling along junction of Haig Road toward Mountbatlen Road. I followed traffic light (green) turn right. Suddenly I saw a car come out from front road than I brake in time. The vehicle (SKM 2032X) collision onto front portion of my vehicle (SUM 3135C). I had video on my in-car camera.

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

Witnessed by Reporting Centre Personnel

Date of Accident : 03.01.2023 Accident Time : 06:45hrs (24-HR-Format)

Who reported the accident? : Owner / Driver / Both

Accident Place : main junction of mountbatlen road & Haig Road

Vehicle No (Car Plate No) : SMM3135C Make/Model: B.M.W. 218I Coupe

Insurance Company : EQ Policy No: DMPPH Q22-001387

Fleet Policy : YES / NO

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

Name of Owner / IC No : Cheng Wee Han (S7678037D)

Owner Contact No : 9090 8711 Owner's Hp - Company Tel -

Driver Name / IC No : Ang Hse -Yin (S7700229D)

Driver's Date of Birth : 01.01.1977 Driver's License Pass Date: 17 Apr 2001

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

Driver's Address : 15A Seraya Road S 437253

Driver's Contact No : 1) 9190 3151 2) -

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

Email Address : kimmie ss g @ yahoo.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) : 2 person (1 Driver, 1 Passenger)

Was ther any vidco footage ? : YES / NO

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

Any injury (If Yes, Pls State) : No

Other Party Driver's Particular (if any)

VEH B : <u>SKM 2032X</u>	Name & Contact No: _____
VEH C : _____	Name & Contact No: _____
VEH D : _____	Name & Contact No: _____
VEH E : _____	Name & Contact No: _____

***NEW - Passenger's Name & Gender:**

F: Kate Cheng



EQ Insurance Company Limited

5 Maxwell Road #11-00 Tower Block MND Complex, Singapore 069110
tel 65 6223 3433 | fax 65 6224 2903 | www.eqinsurance.com.sg
reg no. 1976-00489-N

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1969 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF**PRIVATE CAR****Comprehensive Premier****Certificate No. : DMPPHQ22-001387****1. Index Mark and Registration Number of Vehicles**

SMM3135C

2. Name of Policyholder

CHENG WEE HAN

3. Effective Date of the Commencement of Insurance for the purpose of the Act

09/02/2022

4. Date of Expiry of Insurance

08/02/2023

5. Person 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.

Premier Plan - Any Workshop

Form: MK2

Excess:

Insured/Named Driver S\$500.00(Section 1 - Own Damage)

Unnamed Driver S\$1,000.00(Section 1 - Own Damage)

YE/DR Additional S\$3,000.00

WindScreen S\$100.00

EQ Motor Accident
Hotline**6311 3211**

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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 has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) use for any purpose in connection with the Motor Trade

*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) or and Amendment, Act or Acts passed in substitution thereof.

Fire Purchase : OCBC Bank Limited

A000277/Esleem Performance Pte Ltd

Date of Issue : 09/02/2022 14:28

Authorised Signatory
EQ Insurance Company Limited**Note**

Young, Elderly &/or Inexperience Driver (YE/IDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.