

NATIONAL Assessment Centre Services (Print & Sign) **SA09251A0087**

Date In: 10/01/2023 10:18	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NRB EG12300220	E-mail (within 3hrs, A/C 2hrs)		
Veh No: TRB 7376X	I-Motor Claim Form		
D.O.A: 09/01/2023 09:15	I-Motor W/O (within: OD 2hrs, TP 3hrs)		
TP / Repairing Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

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

TP Particulars: Veh No: M 80576 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 repair.

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

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

Remarks: () INC Hotline: 6788 6016

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo (Repair Cost > \$3000) ()		

Injury: ()

Date/Time: () Action: ()

Invoice Preparation Checklist

1) AR: Accident Reporting (\$30)	
2) DA: Damage Assessment (\$100)	INC (\$55)
3) TP: Towing Fee	\$10/\$45
4) PT: Follow-Through Survey	\$150
5) FT: Follow-Through Survey (Resurvey)	\$30
Excluding system INC Only (Nov 10, 2023)	
6) TR: Re-Survey	\$75
7) NI: New DA + SMART Survey	\$140
8) NIUC Additional Services:	
DI:	
*NI: Courtesy Car / Tot Allowance	\$5
*NI: Repair Coordination	\$10
*NI: Post Repair Inspection	\$25
*NI: DV / Collect Excess Coordination	\$5
*NI: (NI) TP (Non-INC) / Collect INC	\$10
9) NI: Mile Mobile	10
Invoice Total	Fee Charged
Invoice Date	Invoice No

Checked by (Engr-In-Charge):

Comments:

12/3:

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	10/01/2023 10:18 (SGT)
Reported by	Driver
Date of Accident	09/01/2023 09:15 (SGT)
Exact Location of Accident	Choa Chu Kang Way, Singapore
Additional Location Information	TOWARDS BUKIT BATOK ROAD , KJE JUNCTION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	TRB7376X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HG LOGISTICS PTE LTD
Company Reg No	2XXXX130H
Email Address	gary@hglogistics.com.sg
Mobile Phone No	(Phone) +65-81818612
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hock Nam Seng
Model	40'SKL TR
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	0

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMFG22006324

DRIVER

Name of Driver	WANG JIANGUO
Passport No/FIN	GXXXX273N
Date Of Birth	05/10/1980
Occupation	Outdoor

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 XE5102X
 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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person WANG JIANGUO
 Gender Male
 Phone No (Phone) +65-88681399
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained SLIGHT INJURY
 Injured person in which vehicle? TRB7376X
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

Date Of Driving Pass	16/01/2014
Driving experience	9 YEARS
Gender	Male
Mobile Number	(Phone) +65-88681399
Alt. Phone Number	-
Email Address	gary@hglogistics.com.sg
Address	100 PASIR PANJANG ROAD #05-03
Address complement	-
Postcode	118518
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	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?	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?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YM8057U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-

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

(CCK Wan Tndu Bkt Bktk rd, KJE Jmct.	<div style="border: 1px solid black; padding: 5px; text-align: center;">A B</div>	(A) TRB 7376X (XF 5102X) (B) Ym 8057u
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Describe Circumstances of the Accident

On 09-01-2023 at about 0915hrs, I was travelling along Choa Chu Kang way towards Bukit Batok Rd, KJE Junction. I was on stationary waiting at the junction to turn right. All of a sudden I felt an impact from the rear. Then I realised a vehicle Ym 8057U had collided onto my rear. That's all.

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

10/01/2023

Date of Accident : 09/01/23 Accident Time: 0915hrs (24-HR-Format)
Accident Place : Choa Chu Kang way Towards BKT Batok Rd, KJE Junction TR
Vehicle No. (Car Plate No.) : TRB7376X Make/Model: Hock Nam Seng 40' skl TR
Insurance Company : ERGO Policy No: DMFG22006324
Owner or Company Name / IC No. : HGL Logistics Pte Ltd (200309130H)
Owner or Company Contact No. : 81818612 Owner's Hp 62208313 Company Tel
DRIVER'S Name / IC No. : Wang Jianbo (85474273N)
DRIVER'S Date Of Birth : 05.10.1980 DRIVER'S License Pass Date 16.01.2014
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Employee
DRIVER'S Address : 100 Pasir Panjane Rd #05-03 S (118518)
DRIVER'S Contact No./ Alt No. : 1) _____ 2) 88681399
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : gary@HGLLOGISTICS.COM.SG
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): Driver only
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
Any Injury (If YES, Pls state): Yes

Other Party Driver's Particular (if any) XE5107X ✓

Vehicle No: <u>YM8057U</u>	Vehicle No: <u>TRB7376X</u>
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:

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)
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

Certificate/Policy Number : DMFG22006324
Vehicle Registration Number : TRB7376X
Cover Type : Third Party Only
Policy Type : Motor Fleet
Name of Policyholder/Insured : HG LOGISTICS PTE LTD
Commencement Date of Insurance : 10/05/2022
Expiry Date of Insurance : 09/05/2023
Excess :
Finance Company/Hire Purchase Owner :

FLASH
Fast-Response Accident Reporting Hotline™

24-Hour Helpline: 6100 1620

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

1. The Policyholder
2. Any Person who is driving on the Policyholder's order or 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. 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 the time of the accident loss or damage.

*** Limitations as to Use:**

Use in connection with the Policyholder's business whilst the above trailer is being detached or attached to any Motor Vehicle belonging to the Policyholder.

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 (*).

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), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of **ERGO Insurance Pte. Ltd.**
Approved Insurer

Karl-Heinz Jung

Authorized Signature

A000574	TRA	
Vehicle Chassis Number : HNS804605, Vehicle Engine Number :		TRA, 06/05/2022 11:10:18

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

130H

Vehicle Details

Vehicle No.:

TRB7376X

Vehicle to be Exported:

No

Intended Deregistration Date:

11 Feb 2023

Vehicle Make:

HOCK NAM SENG

Vehicle Model:

40' SKL TR

Primary Colour:

Yellow

Manufacturing Year:

2005

Engine No.:

-

Chassis No.:

HNS804605

Maximum Power Output:

-

Open Market Value:

\$12,000.00

Original Registration Date:

25 Aug 2005

First Registration Date:

25 Aug 2005

Transfer Count:

0

Actual ARF Paid:

\$0.00

Intended PARF Rebate Details

PARF Eligibility:

No

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Rebate Amount:

\$0.00

Total Rebate Amount:

\$0.00

The information contained herein is correct as at 10 Jan 2023

OK