

NATIONAL Assessment Centre Services (part 1 of 2) **Sub 232100005**

Date In: 13/07/2023 18:37	Job Description	Date & Time Completed	Done by
Ref No: N/A 0712300/5.7.21	SAS e-Milling		
Veh No: SKA 15100	E-mail (withn 2hrs, A/C 2hrs)		
D.O.A: 11/07/2023 18:3	1-Motor Claim Form		
QC: TP Reporting Only	1-Motor W/O (withn 2hrs, A/C 2hrs)		
TP Insured:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

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

TP Particulars: Yeh No: SKA 15100 INC () / Non-INC ()

Owner / Driver: () Tel: ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % (Note: Ltd Status (W/O): N: 0-30%, 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 info of repeller.

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

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

Remarks: ()

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

2) QC Check / Post Repair Inspection ()

3) Upload Recovery Photo (Repair Cost > \$3000) ()

Injury: ()

Date/TIME: ()

Location: ()

Witness: ()

Police: ()

Insurance: ()

Other: ()

NA2300452

Invoice Preparation Charge	
1) All Accident Processing (\$30)	
2) DA: Damage Assessment (\$100) INC (\$50)	
3) TP: Towing Fee \$10/\$10	
4) PF: Follow-Through Survey \$175	
5) PF: Follow-Through Survey (Emergency) \$30	
6) TR: Deductible \$25	
7) NI: New DA + Short Survey \$145	
8) NTUC Additional Services	
9) NI: New DA + Short Survey \$145	
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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	13/02/2023 18:37 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	11/02/2023 13:30 (SGT)
Exact Location of Accident	356 Clementi Ave 2, Block 356, Singapore 120356
Additional Location Information	EXIT CARPARK PREMISES
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNF9110J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN PENG GUAN ERIC
NRIC No	SXXXX163H
Email Address	erictan2177@gmail.com
Mobile Phone No	(Phone) +65-90287067
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Noah
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	Private hire
Transmission	Auto
CC	1797

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNW00012802200

DRIVER

Name of Driver	TAN PENG GUAN ERIC
NRIC No	SXXXX163H
Date Of Birth	09/05/1967
Occupation	Outdoor

Date Of Driving Pass	01/12/1988
Driving experience	34 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90287067
Alt. Phone Number	-
Email Address	erictan2177@gmail.com
Address	BLK 850 JURONG WEST STREET 81 #11-277
Address complement	-
Postcode	640850
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 - 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?	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	SKA1510C
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

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Tan Peng Guan

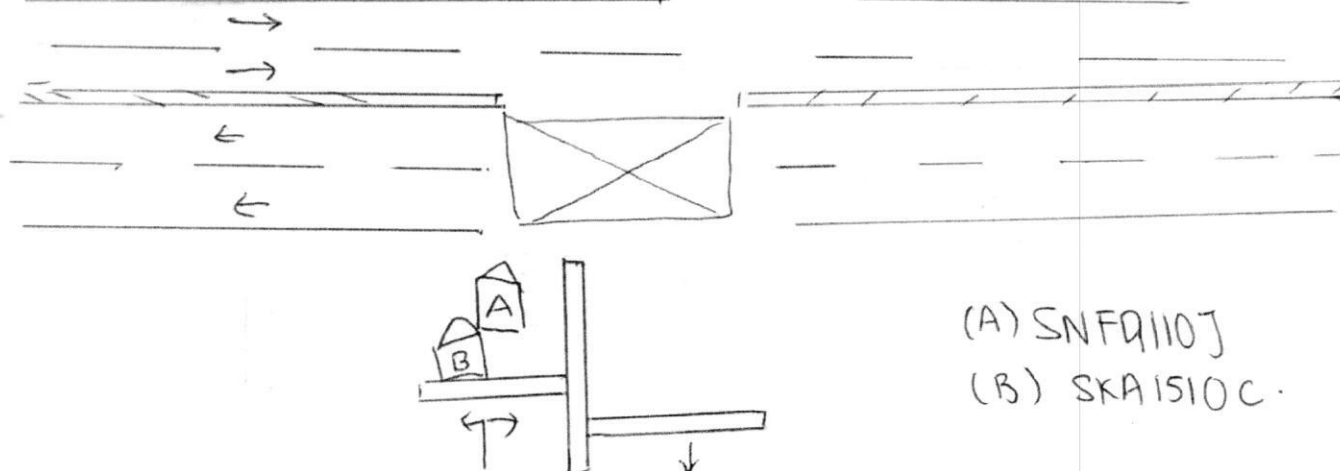
Policyholder's Signature / Date & Time

Tan Peng Guan

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

13/02/2023
Witnessed by Reporting Centre Personnel

Sketch Plan *CAMPARK ext 01 B/K 356-367*



Describe Circumstances of the Accident

On 11/02/2023 at about 1330hrs at exit of Carpark premises of BIK 356-367 Clementi Ave 2. I was stationary waiting for clearance of main traffic to turn right and suddenly, I heard a loud bang from the rear and when I alight, I realised it was Vehicle(B) who hit onto the rear portion of my vehicle(A) causing damages to my vehicle.

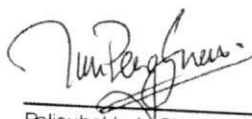
(A) SNF9110J

(B) SKA1510C

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

Declaration

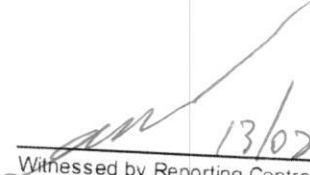
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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


Witnessed by Reporting Centre Personnel

13/02/2023

UB1

SINGAPORE ACCIDENT STATEMENT

Accident Date:	11/02/2023	Time:	1330hrs	(hh:mm) 24 hr format
Location	Exit of Carpark premises of Blk 356-367 Clementi Avenue 2.			
Vehicle Number	SNF 9110J			
Insured Name	Tan peng guan ERIC			
NRIC/FIN	S1786163H	Contact Number	9028 7067	
Make	Toyota	Model	NOAH HYBRID	
Are you claiming under your own insurance policy for repair to your vehicle?				
() Yes If No, Pls select: (/) Third Party () Reporting				
Insurance Company	CHINA TAIPING			
Type of Policy (/) Comprehensive () Third Party Fire & Theft () TP Only				
Policy Number	DMHCSNW 00012802200			
Name of Driver	(/) Same as Insured			
NRIC/FIN	S1786163H	Contact Number	9028 7067	
Date of Birth	09/05/1967			
Driving Pass Date	01/12/1988			
Occupation () Indoor (/) Outdoor				
Gender (/) Male () Female				
Email Address	eric.tan.2177@gmail.com.		() NO EMAIL	
Address of Driver	Blk 850 Jurong West Street 81 #11-277 S(640850)			
Was driver an employee of the Insured's Company? () Yes (/) No				
If No, Relationship of the Driver with the Insured				
(/) Owner () Spouse () Friend () Relative () Children () Sibling				
Does the Driver Own Any Other Vehicle? () Yes (/) No				
If Yes, Vehicle Registration Number of Driver's Own Vehicle				
Insurance Company of Driver's Own Vehicle				
Weather Conditions (/) Clear () Raining () Others				
Road Surface (/) Dry () Wet () Others				
Was any foreign vehicle involved in this accident? () Yes (/) No				
Was anybody injured in the accident? () Yes (/) No				
If yes, injured detail				
Was there any video captured by Car Camera? () Yes (/) No				
Was the Accident reported to the Police? () Yes (/) No If yes attach police report				
DETAILS OF 3 rd party	Name / Nric	Contact		
Veh B	SKA 1510C			
Veh C				
Veh D				
Veh E				
Veh F				

1 person including driver



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

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)

MZ456LB

N SN

AN0686A

Cov. Type C

CERTIFICATE No.

DMHCSNW00012802200

Engine No. 2ZR2L33963

Cha. No. ZWR800484886

1. Index Mark and Registration
Number of Vehicle

SNF9110J

AUTOSAFE

2. Name of Policy Holder

TAN PENG GUAN ERIC

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

23/07/2022
(00 00 00)

4. Date of Expiry of Insurance

22/07/2023

Excess Sect. I.	\$S1,250.00
Excess Sect. I (Outside Singapore)	\$S2,500.00
Excess Sect. II	\$S1,250.00
Excess Sect. II (Outside Singapore)	\$S2,500.00
EX ON WINDSCREEN	\$S100.00

5. Persons or Classes of Persons entitled to drive*

As per Named Driver(s) stated below.

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.

TAN PENG GUAN ERIC

6. Limitations as to use*

- (1) Use for the carriage of passengers or goods in connection with the Policyholder's business.
- (2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO. : GOLDBELL FINANCIAL SERVICES PTE. LTD.

* 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: THIS MARKETING INSURANCE AGENCY
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com