

# NATIONAL Assessment Centre Services

Date In 22/02/2023	Job description	Date & Time Completed	Done by
Ref No CA/MS423001976/d4	SAS e-filing		
Veh No SLE 8935G	E-mail (within 8hrs. Aft 2hrs)		
DOA 21/02/2023 18:30	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: JVS 1999	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

Invoice Preparation Checklist		Amt (\$)	Amt (\$)
		1st Bill	Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		
	2) DA : Damage Assessment (\$100); INC (\$80)		
	3) TF : Towing Fee \$40/\$45		
	4) FT : Follow-Through Survey \$120		
	5) RT : Follow-Through Survey (Resurvey) \$30		
	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*		
Driver/Owner:	*N5: Courtesy Car / Tpt Allowance	\$5	
	*N6: Repair Co-ordination	\$10	
	*N7: Post Repair Inspection	\$25	
	*N8: DV / Collect Excess Coordination	\$5	
Contact No:	TP (N11) : TP (Non INC) against INC	\$20	
	9) N12: Idac Mobile	30	
Damaged Portion:	Invoice dated	Fee Charged	
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
Auditors' Comments :-			
Call 1:			
Call 2/3:			



## 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	22/02/2023 16:43 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	21/02/2023 18:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	WOODLANDS ( KJE ) TOWARDS BKE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE8935G
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MOHD SAZALI BIN TARSIM
NRIC No	SXXXX313A
Email Address	anjang5756@gmail.com
Mobile Phone No	(Phone) +65-93894787
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1496

#### INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	A 300625417 QMX

#### DRIVER

Name of Driver	MOHD SAZALI BIN TARSIM
NRIC No	SXXXX313A
Date Of Birth	13/08/1957
Occupation	Outdoor

Date Of Driving Pass .....	05/09/1997
Driving experience .....	25 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-93894787
Alt. Phone Number .....	-
Email Address .....	anjang5756@gmail.com
Address .....	APT BLK 624B WOODLANDS DRIVE 52
Address complement .....	# 11-25
Postcode .....	732624
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 .....	Chain Collision
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	Yes
Number of vehicles involved in the accident .....	3
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 .....	-

#### FOREIGN VEHICLE 1

Vehicle Registration Number .....	JVJ1999
Vehicle Category .....	Private car

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Woodlands West Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18003639999
Alt. Police Station Phone No .....	(Fax) +65-63640997
Police Station Address .....	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT-T/20230221/2110

#### 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	JVJ1999
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHAN KOK WAI
Contact Number	(Phone) +65-88969957
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	SLB8105B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KALAI RAJ RASANDRAN
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	MOHD SAZALI BIN TARSIM
Gender	Male
Phone No	(Phone) +65-93894787
Address	APT BLK 624B WOODLANDS DRIVE 52
Address Complement	# 11-25
Post Code	732624
Approximate Age Years Old	-
Injuries Sustained	NECK PAIN
Injured person in which vehicle?	SLE8935G
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No



## 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

Witnessed by Reporting Centre Personnel

### Sketch Plan

A	KJE (BKE) - towards Woodlands	A: SLE 8935G
A		B: JVI 1999
B		C: SLB 8105B
C		



### Describe Circumstances of the Accident

Please refer the police report = T/20230221/2110.

## 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





# SINGAPORE POLICE FORCE



T/20230221/2110

Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

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Report No. T/20230221/2110

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/02/2023 20:54		Vide Report No.:		Station Diary No.: 67	
<b>Informant's Particulars</b>					
Name of Informant: MOHD SAZALI BIN TARSIM			Address: APT BLK 624B WOODLANDS DRIVE 52 #11-25 SINGAPORE 732624		
ID Type / ID No.: NRIC NO / S1243313A			Contact No.: Home/Office: Mobile: 93894787		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 65	Date of Birth: 13/08/1957	Type of Informant: Driver		
Race: Javanese			Language:		Institution / School Name:
Occupation: PUB STAFF			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 21/02/2023 18:30	Type of Location: Straight Road
Location:  KRANJI EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JVJ1999	Car				Slightly Damaged	0
SLB8105B	Car				Slightly Damaged	0
SLE8935G	Car	HONDA	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR	White	Slightly Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20230221/2110

Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

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Report No. T/20230221/2110

**CONTINUATION OF REPORT**

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLE8935G	MSIG INSURANCE (SINGAPORE) PTE. LTD.	300625417	04/08/2022	03/08/2023

**Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

**Driver**

Name	CHAN KOK WAI	ID No.	791129086081
Related Vehicle	JVJ1999 (Car)	Contact No.	88969957
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Driver**

Name	KALAI RAJ RASANDRAN	ID No.	S8387423B
Related Vehicle	SLB8105B (Car)	Contact No.	98754479
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Driver**

Name	MOHD SAZALI BIN TARSIM	ID No.	S1243313A
Related Vehicle	SLE8935G (Car)	Contact No.	93894787
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL





**SINGAPORE  
POLICE FORCE**



T/20230221/2110

Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

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Report No. T/20230221/2110

**CONTINUATION OF REPORT**

**Brief Details.**

On 21/02/2023 at about 1830hrs, I was driving my personal car (SLE8935G) on the first lane along KJE(BKE) towards woodlands entering a slip road. The traffic was slow moving and heavily congested. I came to a complete stop when out of the sudden I felt a hard impact from the rear of my vehicle. I alight from my vehicle and saw it was a chain accident. Behind my vehicle was a Malaysian car (JVJ1999) followed by the last Singapore car (SLB8105B). I check with all the driver and the last driver told me that he could not stop in time and collided onto the Malaysian car causing it to hit onto the rear of my vehicle.

No one was injured during the accident. All 3 driver agree to settle it with respective vehicle insurance company. I have in-car camera install on my vehicle.  
My vehicle damages as follow; rear vehicle dented.





**SINGAPORE  
POLICE FORCE**



T/20230221/2110

Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

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Report No. T/20230221/2110

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature of Officer Recording The Report:

L /

SGT 1 MUHAMMAD SHARIN BIN  
ROSLI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

21/02/2023 20:54

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Classification Of Case:



# Fastech Auto

Date of Accident : 21.02.23 Accident Time : 18:30PM (24-HR-Format)  
Who reported the accident? : Owner / Driver / Both  
Accident Place : Woodlands (KJE) towards BKE  
Vehicle No (Car Plate No) : SLE 8935G Make/Model: Honda Vezel 1.5X  
Insurance Company : MSIG Insurance Policy No: A 300625417 QMX  
Fleet Policy : YES / NO  
Type of Coverage : Comprehensive / Third Party / Third Party Fire & Theft  
Name of Owner / IC No : Mohd Sazali Bin Tarsim (S1243313A)  
Owner Contact No : 93894787 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
Driver Name / IC No : As above  
Driver's Date of Birth : 13.08.1957 Driver's License Pass Date: 05.09.1997  
Relationship of Driver : Spouse / Parents / Children / Sibling / Employee / Other: owner  
Driver's Address : APT BLK 624B woodlands drive, # 11-25 S (732624)  
Driver's Contact No : 1) 93894787 2) \_\_\_\_\_  
Driver's Occupation : INDOOR / OUTDOOR (e.g. working inside or outside office)  
Email Address : anjang 5756 @ gmail.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) : 1 driver  
Was ther any video footage ? : YES / NO  
Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose  
Any injury (If Yes, Pls State) : Yes (1 driver = Mohd Sazali Bin Tarsim)  
Neck pain

## Other Party Driver's Particular (if any)

VEH B : <u>JVJ 1999</u>	Name & Contact No: _____
VEH C : <u>SLB 810XB</u>	Name & Contact No: _____
VEH D : _____	Name & Contact No: _____
VEH E : _____	Name & Contact No: _____

\*NEW - Passenger's Name & Gender:





**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6827 7800  
Co.Reg No. 200412212G GST Reg. No. 20-0412212G  
A Member of **MS&AD** INSURANCE GROUP

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (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.

**MOTORMAX  
Comprehensive****Certificate No.** A 300625417 QMX**Excess :** SGD500**Windscreen Excess :** SGD100

**1. Index Mark and Registration Number of Vehicle**  
SLE8935G

**2. Name of Policyholder**  
Mohd Sazali bin Tarsim

**3. Effective Date of the Commencement of Insurance for the purposes of the Act**  
04/08/2022

**4. Date of Expiry of Insurance**  
03/08/2023

**5. Persons or Classes of Persons entitled to drive\***  
Mohd Sazali bin Tarsim

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\*Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

**6. Limitations as to Use \***

Use only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward 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.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT ANY MSIG AUTHORISED WORKSHOP. REFER TO MSIG.COM.SG FOR LIST OF AUTHORISED WORKSHOPS.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

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 any Amendment, Act or Acts passed in substitution thereof.

**MSIG Insurance (Singapore) Pte. Ltd.**

Approved Insurers

Mack Eng  
Chief Executive Officer