

# NATIONAL Assessment Centre Services

(part 1 of 2)

SN0923280007

Date In: 27/02/2023 15:10	Job description	Date & Time Completed	Done by
Ref No: X1807M128002197	SAS e-Mailing		
Veh No: SNR 5713X	E-mail (within 24hrs, A/C 2hrs)		
D.O.A: 27/02/2023 07:30	1-Motor Claim Form		
OD: (79) Reporting Only	1-Motor W/O (White: OD 2hrs, 79 10hrs)		
TP Insured:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whan		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars: Vch No: PC9296Z INC ( ) / Non-INC ( )

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured/Driver Liability: (

95)

(Note: List Status (WO): 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 repair.

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

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

Remarks: (Note: 10/11/2018: 0016)

1) Apply to: Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

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

Injury: (

Date: (

Time: (

Location: (

Vehicle: (

Driver: (

Owner: (

Policy: (

Assessment: (

Survey: (

Photo: (

Invoice: (

Report: (

Assessment: (

Survey: (

Photo: (

Invoice: (

Report: (

Assessment: (

Survey: (

Photo: (

Invoice: (

Report: (

Assessment: (

Survey: (

Photo: (

Invoice: (

Report: (

Assessment: (

Survey: (

Photo: (

## Invoice Preparation Checklist

1) All: Accident Passbook (\$30)	
2) DA: Damage Assessment (\$100)	INC (\$56)
3) TP: Towing Fee	\$10/\$45
4) PT: Follow-Through Survey	\$15
5) PT: Follow-Through Survey (Basic \$2)	\$30
Excluding repair 120 Days (Inc 200)	
6) TR: Rep/Spec/Rep	\$25
7) NI: New DA + SMRT Survey	\$140
8) NTUC Additional Services	
9) ON	
*NI: Courtesy Car / Tel Allowance	\$5
*NI: Repair Coordination	\$35
*NI: Post Repair Inspection	\$25
*NI: DV / Collect Excess Coordination	\$1
TP (NI): TP (Non-INC) against INC	\$20
TP (NI) 120 Months	10
Invoice Date	File Charged
Invoice Date	File Charged

NA2800598

Insurance Particulars:

Owner/Owner:

Contact No:

Assigned Portion: 100%

Checked by (Engr-In-Charge):

Customer Comments:

Comments:

Comments:

Comments:

Comments:

Comments:

Comments:

Comments:

Comments:

## 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 .....	27/02/2023 15:10 (SGT)
Reported by .....	Driver
Date of Accident .....	27/02/2023 07:30 (SGT)
Exact Location of Accident .....	Upper Changi, Singapore
Additional Location Information .....	JUNCTION WITH XILIN AVENUE
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMR5773X
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	E CORNER BAKERY
Company Reg No .....	5XXXX383K
Email Address .....	taneric81@gmail.com
Mobile Phone No .....	(Phone) +65-91830397
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Noah
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Private hire
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 .....	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number .....	23-MQ000239-R02

#### DRIVER

Name of Driver .....	TAN KOK HENG (CHEN GUOXING)
NRIC No .....	SXXXX991G
Date Of Birth .....	11/08/1981
Occupation .....	Outdoor

Date Of Driving Pass .....	19/01/2009
Driving experience .....	14 YEARS AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-91830397
Alt. Phone Number .....	-
Email Address .....	taneric81@gmail.com
Address .....	BLK 546 SEGAR ROAD #03-57
Address complement .....	-
Postcode .....	672546
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	OWNER
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) .....	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 .....	JARED
Gender .....	Male

#### 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 .....	PC9296Z
Vehicle Manufacturer .....	-
Vehicle Model .....	-

Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	-
Contact Number .....	(Phone) +65-88787577
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	TAN KOK HENG (CHEN GUOXING)
Gender .....	Male
Phone No .....	(Phone) +65-91830397
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SMR5773X
Were seat belts worn? .....	Yes
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

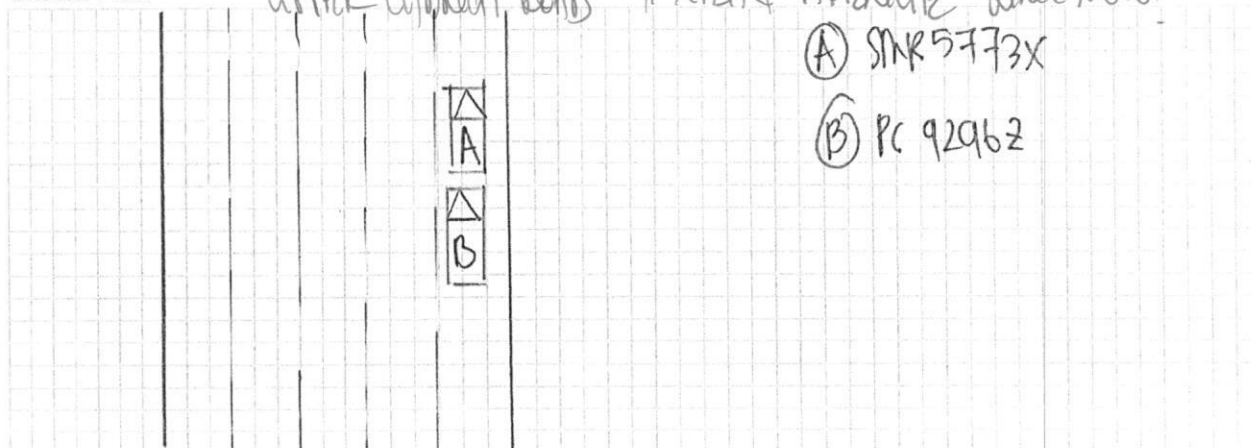
Witnessed by Reporting Centre Personnel

Sketch Plan

UPPER CHANGI ROAD & XILIN AVENUE Junction

(A) SNR 5773X

(B) PC 92962

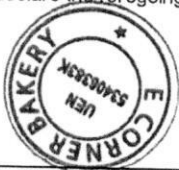


Describe Circumstances of the Accident

On 27-12-2023 at about 0730hrs, I was travelling along junction of Upper Changi Rd & Xilin Avenue. Upon reaching the traffic junction, I slow down and stop. While waiting for the traffic, all of a sudden I felt an impact from the rear. Then I realised a vehicle PC 92962 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

*[Signature]* 27/12/2023



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Date of Accident : 27-02-23 Accident Time: 0730HRS (24-HR-Format)  
Accident Place : Upper Changi Rd & Xilin Avenue Junction  
Vehicle No. (Car Plate No.) : 8MR 5T13X Make/Model: Toyota Noah Hybrid 7-seater  
Insurance Company : Tokio Policy No: 23-HQ000239  
Owner or Company Name /IC No. : E Corner Battery  
Owner or Company Contact No. : \_\_\_\_\_ Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : Tan Kok Heng (Chen Guo Xing) S81259916  
DRIVER'S Date Of Birth : 11-08-1981 DRIVER'S License Pass Date : 19-01-2009  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner  
DRIVER'S Address : 546B Sesar Rd #03-07 S(6F2 546)  
DRIVER'S Contact No./ Alt No. : 1) \_\_\_\_\_ 2) 91930397  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address : Taner's 81@gmail.com  
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): 2 pax include driver  
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)

Vehicle No: PC92962 (China)	Vehicle No: _____
Vehicle Make\Model: _____	Vehicle Make\Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: 88787577	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:

① Jared - (M) 9736 9531

**Tokio Marine Insurance Singapore Ltd.**

(Company Reg. No.: 192300014M) (GST Reg. No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the  
Tokio Marine Group**TOKIO MARINE**  
INSURANCE GROUP

FORM MX1 H

**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)**

**Policy No.:** 23-MQ000239-R02 ( Private Motor Car)

1. **Index Mark and Registration Number of Vehicle** SMR5773X **Chassis No.:** ZWR800423366
2. **Name of Policyholder** E CORNER BAKERY
3. **Effective date of the Commencement of Insurance for the purposes of the Act** 15/01/2023
4. **Date of Expiry of Insurance** 14/01/2024
5. **Persons or Class of Persons entitled to drive\***  
The Policyholder  
Any person who is driving on the Policyholder's order or with their 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.
6. **Limitations as to use\***  
Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.  
Use for social domestic and pleasure purpose and business purposes of the Policyholder or 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.  
3) Use for the carriage of passengers for hire or reward by any person except for private hire services  
4) Use for hire or reward except for (3) and rental by 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 provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

**IMPORTANT NOTICE**

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

<b><u>ADDITIONAL INFORMATION</u></b>		<b>Account:</b> 2292DDA
<b>Insurance Plan:</b>	Comprehensive Essential	
<b>Limit for total loss or theft:</b>	Prevailing Market Value	
<b>Policy Excess:</b>	Own Damage Claims	SGD 2,500
<b>Policy Excess:</b>	Excess-Third Party (Sect II)	SGD 2,500
	Young/Inexperienced Driver	SGD 3,500 (In additional to Section 1 & 2 separately)
	Windscreen Excess	SGD 100
<b>Financial Interest:</b>	CAR HOUSE CAPITAL PTE. LTD	

**Tokio Marine Insurance Singapore Ltd.****Authorised Signature****User Name:** TMIS Direct from TM Onli**Printed:** 14/12/2022



## Vehicle Registration Details

Vehicle No. <b>SMR5773X</b>	Make/Model <b>TOYOTA/NOAH HYBRID 7-SEATER 1.8 X CVT</b>	Vehicle Scheme -
Current Propellant <b>Petrol-Electric</b>	Chassis No. <b>ZWR800423366</b>	Vehicle Type <b>Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover</b>

### Owner's Details

Owner Name:  
**E CORNER BAKERY**

Owner ID Type:  
**Business**

NRIC/Passport/Company Cert No.:  
**53406383K**

Registered Address  
**APT BLK 803C KEAT HONG CLOSE #03-110  
KEAT HONG PRIDE SINGAPORE 683803**

Mailing Address:  
-

Birth Date  
-

### Registration Details

Previous Vehicle No.:  
-

Effective Date of Ownership:  
**14 Jan 2020**

Original Registration Date:  
**14 Jan 2020**

Registration Date:  
**14 Jan 2020**

No. of Transfers:  
**0**

IU Label No.:  
**1129790522**

### Vehicle Specifications

Engine No.:  
**2ZR2G05702**

Chassis No.:  
**ZWR800423366**

Year of Manufacture:

Motor No.:

2019

319K07603

Primary Colour:

Secondary Colour:

Purple

Passenger Capacity:

Engine Capacity / Power Rating:

6

1797 cc / 60.0 kW

Maximum Power Output:

Max Unladen Weight:

100.0 kW ( 134 bhp )

1610 kg

Maximum Laden Weight:

Vehicle Attachment 1:

1995 kg

No Attachment

Vehicle Attachment 2:

Vehicle Attachment 3:

#### Additional Registration Fee (ARF) and COE Information

Open Market Value:

Additional Registration Fee Rate:

\$33,063.00

First \$20,000.00 (100%), next \$13,063.00 (140%)

Actual ARF Paid:

Vehicle Lifespan Expiry Date:

\$28,289.00

No Lifespan

OPC Cash Rebate Eligibility:

QP during COE Bidding Exercise:

No

\$37,900.00

COE No.:

COE Expiry Date:

2020010103000795E

13 Jan 2030

COE Category:

COE Registration Category:

B - Car above 1600cc or 97kW (130bhp)

B - Car above 1600cc or 97kW (130bhp)

Quota Premium (QP) / Prevailing Quota Premium:

Actual QP Paid

\$37,900.00 / -

\$37,900.00

QP (Regn Cat):

\$37,900.00

#### PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

Yes

13 Jan 2030

Minimum PARF Benefit:

\$14,144.00

### Vehicle Emissions Details

CO2 Emission:

98.00 (g/km)

CEV/VES Rebate Utilised Amount:

\$10,000.00

CO Emission:

0.080000 (g/km)

HC Emission:

0.019000 (g/km)

NOx Emission:

0.002000 (g/km)

PM Emission:

0.300000 (mg/km)

Message:

To renew the COE, the Prevailing Quota Premium payable is that of Category B. This is a public service vehicle.

Printed on 16 Dec 2021 13:24:27

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