

# NATIONAL Assessment Centre Services

Date In 20/03/2023	Job description	Date & Time Completed	Done by
RefNO NA/FCI23002817/d4	SAS e-filing		
VehNo GBB 23934	E-mail (within 8hrs, Aft 2hrs)		
DOA 18/03/2023 10:00	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: GBB 60984

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:	Date & Time Completed	Done by
(INC hotline: 6788 6616)		
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury:

Date/Time	Actions

NA2300791

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Call 1:

Call 2/3:

## Invoice Preparation Checklist

	Am't (\$)	Am't
Est. Bill		Add
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) FT: 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:-		
Q1*		
*N5: Courtesy Car / Tpt Allowance \$5		
*N6: Repair Co-ordination \$10		
*N7: Post Repair Inspection \$25		
*N8: DV / Collect Excess Coordination \$5		
TP (N11): TP (Non INC) against INC \$20		
9) N12: Idac Mobile 30		

Invoice dated

Fee Charged

Invoice dated

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	20/03/2023 11:23 (SGT)
Reported by	Driver
Date of Accident	18/03/2023 10:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TANAH MERAH COAST ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF2393Y
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SIANG HOCK HOLDING PTE LTD
Company Reg No	1XXXXX681M
Email Address	car.rental@sianghock.com.sg
Mobile Phone No	(Phone) +65-98792002
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Kia
Model	K2500 6M/T
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	Commercial vehicle
Transmission	Manual
CC	2497

#### INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099210MFCV/8

#### DRIVER

Name of Driver	DALJEET SINGH
Passport No/FIN	GXXXX350Q
Date Of Birth	06/04/1983
Occupation	Outdoor



Date Of Driving Pass .....	09/07/2021
Driving experience .....	1 YEAR AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-84203974
Alt. Phone Number .....	-
Email Address .....	car.rental@sianghock.com.sg
Address .....	51 BUKIT BATOK CRESCENT, UNITY CENTRE
Address complement .....	# 06-43
Postcode .....	658077
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	RENTAL LEASING
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 THE ATTACHED STATEMENT

#### 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 .....	GBB6098U
Vehicle Manufacturer .....	Toyota
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)	.....	-



## IMPORTANT NOTICE

- ## 8. Consent under the Personal Data Protection Act (PDPA)

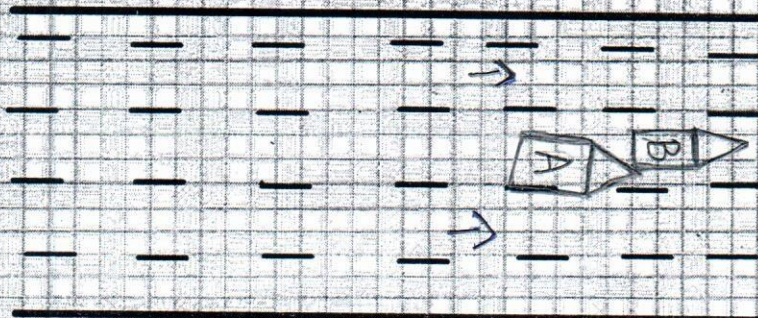
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Witnessed by Reporting Centre  
Personnel

TANAH MERAH COAST ROAD

B-GBB6098U



gumail 20/03/2023

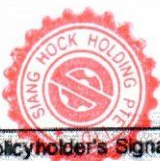


**Describe Circumstances of the Accident**

On 18 March 2023 @10:00 am I was driving the vehicle GBF2393Y along tanah merah coast road towards the changi lodge 2 , the vehicle(GBB6098U) before me suddenly jam braked before the traffic light where i didnt expect him to stop, i tried to brake but i hit him accidentally

**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]* 20/03/2023



### ACCIDENT STATEMENT

ACCIDENT DATE: ( 18 / 03 / 2023 ) (DD/MM/YYYY), TIME ( 10 : 00 AM ) (HH:MM)

LOCATION: TANAH MERAH COAST ROAD

#### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBF2393Y  
b) INSURANCE COMPANY: MS FIRST CAPITAL INSURANCE LTD  
c) POLICY NO: D-22099210MFCV/8  
d) POLICY TYPE: ( ☒ COMPREHENSIVE / ☐ THIRD PARTY / ☐ THIRD PARTY FIRE & THEFT )  
e) MAKE/MODEL: KIA K2500 6MT  
f) TYPE: ( ☒ SALOON / ☐ COUPE / ☐ MPV / ☐ VAN / ☐ LORRY / ☐ MOTORCYCLE / ☐ OTHERS )  
g) VEHICLE CATEGORY: ( ☒ PRIVATE / ☐ COMMERCIAL / ☐ MOTORCYCLE )  
h) PURPOSE OF USING AT TIME OF ACCIDENT: Rental - Leasing  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE: ( YES / ☒ NO )  
IF NO, PLEASE STATE (THIRD PARTY CLAIM/REPORTING ONLY)

#### 2. INSURED / POLICY HOLDER

- A) NAME: SIANG HOCK HOLDING PTE LTD (MALE/FEMALE)  
B) NRIC/FIN/PASSPORT: 198400681M CONTACT: 9879 2002  
C) ADDRESS: 21 JALAN MASJID  
SINGAPORE 418946, car.rental@sianghock.com.sg

\*CONTINUE TO 3.D IF DRIVER ALSO POLICY HOLDER

#### 3. DRIVER

- A) NAME: DALJEET SINGH ( ☒ MALE / ☐ FEMALE )  
B) NRIC/FIN/PASSPORT: G6536350Q CONTACT: 84203974  
C) ADDRESS: 51 Bukit Batok Crescent, #06-43 Unity Centre  
SINGAPORE 658077  
D) DATE OF BIRTH: ( 06 / 04 / 1983 ) (DD/MM/YYYY)  
E) OCCUPATION: ( ☒ INDOOR / ☐ OUTDOOR )  
F) YEARS OF DRIVING EXPERIENCE: 1 Y & 8 M ( 09/07/2021 )

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? ( YES / ☒ NO )  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: RENTAL LEASING

- 5.A) WEATHER CONDITION: ( ☒ CLEAR / ☐ RAINING / ☐ OTHERS )  
B) ROAD SURFACE: ( ☒ DRY / ☐ WET / ☐ OTHERS )

6. WAS ANYBODY INJURED: ( YES / ☒ NO )

7. REPORTED TO POLICE: ( YES / ☒ NO )

IF YES PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

#### 8. THIRD PARTY VEHICLE:

- A) VEHICLE NO: GBB6098U MODEL: TOYOTA  
B) DRIVER'S NAME: \_\_\_\_\_  
C) NRIC.FIN PASSPORT NO.: \_\_\_\_\_ CONTACT: \_\_\_\_\_

#### 9. THIRD PARTY VEHICLE:

- A) VEHICLE NO: \_\_\_\_\_ MODEL: \_\_\_\_\_  
B) DRIVER'S NAME: \_\_\_\_\_  
C) NRIC.FIN PASSPORT NO.: \_\_\_\_\_ CONTACT: \_\_\_\_\_



**CERTIFICATE OF INSURANCE**

ORIGINAL

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)

Type of Policy. : COMMERCIAL VEHICLE - FLEET  
Type of Cover. : Comprehensive  
Certificate No. : D-22099210MFCV/8  
Vehicle No / Chassis No : GBF2393Y / KNCSJX76LG7082737  
Name of Insured : SIANG HOCK HOLDING PTE LTD  
Period Of Insurance : 01.04.2022 To 31.03.2023  
Insured Estimated Value : Market Value At Time Of Loss  
Financial Institution : MV CREDIT PTE LTD

EXCESS : AS INDICATED BELOW - ALL EXCESS AMOUNTS ARE SUBJECT TO GST

**Authorised Driver\***  
ANY AUTHORISED DRIVER

**Persons or classes of persons entitled to drive\***

- (1) Whilst the vehicle is being used in connection with the Insured's business:-  
(a) Any person provided he is in the Insured's employ and is driving on their order or with their permission.  
(2) Whilst the vehicle is being used for social, domestic or pleasure purposes:-  
(a) Any person who is driving on the Insured's order or with their permission.

For drivers with more than 1 year driving experience and/or not less than 21 years of age

Excess : S\$1,000.00 on Section I & II separately (for Long Term Lease - 1 year or more)  
S\$2,500.00 on Section I & II separately (for Short Term Lease - less than 1 year)  
S\$1,000.00 on Section I & II separately (for Staff)

For drivers with less than 1 year driving experience and/or less than 21 years of age

Excess : S\$3,000.00 on Section I & II separately (for Long Term Lease - 1 year or more)  
S\$4,500.00 on Section I & II separately (for Short Term Lease - less than 1 year)  
S\$2,000.00 on Section I & II separately (for Staff)

\* 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.

**Limitations as to use\***

Use in connection with the Insured's business.  
Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.  
Use for social, domestic and pleasure purposes.

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 of any one disabled mechanically propelled vehicle.  
(3) Use for the carriage of passengers for hire or reward.

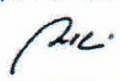
\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

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)

MS First Capital Insurance Limited  
(Approved Insurers)

STELLAL/D0067/MZ301A9

Issued at Singapore on 01.04.2022

  
Authorised Signature