

# NATIONAL Assessment Centre Services

Date In 24/03/2023	Job description	Date & Time Completed	Done by
Ref No NAICT123003066/d4	SAS e-filing		
Veh No SLR 6705Z	E-mail (within 2hrs, Aft 2hrs)		
DOA 24/03/2023 08:35	I-Motor Claim Form		
OD/ TP/ <u>Reporting Only</u>	I-Motor W/O (Within OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (		Tel:	Fax:
TP Particulars:	Veh No: CB 694/Z	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
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury : \_\_\_\_\_

Date/Time	Actions

NA2300874

Claimant's Particulars	Invoice Preparation Checklist	Amt (\$)	Add
Driver/Owner:	1) AR : Accident Reporting (\$30);		
Contact No:	2) DA : Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TP : Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT : Follow-Through Survey \$120		
	5) PT : Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR : Re-inspection \$75		
	7) N1 : Idno DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
	*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: Idno Mobile 30		
Call 1:	Invoice dated	Fax Charged	
Call 2/3:	Invoice dated	Fax 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	24/03/2023 13:51 (SGT)
Reported by	Actual Driver
Date of Accident	24/03/2023 08:33 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIONEER ROAD TOWARDS JALAN BUROH
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR6705Z
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	1AXIS PRESTIGE LEASING PTE LTD
Company Reg No	2XXXXX962N
Email Address	charlottevehicles@gmail.com
Mobile Phone No	(Phone) +65-97828480
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	C-hr
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 - Reporting only
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	DMHCSNA00017352200

#### DRIVER

Name of Driver	CHENG YEW KHAW
NRIC No	SXXXX567D
Date Of Birth	05/01/1971
Occupation	Outdoor



Date Of Driving Pass	07/11/1994
Driving experience	28 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97828480
Alt. Phone Number	-
Email Address	charlottevehicles@gmail.com
Address	APT BLK 185 JELEBU ROAD
Address complement	# 27-24
Postcode	670185
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	UNKNOWN
Gender	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230324/7025

#### 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	SD CARD WITH POLICE OFFICER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	CB6941Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-91311271
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	YL9198U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-82328595
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	CHENG YEW KHAW
Gender	Male
Phone No	(Phone) +65-97828480
Address	APT BLK 185 JELEBU ROAD
Address Complement	# 27-24
Post Code	670185
Approximate Age Years Old	-
Injuries Sustained	LEFT SIDE NECK PAIN
Injured person in which vehicle?	SLR6705Z
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

##### INJURED 2

Name of injured person	UNKNOWN
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	HEAD INJURY
Injured person in which vehicle?	SLR6705Z
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

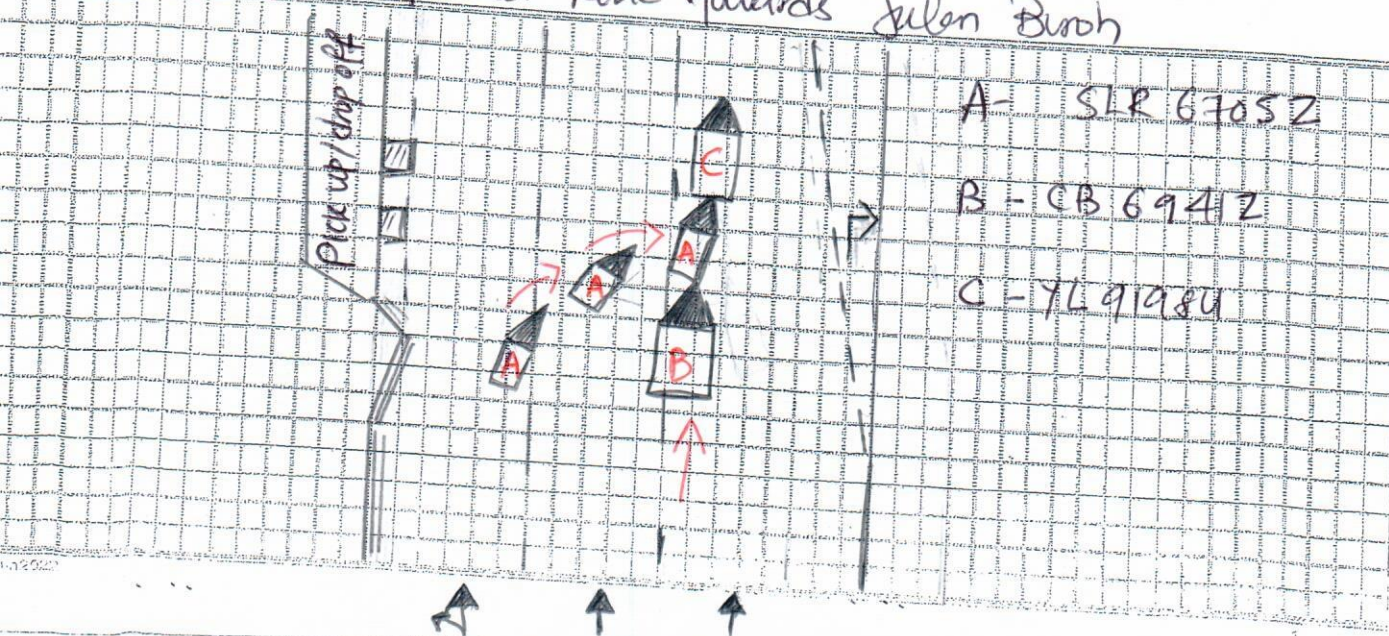


### SKETCH PLAN

- 

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Pioneer Road towards Jelen Buroh





Describe Circumstance of the Accident

On the above stated date and time, I was driving along Pioneer Road towards Jalen Bush and I was there to pick up a passenger. After pick up, I was in lane 3 and I wanted to filter to lane 1, while filtering into lane 1, suddenly vehicle B hit the rear right portion of my vehicle and due to the impact my vehicle move forward and hit the rear portion of vehicle C.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NPIC/IC card)

*Ch* 24/03/2023

*James* 24/3/2023



# SINGAPORE POLICE FORCE



T/20230324/7025

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20230324/7025

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/03/2023 12:32		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: CHENG YEW KHAW			Address: 185 JELEBU ROAD #27-24 SINGAPORE 670185		
ID Type / ID No.: NRIC NO / S7100567D			Contact No.: Home/Office: Mobile: 97828480		
Nationality: SINGAPORE CITIZEN			Email: CHENG937@GMAIL.COM		
Sex: Male	Age: 52	Date of Birth: 05/01/1971	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/03/2023 08:35	Type of Location: Straight Road
Location:  PIONEER ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
CB6941Z	Bus/Coach/Mi nibus					0
SLR6705Z	Car					0
YL9198U	Lorry					0





**SINGAPORE  
POLICE FORCE**



T/20230324/7025

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20230324/7025

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Passenger</b>			
Name	Unknown Passenger	ID No.	NIL
Related Vehicle	SLR6705Z (Car)	Contact No.	98364854
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	24/03/2023	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	Slight
<b>Driver</b>			
Name	CHENG YEW KHAW	ID No.	S7100567D
Related Vehicle	SLR6705Z (Car)	Contact No.	97828480
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

On the above stated date and time, I was driving along Pioneer Road towards Jalan Buroh and I was there to pick up a passenger. After pick up, I was at lane 3 and I wanted to filter to lane 1, while filtering into lane 1, suddenly a mini bus(CB6941Z) hit the rear right portion of my vehicle and due tot the impact, my vehicle moved forward and hit the rear portion of another vehicle(YL9198C).





**SINGAPORE  
POLICE FORCE**



T/20230324/7025

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20230324/7025

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
KOH WEI JIE  
Contact No.: 97303412

NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:  
24/03/2023 12:32

Classification Of Case:



You are required to be present at Traffic Police on  
at am/ pm to meet the Investigation Officer to assist in the investigation.

Please bring along your :

- a) Identity Card / Passport / Work Pass
- b) Driving License / Vocational License
- c) Vehicle Insurance / Medical Certificate
- d) Any other relevant documents (e.g. Video footages)

If you are unable to keep to the appointment, please contact:

IC: **Abdullah**  
Investigation Branch: 6547 6391.

TEL: **6547 6246**  
Email: SPF\_TP\_Invest\_Branch@spf.gov.sg

NP319E(2019)

You are required to be present at Traffic Police on  
at am/ pm to meet the Investigation Officer to assist in the investigation.

Please bring along your :

- a) Identity Card / Passport / Work Pass
- b) Driving License / Vocational License
- c) Vehicle Insurance / Medical Certificate
- d) Any other relevant documents (e.g. Video footages)

If you are unable to keep to the appointment, please contact:

IC: **Abdullah**  
Investigation Branch: 6547 6391

TEL: **6547 6246**  
Email: SPF\_TP\_Invest\_Branch@spf.gov.sg

NP319E(2019)

NP319E(2019)

With reference to the above, you are advised to lodge a traffic accident report online via the  
Police E-Services website (<https://eservices.police.gov.sg>) within 24 hours.

Report Number: **30030324/0054**  
Traffic Accident along **Rawlinson Rd & Sin Bava Rd, 18:47**  
Involving vehicles: **Y19198N, SLP6305Z, CB6941Z**  
On **24/03/13** at about **0833** am/ pm.

CASE CARD

SINGAPORE  
POLICE FORCE  
SAFEGUARDING EVERY DAY





# ACCIDENT STATEMENT

ACCIDENT DATE: 24 / 03 / 2023 (DD/MM/YYYY) TIME: 08 : 33 (HH:MM)  
 LOCATION: Pioneer Road towards Jalan Buroh

## 1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SLR 6705Z  
 b) INSURANCE COMPANY: China Taiping  
 c) POLICY NUMBER: DMHC SNA 00017 352200  
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT  
 e) MAKE & MODEL: Toyota AC-HR Hybrid AUTO / MANUAL  
 f) TYPE: SEDAN / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: Private Hire  
 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: Taxis Prestige Leasing Pte Ltd (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 2021 21 962N CONTACT:  
 c) ADDRESS:

\* CONTINUE TO 3. & 4 IF DRIVER ALSO POLICY HOLDER

DRIVER  
 a) NAME: Cheng Yew Khaw  
 b) NRIC/FIN/PASSPORT: S7100567D (MALE / FEMALE)  
 c) ADDRESS: APT BIK 185 Jalan Road # 27-24  
S. 676183 CONTACT: 97828480

d) DATE OF BIRTH: 05 / 01 / 1971 (DD/MM/YYYY)  
 e) OCCUPATION: (INDOOR / OUTDOOR)  
 f) YEARS OF DRIVING EXPERIENCE: 07 / 11 / 1994

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Private Hire (Rental-Leasing)

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)  
 b) ROAD SURFACE: DRY / WET / OTHERS

6. WAS ANYBODY INJURED (YES / NO) (Left side neck pain)  
 7. c) REPORTED TO POLICE (YES / NO) (P-head injury) - ambulance

IF YES, PLEASE STATE WHICH POLICE STATION: Ubi

## 8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: CB 6941Z MODEL:  
 b) DRIVER'S NAME:  
 c) NRIC/FIN/PASSPORT: CONTACT: 9131 1241

## 9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: YL91984 MODEL:  
 e) DRIVER'S NAME:  
 f) NRIC/FIN/PASSPORT: CONTACT: 8232 8595

Email = charloffervehicles@gmail.com

Sex =

Witness = yes, with TP (SD)



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)

MZ406L/B

E SN

AN0055A

Cov. Type:C

CERTIFICATE No.

DMHCSNA00017352200

Engine No.: 2ZR8004196

Cha. No.: ZYX102003339

1. Index Mark and Registration  
Number of Vehicle

SLR6705Z

AUTOSAFE

=====

2. Name of Policy Holder

1AXIS PRESTIGE LEASING PTE LTD

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment21/12/2022  
(00:00:00)

Excess Sect I . S\$2,000.00

Excess Sect. I (Outside Singapore) S\$4,000.00

Excess Sect. II S\$1,500.00

Excess Sect.II (Outside Singapore). S\$3,000.00

EX ON WINDSCREEN . S\$100.00

4. Date of Expiry of Insurance

18/09/2023

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.

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.: SKYWAY CREDIT &amp; LEASING 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: Chai Huilin Lynn  
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