

NATIONAL Assessment Centre Services (011 4 7044) **SN08233V0006**

Date In: 31/03/2023 17:46	Job Description	Date & Time Completed	Done by
Ref No: NBA/C723003402/Y	SAS e-Milling		
Veh No: ET 898A	E-mail (within 24hrs, A/C 2hrs)		
D.O.A: 20/08/2023 20:30	In-Motor Claim Form		
QC / TP / Reporting Only	In-Motor W/O (within 24hrs, 24 hrs)		
	In-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

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

TP Particulars: Vch No: **STP 4800A** INC () / Non-INC ()

Owner / Driver: () Tel: ()

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

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

Insured/Driver Liability: () % (Note: Hst Status (WO): 10: 0-30%, F: 21-70%, F: 30-100%)

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 repair.

() Total Loss Case: 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 Resurvey Photo (Repair Cost > \$3000) ()

Injury: ()

Date: ()

Time: ()

Location: ()

Vehicle: ()

Driver: ()

Witness: ()

Police: ()

Insurance: ()

Other: ()

N/A2300950

Invoice Preparation Charge	
1) AR: Accident Reporting (\$30)	
2) DA: Damage Assessment (\$100)	INC (\$56)
3) TP: Towing Fee	\$10/\$45
4) PT: Follow-Through Survey	\$12
5) FT: Follow-Through Survey (Emergency)	\$30
6) TR: Repairs	\$25
7) NI: Hst DA + SMRT Survey	\$140
8) NI: Additional Services	
GR:	
*NI: Courtesy Car / Tel Allowance	\$5
*NI: Repair Coordination	\$12
*NI: Post Repair Inspection	\$20
*NI: DV / Collect Excess Coordination	\$5
*TP (NI) / TP (Non-INC) against INC	\$20
TP (NI) / TP (Non-INC)	10
Invoice Total	
Fee Charged	

Checked by (Engr-In-Charge): ()

Customer's Comments: ()

Signature: ()

Date: ()



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	31/03/2023 17:26 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	30/03/2023 20:30 (SGT)
Exact Location of Accident	Woodlands Ave 12, Singapore
Additional Location Information	TURNING INTO WOODLANDS WALK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	EH898A
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	PHUA ENG HUA
NRIC No	SXXXX307F
Email Address	richard.phua@angles.com.sg
Mobile Phone No	(Phone) +65-96759038
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Maserati
Model	LEVENTA
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	2979

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00115982200

DRIVER

Name of Driver	PHUA ENG HUA
NRIC No	SXXXX307F
Date Of Birth	27/11/1957
Occupation	Indoor



Date Of Driving Pass	30/06/1978
Driving experience	44 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96759038
Alt. Phone Number	-
Email Address	richard.phua@angles.com.sg
Address	BLK 683A WOODLANDS DRIVE 62 #13-105
Address complement	-
Postcode	731683
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?	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 POLICE REPORT T/20230331/7008

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	SJP4800D
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-

* Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN JUN JIE JACKY
* NRIC No	SXXXX887D
Contact Number	(Phone) +65-91730971
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

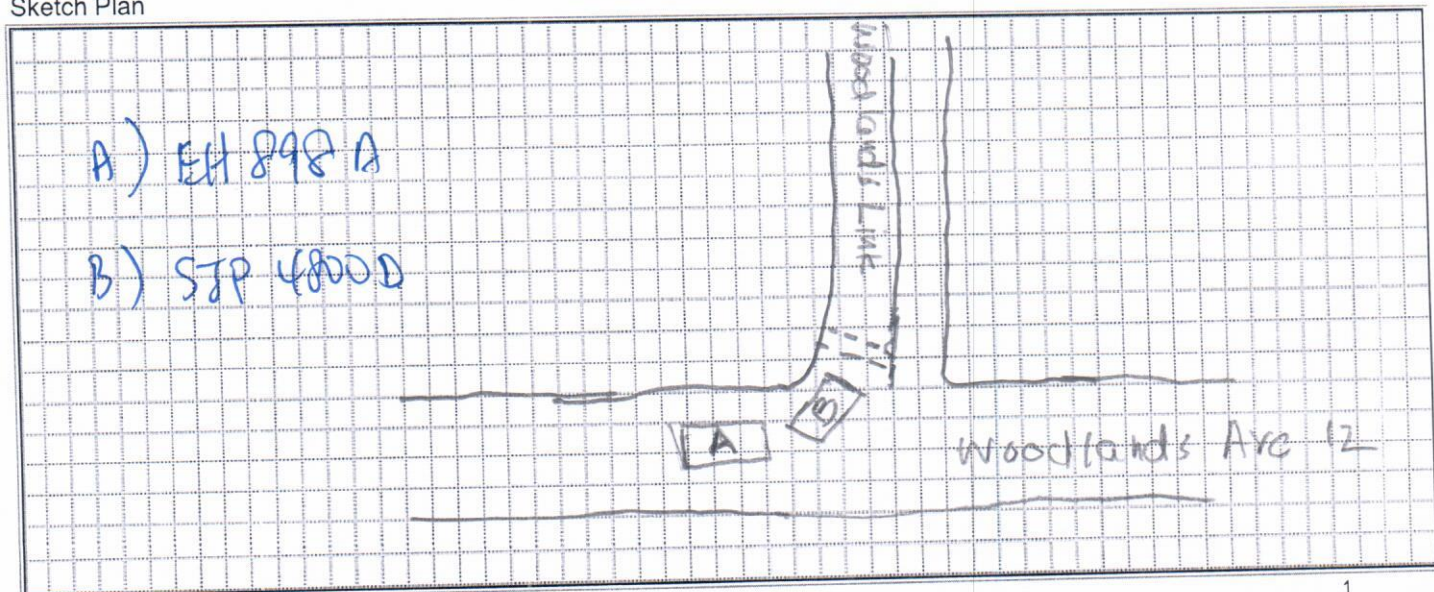
Quen 31/3/23

Policyholder's Signature / Date & Time

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

Quen 31/03/2023
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan





SINGAPORE POLICE FORCE



T/20230331/7008

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

1 of 3

Report No. T/20230331/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/03/2023 09:29		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: PHUA ENG HUA		Address: 683A WOODLANDS DRIVE 62 #13-105 SINGAPORE 731683			
ID Type / ID No.: NRIC NO / S1263307F		Contact No.: Home/Office:		Mobile: 96759038	
Nationality: SINGAPORE CITIZEN		Email: richard.phua@angles.com.sg			
Sex: Male	Age: 65	Date of Birth: 27/11/1957	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Director		Driving Licence Information: Class: 3		Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 30/03/2023 20:30	Type of Location: Bend
Location: along woodlands ave 12 turning into woodlands lane				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 40 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: when the front vehicle emergency brake to avoid cyclist				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
EH 898A	Car	MASERATI	leventa	Black		0
SJP 4800D	Car	HYUNDAI	Avante	White	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20230331/7008

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

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Report No. T/20230331/7008

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	PHUA ENG HUA	ID No.	S1263307F
Related Vehicle	EH 898A (Car)	Contact No.	96759038
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

when approaching the bend, vehicle in front of me did an emergency brake to avoid collision with a cyclist, I did an emergency brake however i collided with the rear bumper of the said car. No injuries and I am recording this report for recording purpose and insurance claim.

Details of other party vehicle
SJP 4800D Hyundai avante
Tan Jun Jie Jacky S8622887D

Details of my vehicle:
EH 898A Maseratti

ACCIDENT STATEMENT

ACCIDENT DATE: (30 / 3 / 23) (DD/MM/YYYY), TIME: (20 : 30) (HH:MM)

LOCATION: Woodlands Ave 12 Junction with Woodlands Link

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: EH 898A
 b) INSURANCE COMPANY: China Piping
 c) POLICY NUMBER: DMP(SNW) 00115982200
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Wegerah / LEVANTE
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Private
 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: Phua Eng Hua (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1263887F CONTACT: 96759038
 c) ADDRESS: B1K 683A Woodlands Drive 62
 # 13-105 C731683

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No of passenger
 (including driver)
 (1)

- DRIVER
 a) NAME: AS Above (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: CONTACT:
 c) ADDRESS:

- d) DATE OF BIRTH: (27 / 11 / 1957) (DD/MM/YYYY)
 e) OCCUPATION: (INDOOR / OUTDOOR)
 f) DATE OF DRIVING PASS: 30/16/1978
 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner
 5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
 b) ROAD SURFACE: (DRY / WET / OTHERS)
 6. WAS ANYBODY INJURED (YES / NO)
 7. a) REPORTED TO POLICE (YES / NO)
 IF YES, PLEASE STATE WHICH POLICE STATION:

3. THIRD PARTY VEHICLE

No of passenger
 (including driver)
 (2)

- a) VEHICLE NUMBER: SP 4800 D MODEL: HYUNDAI
 b) DRIVER'S NAME: Tan Jun Jie Sacku
 c) NRIC/FIN/PASSPORT: S8622887D CONTACT: 91730971

4. THIRD PARTY VEHICLE

No of passenger
 (including driver)
 ()

- a) VEHICLE NUMBER: MODEL:
 b) DRIVER'S NAME: CONTACT:
 c) NRIC/FIN/PASSPORT:

Email: richard.phua@angles.com.sg
 VIDEO



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 Private Car

MX1F

N SN

AN0717A

Cov. Type:C

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)

CERTIFICATE No.

DMPCSNW00115982200

Engine No.: 497266

Cha. No.: ZN6XU61C00X373230

1. Index Mark and Registration
Number of Vehicle

EH898A

2. Name of Policy Holder

PHUA ENG HUA

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

14/05/2022
(00:00:00)

Named Drivers Ex Sect. I S\$8,000.00
Excess Sect. I (Outside Singapore) S\$16,000.00
EX ON WINDSCREEN S\$500.00

4. Date of Expiry of Insurance

13/05/2023

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his 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.

6. Limitations as to use.*

Use for social, domestic and pleasure purposes and for the Policyholder's business.
The policy does not cover use for hire or reward tuition driving test 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.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

* 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: JIN LI PTE LTD
Authorised Officer

杨亚美

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

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