

NATIONAL Assessment Centre Services

(Call 1-800-451-1234)

SN# 23460001

Date In: 06/04/2023 11:06	Job description: SAS e-Milling	Date & Time Completed:	Done by:
Ref No: NIA/C71230035014	E-mail (with In, A/C In):		
Veh No: Start 32675	1-Motor Claim Form		
D.O.A: 05/04/2023 08:00	1-Motor W/O (with: OD In, A/C In):		
QC (TP) Reporting Only	1-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/VL:an		

Preferred Wksp / INC Assgn Wksp / QW: (Tel:	Fax:
TP Particulars: Vch No: SMU 2173G	INC () / Non-INC ()	
Owner / Driver: (Tel:	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: (Date:	Printer: ()
Insured/Driver Liability: ()	93) (Note: Est. Status (WO): 10: 0-30%, P: 21-70%, P: 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 repeller.

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

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

REMARKS: (INC 10010: 0783-0010)

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

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

Injury: _____

Date: _____

Accident: _____

<p>NIA 2300996</p> <p>Insured's Particulars:</p> <p>Owner/Owner:</p> <p>Contact No:</p> <p>Assigned Persons:</p> <p>Checked by (Engr-In-Charge):</p> <p>Comments:</p> <p>CL</p> <p>LD/3:</p>	Investment/Repairation Charge List		Am't	Task
	1) AR: Accident Processing (\$300)			
	2) DA: Damage Assessment (\$1000)	INC (\$55)		
	3) TP: Towing Fee	\$10/\$45		
	4) PT: Follow-Through Survey	\$130		
	5) PT: Follow-Through Survey (Barney)	\$30		
	6) TR: Rep/Specimen	\$75		
	7) NI: New DA + SMRT Survey	\$140		
	8) NUC Additional Services			
	9) QW:			
	*No: Courtesy Car / Tot Allowance	\$5		
	*No: Repair Coordination	\$15		
	*No: Post Repair Inspection	\$15		
	*No: DV / Collect Excess Coordination	\$1		
	*TP (11) : TP (INC) against INC	\$20		
	TP (11) : TP (INC) against INC	\$10		
	Insured's Total			
	Fees 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	06/04/2023 11:06 (SGT)
Reported by	Actual Driver
Date of Accident	05/04/2023 08:00 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS TUAS (NEAR BUKIT BATOK)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM3267S
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	KEE WEE HUP KEE FOOD MANUFACTURE PTE LTD
Company Reg No	1XXXXX311E
Email Address	rolandpcp@gmail.com
Mobile Phone No	(Phone) +65-97685055
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Attrage
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1193

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00038382303

DRIVER

Name of Driver	PANG CHIN PENG ROLAND
NRIC No	SXXXX550G
Date Of Birth	12/07/1965
Occupation	Outdoor

Date Of Driving Pass	02/01/1987
Driving experience	36 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97685055
Alt. Phone Number	-
Email Address	rolandpcp@gmail.com
Address	BLK 137 SIMEI STREET 1 #10-96
Address complement	-
Postcode	520137
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Raining
Road Surface	Wet

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 SKETCH PLAN

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	SMU2173G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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

- (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.



Witnessed by Reporting Centre
Personnel

A = SLM 32675
B = SMU 21736

P/E

Describe Circumstances of the Accident

On 05.04.2023 about 0800hrs. I was travelling along PIE toward Tuas. I was stationary due to the front traffic. Suddenly the vehicle B (SMU 2173G) collided onto rear portion of my vehicle (SLM 3267S).

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]

0354pm
5/4/2023

[Signature]
06/04/2023

Date of Accident : 05-04-2023 Accident Time : 0800hrs (24-HR-Format)

Who reported the accident? : Owner / Driver / Both

Accident Place : PIE towards tuas (near bukit barok)

Vehicle No (Car Plate No) : SLM 3267S Make/Model: Mitsubishi Attrage 1.2 CVT

Insurance Company : China Taiping Policy No: DMPCSNW00038382303

Fleet Policy : YES / NO

Type of Coverage : Comprehensive / Third Party / Third Party Fire & Theft

Name of Owner / IC No : Kee Wee Hup Kee Food Manufacture Pte Ltd
(197801311E)

Owner Contact No : 9768 5055 Owner's Hp Company Tel

Driver Name / IC No : Pang Chin Peng Roland (S169555061)

Driver's Date of Birth : 12-07-1965 Driver's License Pass Date: 02.01.1987

Relationship of Driver : Spouse / Parents / Children / Sibling Employee / Other: _____

Driver's Address : Apt Blk 137 Simei St 1 #10-96 S 520137

Driver's Contact No : 1) 9768 5055 2) _____

Driver's Occupation : INDOOR / OUTDOOR (e.g. working inside or outside office)

Email Address : rolandpcp@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) : Nil

Other Party Driver's Particular (if any)

VEH B : <u>SMU 2173G</u>	Name & Contact No: _____
VEH C : _____	Name & Contact No: _____
VEH D : _____	Name & Contact No: _____
VEH E : _____	Name & Contact No: _____

*NEW - Passenger's Name & Gender:



[Handwritten signature]



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

MX4F

R SN

AN0696A

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.

DMPCSNW00038382303

Engine No.: 3A92UDS2179

Cha. No.:MMBSTA13AHH004373

1. Index Mark and Registration
Number of Vehicle

SLM3267S

AUTOSAFE
=====

2. Name of Policy Holder

KEE WEE HUP KEE FOOD MANUFACTURE PTE LTD

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

28/03/2023

(00:00:00)

Named Drivers Ex Sect. I \$S500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 \$S3,000.00

Ex Sect. I - Age >= 26 \$S500.00

* Age as at date of accident

EX ON WINDSCREEN . \$S100.00

5. Persons or Classes of Persons entitled to drive*

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.

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 \$S500 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: YOURS INSURANCE AGENCY PTE LTD

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