

NATIONAL Assessment Centre Services

Date: 13/04/2023	Job description	Date & Time Completed	Done by
Ref No: NA 7M123003819/04	SAS e-filing		
Veh No: GBD 1313X	E-mail (within 8hrs, Aft 2hrs)		
DOA: 13/04/2023 09:20	i-Motor Claim Form		
OD/TP/Reporting Only	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: SLL 1981G

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:

INC hotline: 6788 6616

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

NA2301072

Invoice Preparation Checklist

Amr (\$)

Amr

Est. Bill

Add

Claimant's Particulars

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Call 1:

Call 2/3:

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$80)

3) TP: Towing Fee \$40/\$45

4) FT: Follow-Through Survey \$120

5) RT: Follow-Through Survey (Resurvey) \$30

For claiming against INC Only (wef 10 Jan 2005)

6) TR: Re-inspection \$75

7) NI: Idac DA + SMRT Survey \$160

8) NTUG 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	13/04/2023 14:19 (SGT)
Reported by	Actual Driver
Date of Accident	13/04/2023 09:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	COLLYER QUAY TOWARDS ESPLANADE DRIVE BEFORE ROBINSON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD1313X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TA CHUAN CONSTRUCTION
Company Reg No	4XXXX800C
Email Address	TACHUANCONSTRUCTION@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-93875683
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Cabstar
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	Manual
CC	2953

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	MP002974

DRIVER

Name of Driver	TEE PAK CHUAN
NRIC No	SXXXX000Z
Date Of Birth	23/10/1966

Occupation	Indoor
Date Of Driving Pass	11/04/1986
Driving experience	37 YEARS
Gender	Male
Mobile Number	(Phone) +65-93875683
Alt. Phone Number	-
Email Address	TACHUANCONSTRUCTION@YAHOO.COM.SG
Address	BLK 38 ANCHORVALE LANE
Address complement	# 13-35
Postcode	544593
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	SEL-EMPLOYED
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	SLL1981G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CELESTE SARIMPI ISAAC

Contact Number	(Phone) +65-93879234
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 willful 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/dan 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.



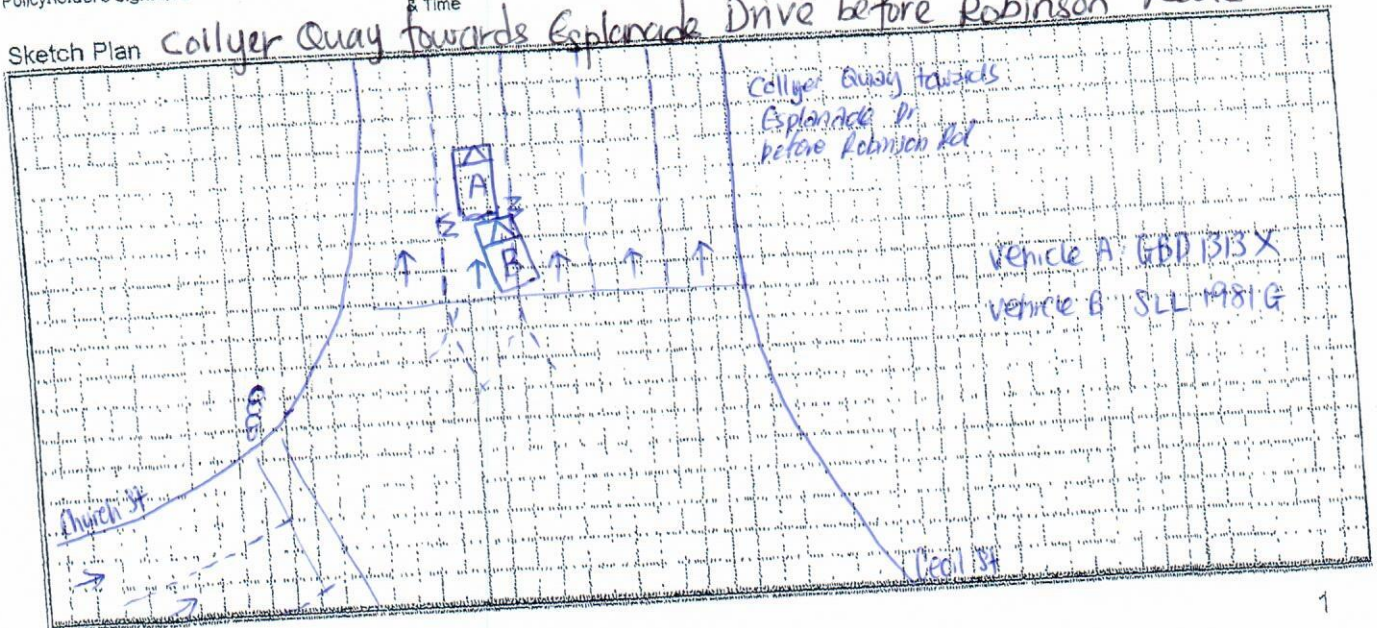
Policyholder's Signature / Date & Time

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

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

Sketch Plan

Collyer Quay towards Esplanade Drive before Robinson Road



Describe Circumstance of the Accident

As of above date and time, I was driving my vehicle (GBD 1313X) along Church St heading towards Collyer Rd. After the traffic junction into Collyer Rd on lane 4, vehicle B (SLL 1981G) collided into the rear portion of my vehicle. Vehicle B was filtering from lane 3 and collide into my vehicle Rear Right Portion.

Declaration

I/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
(Name as in NRIC/ID card)

VEHICLE NO: <u>G8D1313 X</u>	MAKE & MODEL <u>Nissan Cabstar</u>	AUTO <input checked="" type="checkbox"/> MANUAL <input type="checkbox"/>
DATE OF ACCIDENT: <u>13/04/2023</u>	CC: <u>3-0</u>	
TIME OF ACCIDENT: <u>0920</u> HRS		
LOCATION OF ACCIDENT: <u>Collapsing Quay towards Esplanade Drive before Robinson Rd</u>		
EXACT PURPOSE USE DURING ACCIDENT: <u>EMPLOYMENT / PRIVATE USE / PRIVATE HIRE</u>		
NAME OF OWNER: <u>Ta Chuan Construction</u>		
TEL NO: <u>H/P: 9387 5683</u>	OFFICE:	HOME:
NRIC: <u>45767800C</u>		
ADDRESS: <u>Blk 38 Anchorvale Lane #13-35 8544593</u>		
EMAIL: <u>TACHUANCONSTRUCTION@yahoo.com.sg</u>		
CLAIM TYPE: <u>OD / THIRD PARTY / REPORTING ONLY</u>		
FLEET POLICY: <u>YES</u> <input checked="" type="checkbox"/> <u>NO</u> <input type="checkbox"/>		
INSURANCE COMPANY: <u>Tokio Marine</u>		
TYPE OF COVERAGE: <u>Comprehensive</u> / Third Party / Third Party Fire & Theft		
POLICY NO: <u>MP002974</u>		
NAME OF DRIVER: <u>AS ABOVE / IF NO: Tee Pak Chuan</u>		
NRIC: <u>S26020002</u>	ANY PASSENGER: <u>N/A</u>	
DATE OF BIRTH: <u>23/10/1966</u>	LICENCE PASSED DATE: <u>11/04/1986</u>	
OCCUPATION: <u>OUTDOOR / INDOOR</u>		
GENDER: <u>MALE</u> / FEMALE		
CONTACT NO: <u>H/P: as above</u>	OFFICE:	HOME:
ADDRESS: <u>Blk 38 Anchorvale Lane #13-35 8544593</u>		
EMAIL: <u>as above</u>		
DOES DRIVER OWNED ANY VEHICLE: <u>NO</u> / IF YES, REG NO:	INSURER:	
RELATIONSHIP: <u>Self Employed</u>		
WEATHER CONDITION: <u>CLEAR</u> / RAINING / OTHERS:		
ROAD SURFACE: <u>DRY</u> / WET / OTHER:		
ANY INJURIES: <u>NO</u> / IF YES, WHO?		
NAME & CONTACT:		
NAME & CONTACT:		
POLICE REPORT: <u>NO</u> / IF YES, WHERE?		
NOTICE OF INTENDED PROSECUTION GIVEN? <u>NO</u> / IF YES, WHO?		
VEHICLE B REG NO: <u>SLL 1981 G</u>	ANY PASSENGERS: <u>1</u>	
NAME OF DRIVER: <u>Celeste Sarimpi Isaac</u>	CONTACT NO: <u>9387 9234</u>	
VEHICLE C REG NO:	ANY PASSENGERS:	
VEHICLE D REG NO:	ANY PASSENGERS:	
VEHICLE E REG NO:	ANY PASSENGERS:	
VEHICLE F REG NO:	ANY PASSENGERS:	
VEHICLE G REG NO:	ANY PASSENGERS:	
ANY WITNESS? IF YES, NAME:	WITNESS CONTACT:	
WAS THERE ANY VIDEO CAPTURE? <u>YES</u> <input checked="" type="checkbox"/> <u>NO</u> <input type="checkbox"/>		
WAS THERE ANY AUDIO RECORDED? <u>YES</u> <input checked="" type="checkbox"/> <u>NO</u> <input type="checkbox"/>		
ACCIDENT SCENE PHOTOS TAKEN? <u>YES</u> / <u>NO</u>		
ACCIDENT PORTION: <u>Rear Portion</u>		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?		<u>YES</u> <input checked="" type="checkbox"/> <u>NO</u> <input type="checkbox"/>
WORKSHOP PARTICULAR: <u>N-51 Automotive Pte Ltd</u>		
CONTACT NO: <u>68420051 / 67440510</u>		
CONTACT PERSON: <u>Steve</u>		
FAX NO: <u>67410510</u>		
WORKSHOP EMAIL: <u>sales@n51.com.sg</u>		



TOKIO MARINE
INSURANCE GROUP

Tokio Marine Insurance Singapore Ltd.
Company Reg. No.: 192300014M (GST Reg No.: M2-0000023-4)
110 Cecil Street #09-01 Tokio Marine Centre Singapore 069046
Tel: 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tms@tokiomarine.com.sg W: www.tokiomarine.com

Member of the
Tokio Marine Group

Certificate of Insurance

FORM MZ300

FOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
FOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
AND ROAD TRANSPORT ACT, 1987 (MALAYSIA)
FOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: MP002974 (Commercial Vehicle)

Index Mark and Registration Number of Vehicle

GBD1313X

Chassis No.: JN1SC2F24Z0855779

Name of Policyholder

TA CHUAN CONSTRUCTION

Effective date of the Commencement of Insurance for the purposes of the Act

24/06/2022 (00:00:00)

Date of Expiry of Insurance

23/06/2023

Persons or Class 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 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.

Limitations as to use*

- 1) Use in connection with the policyholder's business.
- 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.
- 3) Use for social domestic and pleasure purposes.

The policy does not cover:-

- 1) Use for hire or reward or 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.

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 included under these headings.

Whereby 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 II of the Road Transport Act, 1987 (Malaysia).

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

IMPORTANT NOTICE

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 of the date 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).

ADDITIONAL INFORMATION

Account No: 2296DDA

Insurance Plan: Comprehensive Approved Workshop Plan

Amount for total loss or theft: Prevailing Market Value

Policy Excess:	Own Damage Claims	SGD 600.00	(Original Excess : SGD 600.00)
	Additional Excess for Young, Elderly or Inexperience Driver(s)	SGD 2,500.00	(All Claims)
	WindScreen Excess	SGD 100.00	

Financial Interest: NIL

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature