

NATIONAL Assessment Centre Services (call 1 800 441 1111)

NA0284E0002

Date In: 14/04/2023 11:12	Job description	Date & Time Completed	Done by
Ref No: NBR/C7123003868/Y	SAS e-illing		
Veh No: smy/26884	E-mail (with photo, AIC 2012)		
D.O.A: 13/04/2023 16:30	I-Motor Claim Form		
QC (TP) Reporting Only	I-Motor W/O (with photo, AIC 2012)		
	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

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

TP Particulars: Veh No: **SJS 317J** INC ( ) / Non-INC ( )

Owner / Driver: ( ) Tel: ( )

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

Confirmed by: ( ) Date: ( ) Writer: ( )

Insured/Driver Liability: ( ) % (Note: Lic Status (W/O): N: 0-30%, F: 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 & Supply NO info of rep/ret.

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

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

1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

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

Other: \_\_\_\_\_

NA0280/082	Invoice/Repairation Charge	WAS/BID
1) All: Accident Paperwork (\$300)		
2) DA: Damage Assessment (\$1000)	INC (250)	
3) TP: Towing Fee	\$100/\$100	
4) TP: Follow Through Survey	\$120	
5) TP: Follow Through Survey (Emergency)	\$200	
6) TP: Re/Inspection	\$75	
7) NI: New DA, & SMIT Survey	\$140	
8) NIUC Additional Services		
9) NIUC		
*NI: Courtesy Car / Tel Allowance	\$5	
*NI: Repair Coordination	\$10	
*NI: Post Repair Inspection	\$35	
*NI: DV / Collect Excess Coordination	\$1	
*NI: (TP) / TP (Non-INC) / Insurer INC	\$10	
*NI: (TP) / TP	\$10	
Invoice 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	14/04/2023 11:12 (SGT)
Reported by	Owner
Date of Accident	13/04/2023 16:30 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	SLIP ROAD ONTO PIE
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV2688H
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	ANG KIM HUE
NRIC No	SXXXX752J
Email Address	sundaycoachsvc@yahoo.com.sg
Mobile Phone No	(Phone) +65-97321690
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	Private car
Transmission	Auto
CC	1598

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00044352301

### DRIVER

Name of Driver	ANG WEE JIN (HONG WEIREN)
NRIC No	SXXXX947D
Date Of Birth	13/08/1979
Occupation	Indoor

Date Of Driving Pass .....	10/09/1999
Driving experience .....	23 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97321690
Alt. Phone Number .....	-
Email Address .....	sundaycoachsvc@yahoo.com.sg
Address .....	BLK 301 SHUNFU ROAD #02-27
Address complement .....	-
Postcode .....	570305
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 .....	Chain Collision
Weather Conditions .....	Clear
Road Surface .....	Wet

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? .....	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? .....	Yes
Reasons for not uploading a video of the accident .....	WITH OWNER FILE TOO BIG

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number .....	SJS3117J
Vehicle Manufacturer .....	Hyundai
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	LIEW CHIN SAU

NRIC No .....	SXXXX476C
Contact Number .....	(Phone) +65-98636398
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 .....	SNE4257H
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	LOH BOON KEAT
NRIC No .....	SXXXX111C
Contact Number .....	-
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 Authorised 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. The 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.

**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.



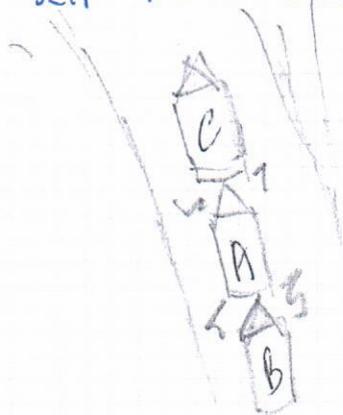
Policyholder's Signature / Date & Time

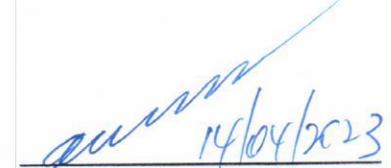
Sketch Plan



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

CTE SLIP ROAD ONTO PIR



  
14/04/2023

Witnessed by Reporting Centre Personnel

- A) SMV 2688H
- B) SJS 3117J
- C) SNE 4257H

**Describe Circumstances of the Accident**

ON 13/4/2023 @ 1030 HRS, I WAS DRIVING SMV 2688H ALONG CTE AND EXITING CTE TO ENTER PIC. WHEN THE TRAFFIC SLOWED DOWN DUE TO THE HEAVY TRAFFIC AND THE CARS STOPPED, AS THE CAR IN FRONT OF ME (SNE 4257 H) STOPPED, MY CAR STOPPED TOO. HOWEVER, THERE WAS A SUDDEN IMPACT FELT, A CAR BEHIND ME (SJS 3117J) COLLIDED INTO MY CAR. THIS CAUSED MY CAR TO MOVE FORWARD AND MY CAR COLLIDED WITH SNE 4257 H, THE CAR IN FRONT OF ME. I AM MAKING THIS REPORT FOR INSURANCE CLAIMS.

**Declaration**

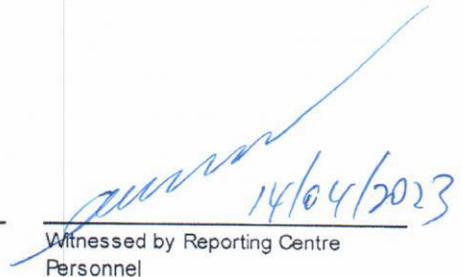
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



14/04/2023

Witnessed by Reporting Centre Personnel

Send/Fax to: \_\_\_\_\_

Submitted: \_\_\_\_\_

**SINGAPORE ACCIDENT STATEMENT**

BASIC INFORMATION			
Date of Accident:	13/4/2023	Time of Accident:	1630
Exact Location:	CPE SLIP ROAD ONTO PIE		

DETAILS OF OWN VEHICLE			
Vehicle Registration No.	SMV 2688H	NRIC / FIN / Passport no:	S1135752J
Name of Registered Owner:	Ang Kim Hwe		
Owner's Email:	Sundaycoachsyc@yahoo.com.sg		
Owner's Address:	BLK 301 SHUNFU RD #02-27 (S) 570301		
Vehicle Make:	TOYOTA	Vehicle Model:	Corolla Altis
Engine Capacity (cc):	1598cc	Transmission:	Auto/Manual
Type of Claim:	Own Damage / <input checked="" type="checkbox"/> Third Party / Reporting Only		
Vehicle Category:	<input checked="" type="checkbox"/> Private / Commercial / Motorcycle / Private Hire		
Name of Insurance Co:	China Taiping		
Type of Policy:	<input checked="" type="checkbox"/> Comprehensive / Third Party / Third Party, Fire & Theft		
Policy Number:	DMPC SNW00044352301		

DRIVER			
Name of Driver:	ANG WEE JIN	<input type="checkbox"/>	same as
NRIC / FIN / Passport no:	S1922947D	Date of Birth:	12/08/1979
Occupation:	<input checked="" type="checkbox"/> Indoor / <input type="checkbox"/> Outdoor	Driving Pass Date:	10-09-1999
Contact Number:	97321690	Gender:	<input checked="" type="checkbox"/> Male / <input type="checkbox"/> Female
Address:	BLK 301 SHUNFU RD #02-27 (S) 570305		
Relationship with Owner:	Owner / Employee / Spouse / Child / Hirer / Other: SON		
Translator Name:		Translator NRIC:	
Translator Contact no:		Translator email:	

GENERAL INFORMATION OF THE ACCIDENT			
Type of Collision:	<input checked="" type="checkbox"/> Chain collision / <input type="checkbox"/> Side Swipe / Front to Rear / Others:		
Weather Condition:	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Raining / Others:	Road Surface:	<input type="checkbox"/> Dry / <input checked="" type="checkbox"/> Wet
Video available:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No YES	Too big to upload. With owner.	
Was anybody injured?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	Police Report Made?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
No. of passenger onboard (including driver):	1		

DETAILS OF OTHER VEHICLE			
	Vehicle 1 C	Vehicle 2 B	Vehicle 3
Vehicle Registration No:	SNE 4257H	SJS 3117J	
Vehicle Make / Model:	TOYOTA	HYUNDAI	
Name of Driver:	LOH BOON KEAT	LIEW CHIN SAN	
NRIC / FIN / Passport no:	S753411C	S7136476 C	
Contact Number:		98636398	
Name of Insurance Co:			

DETAILS OF WITNESS	
Name:	Contact Info:

DETAILS OF INJURED PERSON			
	Person 1	Person 2	Person 3
Name / in which vehicle?:			

Driver's Declaration: I declare that the information given in this report are true and accurate to the best of my collection and I bear full responsibility for any consequences arising from incomplete or inaccurate information that are submitted.

  
Signature of Driver

\_\_\_\_\_  
Date and time

Motor Private Car

MX1F  
R SN  
AN0740A  
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)

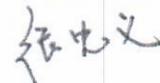
CERTIFICATE No.	DMPCSNW00044352301	Engine No.:	1ZRY331240
		Cha. No.	MR053REH104557322
1. Index Mark and Registration Number of Vehicle	SMV2688H	AUTOSAFE	=====
2. Name of Policy Holder	ANG KIM HUE		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	07/03/2023 (00:00:00)	Named Drivers Ex Sect. I	SS500.00
4. Date of Expiry of Insurance	06/03/2024	Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	SS3,000.00
		Ex Sect. I - Age >= 26	SS500.00
		* Age as at date of accident	
		EX ON WINDSCREEN .	SS100.00
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.			
<p>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.</p>			
6. Limitations as to use.*			
<p>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.</p> <p>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.</p>			
<p>HIRE PURCHASE CO. : HL BANK * 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.</p>			

**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: TATCO ENTERPRISE  
Authorised Officer

  
Authorised Signatory

## Vehicle Registration Details

<i>Vehicle No.</i> <b>SMV2688H</b>	<i>Make/ Model</i> <b>TOYOTA/COROLLA ALTIS 1.6 CVT</b>	<i>Vehicle Scheme</i> -
<i>Current Propellant</i> <b>Petrol</b>	<i>Chassis No.</i> <b>MR053REH104557322</b>	<i>Vehicle Type</i> <b>Passenger Motor Car</b>

### Owner's Details

Owner Name:  
**ANG KIM HUE**

Owner ID Type:  
Singapore NRIC

NRIC/Passport/Company Cert No.:  
**S1135752J**

Registered Address  
**APT BLK 301 SHUNFU ROAD #02-27  
SINGAPORE 570301**

Mailing Address:  
-

Birth Date  
**02 Apr 1955**

### Registration Details

Previous Vehicle No.:  
**SLL6941P**

Effective Date of Ownership:  
**24 Dec 2020**

Original Registration Date:  
**07 Mar 2017**

Registration Date:  
**07 Mar 2017**

No. of Transfers:  
**1**

IU Label No.:  
**1127337269**

### Vehicle Specifications

Engine No.:  
**1ZRY331240**

Chassis No.:  
**MR053REH104557322**

Year of Manufacture:

Primary Colour:

2016

Red

Secondary Colour:

Passenger Capacity:

-

4

Engine Capacity / Power Rating:

Maximum Power Output:

1598 cc / -

90.0 kW ( 120 bhp)

Max Unladen Weight:

Maximum Laden Weight:

1215 kg

1650 kg

Vehicle Attachment 1:

Vehicle Attachment 2:

No Attachment

-

Vehicle Attachment 3:

-

#### Additional Registration Fee (ARF) and COE Information

Open Market Value:

Additional Registration Fee Rate:

\$19,990.00

First \$19,990.00 (100%)

Actual ARF Paid:

Vehicle Lifespan Expiry Date:

\$19,990.00

No Lifespan

OPC Cash Rebate Eligibility:

QP during COE Bidding Exercise:

No

\$49,430.00

COE No.:

COE Expiry Date:

2017030101002764G

06 Mar 2027

COE Category:

COE Registration Category:

A - Car up to 1600cc & 97kW (130bhp)

A - Car up to 1600cc & 97kW (130bhp)

Quota Premium (QP) / Prevailing Quota Premium :

Actual QP Paid

\$49,430.00 / -

\$49,430.00

QP (Regn Cat):

\$49,430.00

#### PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

Yes

06 Mar 2027

Minimum PARF Benefit:  
\$9,995.00

#### Vehicle Emissions Details

CO2 Emission:  
151.00 (g/km)

CEV/VES Rebate Utilised Amount:  
-

CO Emission:  
-

HC Emission:  
-

NOx Emission:  
-

PM Emission:  
-

Message:

To renew the COE, the Prevailing Quota Premium payable is that of Category A.

*Printed on 13 Apr 2023 18:29:39*

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