

**NATIONAL Assessment Centre Services** (call 1-800-555-5555) 51082540000

Date In: <u>24/04/2023 17:01</u>	Job description	Date & Time Completed	Done by
Ref No: <u>NA2301169</u>	SAS e-filing		
Yeh No: <u>GBK TSC</u>	E-mail (within 2hrs, A/C 2hrs)		
D.O.A: <u>20/04/2023 12:20</u>	1-Motor Claim Form		
OC <u>(TP)</u> Reporting Only	1-Motor W/O (within 2hrs, A/C 2hrs)		
	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whist		

Preferred Wksp / INC Assgn Wksp / OW: ( ) Tel: ( ) Fax: ( )

TP Particulars: ( ) Yeh No: SBU 9407 / Non-INC ( )

Owner / Driver: ( ) Tel: ( )

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

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

Insured/Driver Liability: ( ) % (Note-Inst Status (WO): N: 0-30%, F: 21-72%, P: 90-100%)

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: ( ) (INC No: NA2301169) Date & Time Completed: ( ) Done by: ( )

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

2) QC Check / Post Repair Inspection ( )

3) Upload Recovery Photo (Repair Cost > \$3000) ( )

Injury: ( )

Date of Birth: ( )

Address: ( )

City: ( )

State: ( )

Zip: ( )

<u>NA2301169</u>	Invoice Preparation Charge	
1) AR: Accident Passbook (\$300)		
2) DA: Damage Assessment (\$1000)	INC (\$50)	
3) TP: Towing Fee	\$10/\$45	
4) PE: Follow-Through Survey	\$150	
5) PT: Follow-Through Survey (Basic Fee)	\$30	
6) TR: Roadside	\$75	
7) NI: New DA + SMV Survey	\$145	
8) NTUC Additional Fee (\$100)		
9) QC		
*NO: Courtesy Car / Trip Allowance	\$50	
*NO: Repair Coordination	\$15	
*NO: Post Repair Inspection	\$20	
*NO: BY / Collect Excess Coordination	\$1	
*TP (1) / TP (Non-INC) / Travel INC	\$10	
TP Mileage Charge	100	
Invoice Total		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	24/04/2023 12:01 (SGT)
Reported by	Actual Driver
Date of Accident	21/04/2023 12:20 (SGT)
Exact Location of Accident	Woodlands Ave 5, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK75C
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	FU RI XIN TRADING
Company Reg No	5XXXX339W
Email Address	lixiuming1006@gmail.com
Mobile Phone No	(Phone) +65-96481105
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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	1641

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00129192200

### DRIVER

Name of Driver	TOH LYE HOCK
NRIC No	SXXXX016J
Date Of Birth	30/04/1961
Occupation	Outdoor

Date Of Driving Pass .....	19/09/1985
Driving experience .....	37 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96481105
Alt. Phone Number .....	-
Email Address .....	lixiuming1006@gmail.com
Address .....	BLK 294 CHOA CHU KANG #10-109
Address complement .....	-
Postcode .....	751509
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 .....	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 .....	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 AND ATTACHMENT

#### 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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SBU9940T
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	RAYMOND

- Contact Number ..... (Phone) +65-98854365  
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 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 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.

李秀鸣

X FU RI XIN TRADING

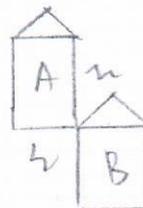
Policyholder's Signature / Date & Time

Sketch Plan

JMS

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

WOODLANDS AVENUE 5.



24/04/2023  
Witnessed by Reporting Centre Personnel

A) GBK 75C

B) SBU 9940T

**Describe Circumstances of the Accident**

- refer to attached statement -

**Declaration**

We declare the foregoing particulars are true in every respect.

李志明

X FU RI XIN TRADING

Policyholder's Signature / Date & Time

MS

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

28/04/2023

Witnessed by Reporting Centre Personnel

Accident Date: 21/04/2023

Accident Time: 12:20 Hr

Location: Woodland Ave 5

Vehicle                      A) GBK 75 C  
   B) SBU 9940 T

On 21/04/2023, at around 12.20pm, I was driving my company vehicle GBK 75 C along Woodland Ave 5. When I was on my lane, suddenly I felt an impact from behind. I get off from my vehicle GBK 75 C and found out there was a vehicle SBU 9940 T hit on my vehicle rear right corner when he was trying to swift into my lane. Nobody was injured. We exchanged contact number and left the scene.

  
\_\_\_\_\_  
Toh Lye Hock

  
21/04/2023

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

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

### SINGAPORE ACCIDENT STATEMENT

BASIC INFORMATION			
Date of Accident:	21/04/2023	Time of Accident:	12:20 Hr
Exact Location:	Woodland Avenue 5		

DETAILS OF OWN VEHICLE			
Vehicle Registration No.	GBK 75C	NRIC / FIN / Passport no:	53 200339 W
Name of Registered Owner:	Fu Ri Xin Trading		
Owner's Email:	Lixiuming1006@gmail.com		
Owner's Address:	509A Wellington Circle #10-109 Singapore 751509		
Vehicle Make:	Nissan	Vehicle Model:	NV200 Acenfa
Engine Capacity (cc):	1461cc	Transmission:	Auto (Manual)
Type of Claim:	Own Damage (Third Party) / Reporting Only		
Vehicle Category:	Private (Commercial) / Motorcycle / Private Hire		
Name of Insurance Co:	China Taiping Insurance (Singapore) Pte Ltd		
Type of Policy:	Comprehensive / Third Party / Third Party, Fire & Theft		
Policy Number:	DMCVSNW00129192200		

DRIVER			
Name of Driver:	Toh Lye Hock	<input type="checkbox"/>	same as
NRIC / FIN / Passport no:	S1479016J	Date of Birth:	30/04/1961
Occupation:	Indoor / Outdoor	Driving Pass Date:	19/09/1985
Contact Number:	96481105	Gender:	Male / Female
Address:	Blk 294 Choa Chu Kang Ave 2 #09-175 Singapore 680294		
Relationship with Owner:	Owner (Employee) / Spouse / Child / Hirer / Other:		
Translator Name:		Translator NRIC:	
Translator Contact no:		Translator email:	

GENERAL INFORMATION OF THE ACCIDENT			
Type of Collision:	Chain collision / Side Swipe / Front to Rear / Others:	Road Surface:	Dry / Wet
Weather Condition:	Clear / Raining / Others:	Video available:	Yes / No
Was anybody injured?	Yes / No	Police Report Made?	Yes / No
No. of passenger onboard (including driver): 01			

DETAILS OF OTHER VEHICLE			
	Vehicle 1	Vehicle 2	Vehicle 3
Vehicle Registration No:	SBU 9940T		
Vehicle Make / Model:	-		
Name of Driver:	Raymond		
NRIC / FIN / Passport no:	-		
Contact Number:	9885 4365		
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 Commercial

MZ300/C

N 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.

DMCVSNW00129192200

Engine No.: K9KE628D694857

Cha. No.: VSKYBAM20U0179255

1. Index Mark and Registration Number of Vehicle

GBK75C

AUTOSAFE  
=====

2. Name of Policy Holder

FU RI XIN TRADING

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

13/11/2022  
(00:00:00)

Excess Sect I . S\$450.00  
EX ON WINDSCREEN . S\$100.00

4. Date of Expiry of Insurance

12/11/2023

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:\*

- (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 Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO. : DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC 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: TATCO ENTERPRISE  
-----  
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

## Enquire Vehicle Transfer Fee

### Vehicle Details

Vehicle No.  
**GBK75C**

Make / Model  
**NISSAN / NV200 ACENTA 1.5 DCI MANUAL**

Vehicle Type :  
**A50 - Goods (Closed) Van/Van Panel (Delivery)**

Vehicle Scheme :  
**Normal**

Propellant :  
**Diesel**

Motor No. :  
**-**

Power Rating :  
**-**

Maximum Laden Weight :  
**2000 kg**

Year Of Manufacture :  
**2019**

Lifespan Expiry Date :  
**12 Nov 2039**

PQP Paid :  
**\$23,050.00**

Road Tax Expiry Date :  
**12 Nov 2023**

Inspection Due Date :  
**12 Nov 2023**

CO2 Emission :  
**131.00 (g/km)**

CO Emission :  
**0.111100 (g/km)**

NOx Emission :  
**0.027070 (g/km)**

Vehicle Attachment 1 :  
**No Attachment**

Chassis No. :  
**VSKYBAM20U0179255**

Engine No. :  
**K9KE628D694857**

Engine Capacity :  
**1461 cc**

Maximum Power Output :  
**-**

Unladen Weight :  
**1340 kg**

Original Registration Date :  
**13 Nov 2019**

COE Category :  
**C - Goods Vehicle & Bus**

COE Expiry Date :  
**12 Nov 2029**

PARF Eligibility Expiry Date :  
**-**

Intended Transfer Date :  
**22 Apr 2023**

CEV/VES Rebate Utilised Amount :  
**-**

HC Emission :  
**0.033840 (g/km)**

PM Emission :  
**0.030000 (mg/km)**