

NATIONAL Assessment Centre Services

(Call 1-800-451-1234)

SN092540000C

Date In: 24/04/2023 15:39	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: XA2801174	E-mail (within 24hrs, A/C 24hrs)		
Veh No: GBE 6750D	1-Motor Claim Form		
D.O.A: 22/04/2023 13:30	1-Motor W/O (Within 24hrs, A/C 24hrs)		
OD: TP: Reporting Only	1-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax (Hand to Owner/Whse)		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars: Vch No: SMF 1487C	INC () / Non-INC ()	
Owner / Driver: (Tel:	
Policy No: () Period: ()	Cover Type: ()	
Confirmed by: (Date:	Time:
Insured/Driver Liability: () % (Note: Inc Status (W/O): 1: 0-30%, 2: 21-70%, 3: 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 E-mail: 6788-0015)	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: () Time: ()

Location: ()

Witness: ()

Police: ()

Insurance: ()

Other: ()

Invoice Preparation Checklist:	
1) All: Accident Proceeding (1300)	
2) DA: Damage Assessment (\$1000) INC (\$50)	
3) TP: Towing Fee (\$100)	
4) PE: Follow-Through Survey (\$100)	
5) PT: Follow-Through Survey (Barter)	
6) TR: Ref: Surveys (\$100)	
7) NI: Haul DA + SMRT Survey (\$100)	
8) NIUC Additional Fee (\$100)	
9) NIUC Additional Fee (\$100)	
10) NIUC Additional Fee (\$100)	
11) NIUC Additional Fee (\$100)	
12) NIUC Additional Fee (\$100)	
13) NIUC Additional Fee (\$100)	
14) NIUC Additional Fee (\$100)	
15) NIUC Additional Fee (\$100)	
16) NIUC Additional Fee (\$100)	
17) NIUC Additional Fee (\$100)	
18) NIUC Additional Fee (\$100)	
19) NIUC Additional Fee (\$100)	
20) NIUC Additional Fee (\$100)	
21) NIUC Additional Fee (\$100)	
22) NIUC Additional Fee (\$100)	
23) NIUC Additional Fee (\$100)	
24) NIUC Additional Fee (\$100)	
25) NIUC Additional Fee (\$100)	
26) NIUC Additional Fee (\$100)	
27) NIUC Additional Fee (\$100)	
28) NIUC Additional Fee (\$100)	
29) NIUC Additional Fee (\$100)	
30) NIUC Additional Fee (\$100)	
31) NIUC Additional Fee (\$100)	
32) NIUC Additional Fee (\$100)	
33) NIUC Additional Fee (\$100)	
34) NIUC Additional Fee (\$100)	
35) NIUC Additional Fee (\$100)	
36) NIUC Additional Fee (\$100)	
37) NIUC Additional Fee (\$100)	
38) NIUC Additional Fee (\$100)	
39) NIUC Additional Fee (\$100)	
40) NIUC Additional Fee (\$100)	
41) NIUC Additional Fee (\$100)	
42) NIUC Additional Fee (\$100)	
43) NIUC Additional Fee (\$100)	
44) NIUC Additional Fee (\$100)	
45) NIUC Additional Fee (\$100)	
46) NIUC Additional Fee (\$100)	
47) NIUC Additional Fee (\$100)	
48) NIUC Additional Fee (\$100)	
49) NIUC Additional Fee (\$100)	
50) NIUC Additional Fee (\$100)	
51) NIUC Additional Fee (\$100)	
52) NIUC Additional Fee (\$100)	
53) NIUC Additional Fee (\$100)	
54) NIUC Additional Fee (\$100)	
55) NIUC Additional Fee (\$100)	
56) NIUC Additional Fee (\$100)	
57) NIUC Additional Fee (\$100)	
58) NIUC Additional Fee (\$100)	
59) NIUC Additional Fee (\$100)	
60) NIUC Additional Fee (\$100)	
61) NIUC Additional Fee (\$100)	
62) NIUC Additional Fee (\$100)	
63) NIUC Additional Fee (\$100)	
64) NIUC Additional Fee (\$100)	
65) NIUC Additional Fee (\$100)	
66) NIUC Additional Fee (\$100)	
67) NIUC Additional Fee (\$100)	
68) NIUC Additional Fee (\$100)	
69) NIUC Additional Fee (\$100)	
70) NIUC Additional Fee (\$100)	
71) NIUC Additional Fee (\$100)	
72) NIUC Additional Fee (\$100)	
73) NIUC Additional Fee (\$100)	
74) NIUC Additional Fee (\$100)	
75) NIUC Additional Fee (\$100)	
76) NIUC Additional Fee (\$100)	
77) NIUC Additional Fee (\$100)	
78) NIUC Additional Fee (\$100)	
79) NIUC Additional Fee (\$100)	
80) NIUC Additional Fee (\$100)	
81) NIUC Additional Fee (\$100)	
82) NIUC Additional Fee (\$100)	
83) NIUC Additional Fee (\$100)	
84) NIUC Additional Fee (\$100)	
85) NIUC Additional Fee (\$100)	
86) NIUC Additional Fee (\$100)	
87) NIUC Additional Fee (\$100)	
88) NIUC Additional Fee (\$100)	
89) NIUC Additional Fee (\$100)	
90) NIUC Additional Fee (\$100)	
91) NIUC Additional Fee (\$100)	
92) NIUC Additional Fee (\$100)	
93) NIUC Additional Fee (\$100)	
94) NIUC Additional Fee (\$100)	
95) NIUC Additional Fee (\$100)	
96) NIUC Additional Fee (\$100)	
97) NIUC Additional Fee (\$100)	
98) NIUC Additional Fee (\$100)	
99) NIUC Additional Fee (\$100)	
100) NIUC Additional Fee (\$100)	

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 15:39 (SGT)
Reported by	Actual Driver
Date of Accident	22/04/2023 13:30 (SGT)
Exact Location of Accident	17 Bedok S Rd, Singapore 460017
Additional Location Information	OPEN CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE6750D
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SH INTEGRATED SERVICES PTE. LTD.
Company Reg No	2XXXXX248Z
Email Address	edwin@sh-integrated.com
Mobile Phone No	(Phone) +65-84186169
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv350
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	2488

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	MZC00328

DRIVER

Name of Driver	ISLAM NAZRUL
Passport No/FIN	GXXXX507K
Date Of Birth	07/03/1984
Occupation	Outdoor

Date Of Driving Pass	14/06/2013
Driving experience	9 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82926567
Alt. Phone Number	-
Email Address	edwin@sh-integrated.com
Address	BLK 17 BEDOK SOUTH ROAD #01-571
Address complement	-
Postcode	460017
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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	Bedok South Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002448999
Alt. Police Station Phone No	(Fax) +65-62446558
Police Station Address	20 Chai Chee Drive Singapore 469045
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230422/2049

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	SMF1487L
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)	-

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.



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

Bedok South
Blk 17 carpark

A - GBE 6750D
B - SMF 1487L

Describe Circumstance of the Accident

Refer to Police Report NO: T/20230422/2049

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

Witnessed by Reporting Centre Personnel

24/04/2023



**SINGAPORE
POLICE FORCE**



T/20230422/2049

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

1 of 3

Report No. T/20230422/2049

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/04/2023 17:10	Vide Report No.:	Station Diary No.: 35
--	------------------	--------------------------

Informant's Particulars

Name of Informant: ISLAM NAZRUL			Address: APT BLK 17 BEDOK SOUTH ROAD #01-571 SINGAPORE 460017	
ID Type / ID No.: FIN NO / G8309507K			Contact No.:	
			Home/Office:	Mobile: 82926567
Nationality: BANGLADESHI			Email:	
Sex: Male	Age: 39	Date of Birth: 07/03/1984	Type of Informant: Driver	
Race: Indian			Language:	
Occupation: SUPERVISOR			Driving Licence Information: Class: 3	Date of Expiry: 13/06/2023

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/04/2023 13:30	Type of Location: Car Park
Location: BEDOK SOUTH ROAD			
Weather: Clear	Road Surface: Dry		
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle	Anyone conveyed by ambulance: No		

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE6750D	Van	NISSAN	NV350 PANEL VAN 2.5 5MT 5DR EURO V	Silver	Slightly Damaged	0
SMF1487L	Car					0



**SINGAPORE
POLICE FORCE**



T/20230422/2049

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

2 of 3

Report No. T/20230422/2049

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ISLAM NAZRUL	ID No.	G8309507K
Related Vehicle	NIL	Contact No.	82926567
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 13/06/2023
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 22/04/2023 at about 0800hrs, I decided to park my company's vehicle number bearing GBE6750D at the Blk 17 Bedok South loading and unloading bay. During the point of time, the said vehicle was still okay. Everything was intact and no damages.

However later at about 1330hrs, when I returned to the said parking lot to retrieve the vehicle, I found out that my company's vehicle front right area close to the headlight sustained scratches. I then noticed that there was a note placed onto the vehicle's windscreen which state a vehicle number SMF1487L. I believed that the said vehicle was the one who is responsible for the company's vehicle damage and it is involved in the said hit and run incident.

I do have in-car camera footage which my company will be retrieving the footage tomorrow.



SINGAPORE
POLICE FORCE



T/20230422/2049

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

3 of 3

Report No. T/20230422/2049

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
G/
SGT 2 WONG SZE SIANG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
SR STAFF SGT NEO ZHI YUAN
Contact No.: 65476079

Signature Of Informant:

Date/Time:
22/04/2023 17:10

Classification Of Case:

NP168

3

VEHICLE NO: GRE 6750D

MAKE & MODEL: Nissan NV350

AUTO/MANUAL

DATE OF ACCIDENT	22 / 04 / 2023	C.C.
TIME OF ACCIDENT	1330 hrs	AM / PM
LOCATION OF ACCIDENT	Bedok South Bk 17 open carpark.	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	SH Integrated Services Pte Ltd	
EMAIL	EDWIN@SH-INTEGRATED.com	OFFICE: — MOBILE: 8418 6169
NRIC	200516248Z	
CLAIM TYPE	OD / THIRTY PARTY / REPORTING ONLY	
FLEET POLICY	YES / NO	
INCURANCE CO.	Tokio Marine	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	MZC00328	
NAME OF DRIVER	AS ABOVE / IF NO ISLAM NAZRUL	
NRIC	G8309507K	
DATE OF BIRTH	07 / 03 / 1984	
ANY PASSENGER	YES / NO	
NAME OF PASSENGER	N/A	
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	14 / 06 / 2013	
GENDER	MALE / FEMALE	
CONTACT NO.	Mobile: 8292 6567 Office: — Home: —	
EMAIL	EDWIN@SH-INTEGRATED.com	
ADDRESS	Bk 17 Bedok South Road #01-571 (S) 40017	
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No: — INSURE: —	
RELATIONSHIP	Employee / If No: —	
WEATHER CONDITION	Clear / Raining / Other: —	
ROAD SURFACE	Dry / Wet / Other: —	
ANY INJURIES	NO / If yes, Who? —	
CONTACT NO.	N/A	
POLICE REPORT	No / If yes, Where? —	
NOTICE OF INTENDED PROSECUTION?	NO / If yes, Who? —	
VEHICLE B NO.	SME 1487 L	Any Passenger: unknown
NAME		
CONTACT NO.		
VEHICLE C NO.		Any Passenger: —
VEHICLE D NO.		Any Passenger: —
VEHICLE E NO.		Any Passenger: —
VEHICLE F NO.		Any Passenger: —
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / NO	
WAS THERE ANY AUDIO RECORDED?	YES / NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / NO	
WHO IS REPORTING	DRIVER / OWNER / BOTH	
Original Language Used	English / Mandarin / Others: —	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO	

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192500014M) (GST Reg No.: M2-000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

Certificate of Insurance

FORM MZ300

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)

Policy No.: MZC00328 (Commercial Vehicle)

1. Index Mark and Registration Number of Vehicle: GBE6750D Chassis No.: JN1MC2E26Z0005744
2. Name of Policyholder: SH INTEGRATED SERVICES PTE LTD
3. Effective date of the Commencement of Insurance for the purposes of the Act: 24/02/2023 (00:00:00)
4. Date of Expiry of Insurance: 23/02/2024
5. 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 of Law 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.

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 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 96 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

We hereby 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 IV of the Road Transport Act, 1987 (Malaysia).

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

IMPORTANT NOTICE

This 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 thereof or, if 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

Insurance Plan:	Comprehensive Approved Workshop Plan	Account No: 1254DDA
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Own Damage Claims Additional Excess for Young, Elderly or Inexperience Driver(s) WindScreen Excess	SGD 600.00 (Original Excess - SGD 600.00) SGD 2,500.00 (All Claims) SGD 100.00
Financial Interest:	NIL	

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature