

NATIONAL Assessment Centre Services

(Call 1-800-441-1111)

908250002

Date In: 15/05/2023 10:49	Job Description: SAS e-Milling	Date & Time Completed:	Done by:
Ref No: X13A/R01230048987	E-mail (with In Mail, A/C 2nd)		
Yell No: 28/04/2023 12:15	1-Motor Claim Form		
D.O.A: 28/04/2023 12:15	1-Motor W/O (with: OD 2nd, 3rd, 4th)		
QC: TP: Reporting Only	1-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whom		

Preferred Wksp / INC Assgn Wksp / QW: (Tel:	Fax:
TP Particulars: Yell No: 96M 293D	INC () / Non-INC ()	
Owner / Driver: (Tel:	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: (Date:	Time:
Insured/Driver Liability: ()	% (Note: Est. Status (WO): 10-0-30%, F: 21-70%, 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 info of repeller.
 () Total Loss Case : 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 Recovery Photo (Repair Cost > \$3000) ()		

Injury: ()	
Date: ()	
Time: ()	
Location: ()	
Weather: ()	
Vehicle: ()	
Driver: ()	
Witness: ()	
Police: ()	
Insurance: ()	
Other: ()	

Invoice Preparation Charge ()	
1) All: Accident Processing ()	
2) DA: Damage Assessment ()	
3) TP: Towing Fee ()	
4) PE: Follow-Up Survey ()	
5) PE: Follow-Up Survey (Survey) ()	
6) TR: Disbursement ()	
7) NI: New DA & Survey ()	
8) NTC: Additional Services ()	
9) QC: ()	
10) NI: Courtesy Car / Tel Allowance ()	
11) NI: Repair Coordination ()	
12) NI: Post Repair Inspection ()	
13) NI: DV / Collect Basic Coordination ()	
14) NI: TP (Inc. INC) ()	
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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	15/05/2023 10:49 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	29/04/2023 12:15 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS CHANGI (BEFORE TAMPINES AVENUE 5)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNG2360U
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	ANG CHENG TIONG
NRIC No	SXXXX764B
Email Address	chengtiong.ang@gmail.com
Mobile Phone No	(Phone) +65-97633217
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	6
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMPPHQ23-003850

DRIVER

Name of Driver	ANG CHENG TIONG
NRIC No	SXXXX764B
Date Of Birth	07/04/1983
Occupation	Outdoor

Date Of Driving Pass	22/05/2007
Driving experience	15 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97633217
Alt. Phone Number	-
Email Address	chengtong.ang@gmail.com
Address	BLK 533 BEDOK NORTH STREET 3 #09-750
Address complement	-
Postcode	460533
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 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	GBM293D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

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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

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Sketch Plan diagram showing two vehicles, A and B, involved in an accident. Vehicle A is a car, and Vehicle B is a van. They are positioned on a road with a dashed line indicating the center. The text 'PIE - CHAUGI' is written vertically next to the vehicles. To the right of the sketch, the following information is handwritten:

A = SN6 2360 4
B = GBM 293 D

Describe Circumstances of the Accident

I was traveling along PIE - Chaiyi, While coming to Tampines Ave 5 Exit, the front Vehicle B Brake and stop, I could not brake on time and Collided onto the rear of Vehicle B.

We declare the foregoing particulars are true in every respect.

Policyholder's Signature _____
Time _____

Driver's Signature (If
& Time

15/05/2023

5

Date of Accident : 29/4/23 Accident Time: 1215 (24-HR-Format)
Accident Place : PIE towards Chaiyi (Before Tampines Hves)
Vehicle. No. (Car Plate No.) : SNB 23604 Make/Model: Mazda 6
Insurance Company : EC Policy No: DMP PHQ 23-003850
Owner or Company Name / IC No. : Ang Cheng Tiong (S8310764B)
Owner or Company Contact No. : _____ Owner's Hp _____ Company Tel _____
DRIVER'S Name / IC No. : Ang Cheng Tiong S(8310764B)
DRIVER'S Date Of Birth : 7/4/1983 DRIVER'S License Pass Date 22/05/2007
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
DRIVER'S Address : Blk 533 Bedok North Street 3 #04-750
DRIVER'S Contact No./ Alt No. : 1) 97633217 2) S(460533)
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : Chengtiong.ang@gmail.com
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): 1
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
Any Injury (If YES, Pls state): NO

Other Party Driver's Particular (if any)

Vehicle. No: <u>GBM 293D</u>	Vehicle. No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:

EQ Insurance Company Limited
5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg
reg no. 1978-00490-N



CERTIFICATE OF INSURANCE
ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

PRIVATE CAR
Comprehensive Classic

Certificate No. : DMPPHQ23-003850

1. Index Mark and Registration Number of Vehicles
SNG2360U

2. Name of Policyholder
Ang Cheng Tjong

3. Effective Date of the Commencement of Insurance for the purpose of the Act
27/04/2023

4. Date of Expiry of Insurance
26/04/2024

5. Person 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.

Classic Plan - EQ authorized workshop only

Form: MX2

Excess:

Insured & Named Driver	S\$600.00 (Section 1 - Own Damage)
Unnamed Driver	S\$1,100.00 (Section 1 - Own Damage)
YEIDR	Additional S\$3,000.00
WindScreen	S\$100.00

EQ Motor Accident
Hotline

6311 3211



* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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 has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

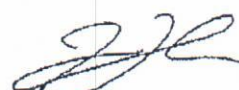
- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) use for any purpose in connection with the Motor Trade

*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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : AUTOTRUST TRADERS PTE LTD

A000008/Lee Kok Leong
Date of Issue : 17/04/2023 19:16


Authorised Signatory
EQ Insurance Company Limited

Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 764B

Vehicle Details

Vehicle No.: SNG2360U
Vehicle to be Exported: No
Intended Deregistration Date: 10 Jun 2023
Vehicle Make: MAZDA
Vehicle Model: MAZDA6 SEDAN 2.0 AT EXECUTIVE EU6
Primary Colour: Grey
Manufacturing Year: 2017
Engine No.: PE20939780
Chassis No.: JM6GL1071H0125466
Maximum Power Output: 121.0 kW (162 bhp)
Open Market Value: \$22,790.00
Original Registration Date: 27 Oct 2017
First Registration Date: 27 Oct 2017
Transfer Count: 1
Actual ARF Paid: \$23,906.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 26 Oct 2027
PARF Rebate Amount: \$16,734.00

Intended COE Rebate Details

COE Expiry Date: 26 Oct 2027
COE Category: E - Open - all except motorcycle
COE Period(Years): 10
QP Paid: \$49,012.00
COE Rebate Amount: \$21,449.00
Total Rebate Amount: \$38,183.00

The information contained herein is correct as at 02 May 2023

OK