

**NATIONAL Assessment Centre Services** (with 12/2011) **SN09236600**

Date In: **06/06/2023 17:19** Job description: **SAS e-filing** Date & Time Completed: Done by:

Ref No: **NB01 in 28005701/Y** E-mail (with file, AIC 2011)

Val No: **SAX 7794R** i-Motor Claim Form

D.O.A: **05/06/2023 09:20** i-Motor W/O (prints: 00, 01, 02, 03, 04)

OS: **7** Reporting Only i-Photo Uploaded

Assessment/Survey Report

Ass't Report by Fax / Hand to Owner/Whse

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

TP Partic/Apt: Veli No: **869 91695** INC ( ) / Non-INC ( )

Owner / Driver: ( ) Tel: Fax:

Policy No: ( ) Period: ( ) Cover Types: ( )

Confirmed by: ( ) Date: Time:

Insured/Driver Liability: ( ) % (Note: Inc Status (VO): 1: 0-30%, 2: 21-79%, 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 later of repair.

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

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

Rentals: ( ) (INC for towing & 2nd car)

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

2) QC Check / Post Repair Inspection ( )

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

Injury: ( )

Other: ( )

**N/A2801657**

Insurance Particulars:

Insured/Owner:

Contract No:

Assigned Portion:

Invoice Preparation Charge	
1) AIC: Accident Processing (\$300)	
2) DA: Damage Assessment (\$1000)	INC (\$50)
3) TP: Towing Fee	\$120
4) PE: Follow Through Survey (\$150)	\$150
5) PE: Follow Through Survey (Basic Fee)	\$50
6) TR: Assessment	\$25
7) NI: New DA + SPRINT Survey	\$45
8) NI: Additional Fee	
9) NI: Country Car / Tst Allowance	\$5
10) NI: Repair Coordination	\$15
11) NI: Post Repair Inspection	\$25
12) NI: DV / Collect Excess Coordination	\$5
13) NI: TP (Non-INC) Vehicle INE	\$10
14) NI: TP (Non-INC) Vehicle INE	\$10
15) NI: TP (Non-INC) Vehicle INE	\$10
16) NI: TP (Non-INC) Vehicle INE	\$10
17) NI: TP (Non-INC) Vehicle INE	\$10
18) NI: TP (Non-INC) Vehicle INE	\$10
19) NI: TP (Non-INC) Vehicle INE	\$10
20) NI: TP (Non-INC) Vehicle INE	\$10

Checked by (Engr-In-Charge):

Signature:

Date:

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 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. 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	06/06/2023 17:19 (SGT)
Reported by	Actual Driver
Date of Accident	05/06/2023 09:30 (SGT)
Exact Location of Accident	Bayfront, Singapore
Additional Location Information	TOWARDS CENTRAL BOULEVARD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX7794R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SUPERTEC LIMOUSINE PTE. LTD.
Company Reg No	2XXXXX332H
Email Address	reporting.gt@gmail.com
Mobile Phone No	(Phone) +65-96998181
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Noah
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	Private hire
Transmission	Auto
CC	1797

#### INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D22MFL0009578

#### DRIVER

Name of Driver	CHOONG YOKE KUAN
NRIC No	SXXXX026F
Date Of Birth	05/05/1967
Occupation	Outdoor

Date Of Driving Pass .....	12/08/2010
Driving experience .....	12 YEARS AND 10 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-91258738
Alt. Phone Number .....	-
Email Address .....	angiekuan67@gmail.com
Address .....	BLK 225 ANG MO KIO AVENUE 1 #02-595
Address complement .....	-
Postcode .....	560225
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SLG9169J
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) ..... -

**INJURED PERSONS DETAILS**

INJURED 1

Name of injured person .....	CHOONG YOKE KUAN
Gender .....	Female
Phone No .....	(Phone) +65-91258738
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SMX7794R
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

**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.

SUPERTEC LIMOUSINE PTE LTD

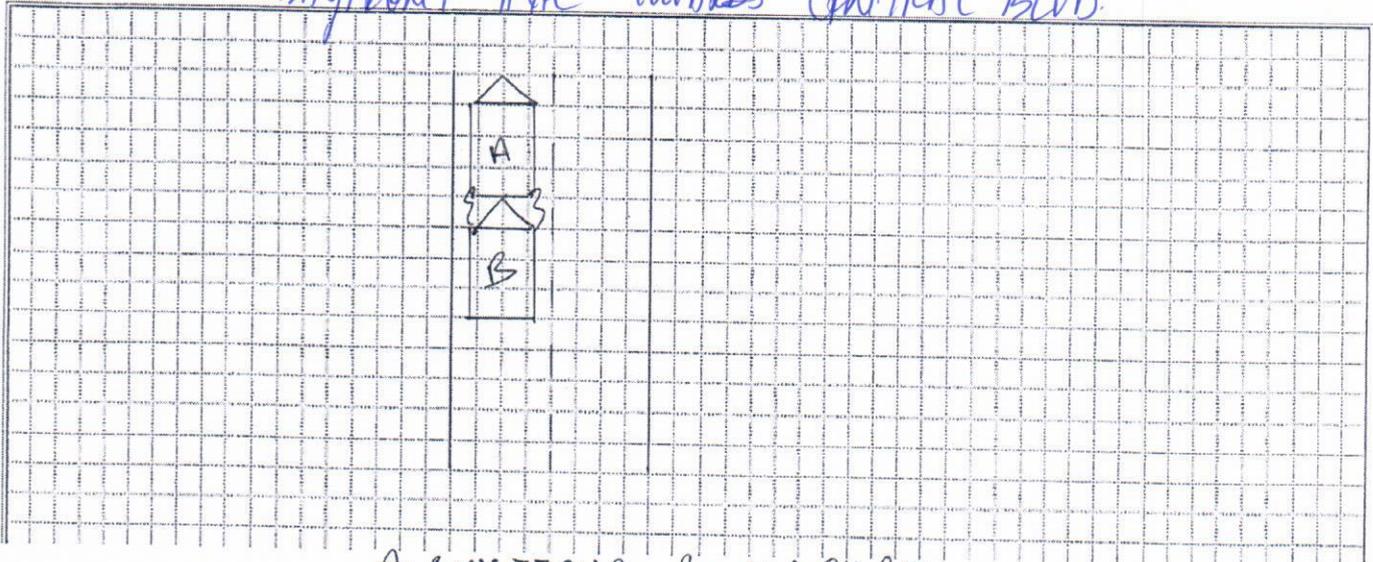
Policyholder's Signature / Date & Time

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

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

Sketch Plan

*Bayfront Ave Towards Central Blvd*



A: SMX7794R B: SLG9169J

Describe Circumstance of the Accident

On the stated date and time, I was waiting for the traffic light to turn green. When the light turned green, I proceeded to move off in a safe manner. As there was a pedestrian crossing the road, I stopped to give way. Suddenly, I felt a huge impact from the rear of my vehicle. I alighted and realised vehicle B had collided into my rear.

Declaration

I/We declare the foregoing particulars are true in every respect.

SUPERTEC LIMOUSINE PTE LTD

\_\_\_\_\_  
Policyholder's Signature / Date & Time

  
\_\_\_\_\_  
Driver's Signature (if driver is not the policyholder) / Date

  
\_\_\_\_\_  
Witnessed by Reporting Centre Personnel

Date of Accident : 05/06/2023 . Accident Time: 0930 . (24-HR-FORMAT)  
 Accident Place : Bayfront Ave towards Central Blvd.  
 Vehicle Reg. No (Car plate No.) : SMX 7794R . cc: 1800 . Vehicle Make/Model: TOYOTA Noah .  
 Insurance Company : India . Policy No. D22MFL0009578  
 Name of Registered Owner :  Company / Individual Supertec Limousine Pte Ltd .  
 ID of Registered Owner : Co Reg No: 200911332H Owner's NRIC No: \_\_\_\_\_  
 OWNER EMAIL ADDRESS: reporting.gt@gmail.com : Co Contact No: 96998181 Owner's Contact No: \_\_\_\_\_  
 DRIVER'S Name : choong Yoke Kuan . DRIVER'S NRIC No: S2663026F .  
 DRIVER'S Date of Birth : 05/05/1967 . DRIVER'S License Pass Date 12/08/2010 .  
 Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: wirer .  
 DRIVER'S Address : 225, Ang Mo Kio Ave 1, #02-595, S(560225) .  
 DRIVER'S Contact No./ Alt No. : 1) 91258738 . 2) \_\_\_\_\_  
 DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)  
 Email Address : angiekuan67@gmail.com .  
 Weather & Road Surface : CLEAR \ DRY \ RAINING & WET \ AFTER RAIN & WET  
 Reporting Type : Reporting Only \ Claim Oth\Party \ Claim Own Insurance  
 Number of Passengers (including Driver): 1 . Name & Gender; \_\_\_\_\_  
 Was the accident reported to the police? YES \  NO  
 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 injuries, if yes(name of the injured person) Choong Yoke Kuan .

**Other Party Driver's Particulars (if any)**

Vehicle Reg No: <u>SLG 9169 J</u> .	Vehicle Reg No: _____
Vehicle Make\Model: _____	Vehicle Make\Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

REPORT FORM EXPLAINED IN : ENGLISH / CHINESE / MALAY / TAMIL OTHERS: \_\_\_\_\_

WHO REPORTED THE ACCIDENT : OWNER /  DRIVER / BOTH



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST Reg. No. M2-0078806 X  
64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711  
Office (65) 63476100 Email insure@ii.com.sg  
Fax (65) 62244174 Website www.ii.com.sg

## 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)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

<b>CERTIFICATE NO.:</b> D22MFL0009578		<b>COVER:</b> Comprehensive
1. Index Mark and Registration Number of Vehicle	: SMX7794R	
Chassis No	: ZWR800449678	
2. Name of Policyholder	: SUPERTEC LIMOUSINE PTE. LTD.	
3. Effective date of Insurance	: 28 Dec 2022	
4. Expiry date of Insurance	: 31 Oct 2023	
5. Persons or Classes of Persons entitled to drive*		
Any person who is driving on the Policyholder's order or with his/their permission. The Hirer.		
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*		
Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social, domestic, pleasure purposes and business purposes of the Policyholder or of any person to whom the vehicle is hired		
<b>The Policy does not cover</b>		
(1) Use for hire or reward (other than when the vehicle is hired for the carriage of passengers under Z10/Z11 for hire and reward).		
(2) Use for racing, pace-making, reliability trial, or speed-testing.		
(3) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.		
(4) 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.		
Excess Section I WITHIN SINGAPORE	: SGD	
Excess Section I OUTSIDE SINGAPORE	: SGD	
Excess Section II WITHIN SINGAPORE	: SGD	
Excess Section II OUTSIDE SINGAPORE	: SGD	
Windscreen Excess	: SGD	
Hire Purchase Company	: Tai Thong Lee Trading Pte. Ltd.	
SUNROOF EXCESS: \$200.00		
FOR DRIVERS BELOW 22 YEARS OLD OR ABOVE 75 YEARS OLD &/OR WITH LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN ADDITIONAL EXCESS OF \$1,500.00 ON SECTION I & II (SEPARATELY) WILL BE APPLICABLE.		
PRIVATE HIRE SERVICE (USE FOR HIRE & REWARD) - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE ONLY.		
FOR SOCIAL, DOMESTIC & LEISURE PURPOSES ONLY - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE AND WEST MALAYSIA.		
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).		
Agent/Broker	: F000002/GENRIVER FINANCIAL PTE. LTD.	For India International Insurance Pte Ltd
Date of Issue	: 04/01/2023 11:43:31	
MZ406 - Hire Car (G/R)		
		 Nalini Venugopal MD & CEO