

NATIONAL Assessment Centre Services (wef 1 Jan'05)

Date In: 07/06/2023	Job description	Date & Time Completed	Done by
Ref No: NA/LIP230058371J	SAS e-filing		
Veh No: SL49807C	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 06/06/2023	i-Motor Claim Form		
OD / TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:	Veh No:	INC () / Non-INC ()
Owner / Driver: (Tel: ()
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: (Date:	Time: ()
Insured/Driver Liability: ()	[Note-Est. Status (WO): N: 0-20%; P: 21-79% 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 & Strictly NO refer of repairer.

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

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

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury :

Date/Time	Actions

NA 2301672	Invoice Preparation Checklist		Am't (\$)	Ar
			1st Bill	Ad
Claimant's Particulars:-	1) AR : Accident Reporting (\$30);			
	2) DA : Damage Assessment (\$100); INC (\$80)			
Driver/Owner:	3) TF : Towing Fee \$40/\$45			
	4) FT : Follow-Through Survey \$120			
Contact No:	5) FT : Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
Damaged Portion:	6) TR : Re-inspection \$75			
	7) N1 : Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
QC Checked by (Engr-In-Charge):	ON*			
	*N5: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
Auditors' Comments:-	TP (N11) : TP (Non INC) against INC \$20			
Cat. 1:	9) N12: Idac Mobile \$30			
Cat. 2 / 3:	Invoice dated	Fee Charged		
	Invoice dated	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	07/06/2023 11:50 (SGT)
Reported by	Actual Driver
Date of Accident	06/06/2023 15:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLOCK 505 TAMPINES CENTRAL 1 CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU9807C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	PHUA MEI YUN (PAN MEIYUN)
NRIC No	SXXXX599A
Email Address	victorloh7@gmail.com
Mobile Phone No	(Phone) +65-96185901
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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	1797

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SI22V14982/VPC/R05

DRIVER

Name of Driver	LOH KOK WEE (LUO GUOWEI)
NRIC No	SXXXX127Z
Date Of Birth	17/10/1986
Occupation	Indoor

Date Of Driving Pass	23/08/2005
Driving experience	17 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88884794
Alt. Phone Number	-
Email Address	victorloh7@gmail.com
Address	APT BLK 518C TAMPINES CENTRAL 7
Address complement	# 06-60
Postcode	523518
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Collided into Parked Vehicle
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 THE ATTACHED STATEMENT

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	GBC8234A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	FRANCIS SOOSAIRAJ
Passport No/FIN	GXXXX635U

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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- 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.

on behalf
6 June 23, 1655

Policyholder's Signature / Date & Time

6 June 23, 1655 hrs

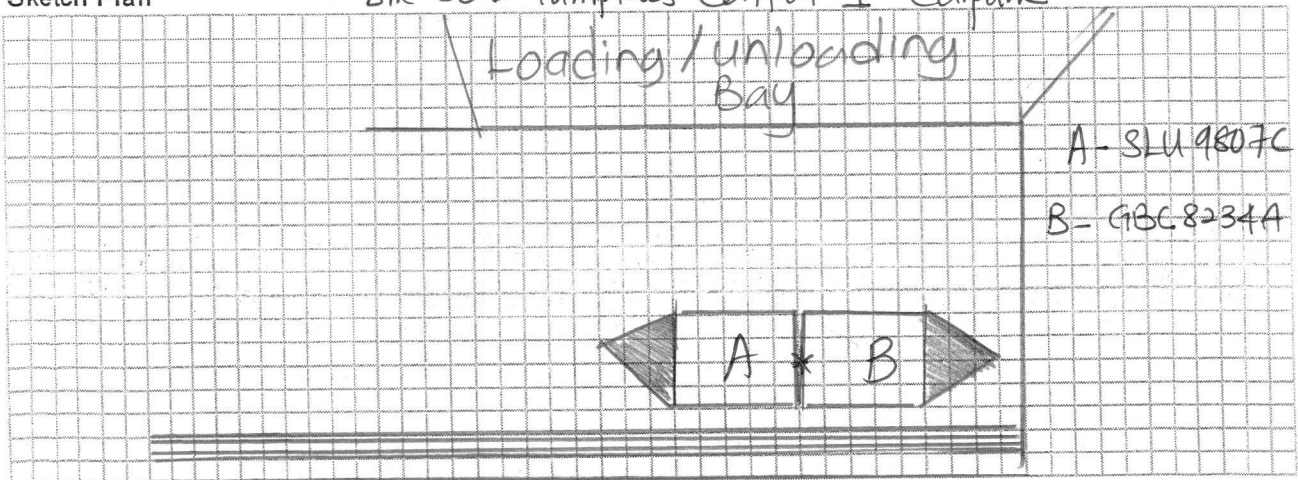
Driver's Signature (If driver is not the policyholder) / Date & Time

7/6/2023

Witnessed by Reporting Centre Personnel

Sketch Plan

Blk 505 Tampines Central 1 Carpark





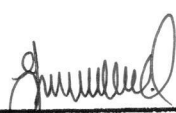
Describe Circumstance of the Accident

On 6 June 2023 at approximately 3pm, I was driving within BLK 505
Tanjines Ctrl 1 Carpark, near loading/unloading bay. ^{After} ~~while~~ I attempted to
make a 3-point turn in front of the loading bay, I was about to
move off towards the carpark gantry and felt a ^{sudden} impact from
the rear of my vehicle. After which, I proceeded to check on the
situation & realised that the vehicle (GBC 8234A) had reversed
& bumped onto my vehicle's boot area. At the point of time,
the vehicle had already moved forward from the collision (impact
point). The driver particulars are:

1) Francis Soosairaj
Licence no: G7648635U

Declaration

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

On behalf		
		
6 June 23, 1655hrs	6 June 23, 1655hrs	7/6/2023
Policyholder's Signature / Date & Time	Actual Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT: 06/06/2023	TIME OF ACCIDENT: 15:00 pm
VEHICLE NO: SLU 9807C	TRANSMISSION: <u>AUTO</u> / MANUAL
MAKE & MODEL: Toyota Prius Hybrid 1.8	LOCATION: Blk 505 Tampines Central 1 carpark
EXACT PURPOSE USE DURING ACCIDENT: EMPLOYMENT / <u>PRIVATE USE</u> / PRIVATE HIRE	CLAIM TYPE: <u>OD</u> / THIRD PARTY / REPORTING ONLY
INSURANCE COMPANY: Liberty	POLICY NO: SI22X14982/vpc/p05
TYPE OF COVERAGE:	VEHICLE TYPE:
<u>COMPREHENSIVE</u> / THIRD PARTY / THIRD PARTY & THEFT	<u>(SALOON)</u> / COUPE/MPV/VAN/LORRY/MOTORCYCLE)
NAME OF OWNER: Phua Mei Yun (pan mei yun)	NRIC: S8731599A
ADDRESS: Apt Blk 518C Tampines Central 7 # 06-60, 8523518	CONTACT NO: 9618 5901
EMAIL ADDRESS: victorloh7@gmail.com	VIDEO RECORDING: YES / <u>NO</u>
NAME OF DRIVER: AS ABOVE / IF NO: loh kok wee (Luo Guowei)	NRIC: <u>S86301272</u> CONTACT NO: <u>8888 4794</u>
DRIVER OWNER RELATIONSHIP: <u>spouse</u>	PASSENGER: <u>0</u> MALE () FEMALE ()
DATE OF BIRTH: 17 / 10 / 1986	DRIVING PASSING DATE: 23 / 08 / 2005
OCCUPATION: <u>INDOOR</u> / OUTDOOR	ADDRESS: Apt Blk 518C Tampines Central 7 # 06-60, 8523518
ANY INJURIES: <u>NO</u> , IF YES: _____	POLICE REPORT: <u>NO</u> / IF YES WHERE? _____
WEATHER CONDITION: <u>CLEAR</u> / RAINING / OTHERS	ROAD SURFACE: <u>DRY</u> / WET / OTHERS
VEHICLE B REG NO: <u>GBC 8234A</u>	VEHICLE C REG NO: _____
DRIVER NAME: <u>Francis soo sairaj</u>	DRIVER NAME: _____
NRIC: <u>G76486354</u>	NRIC: _____
CONTACT: _____	CONTACT: _____
VEHICLE D REG NO: _____	ANY WITNESS? NO, IF YES: _____
DRIVER NAME: _____	NAME: _____
NRIC: _____	CONTACT: _____
CONTACT: _____	
WAS NOTICE OF PROSECUTION GIVEN? (YES / <u>NO</u>) IF YES, AGAINST WHOM: _____	WERE SEAT BELTS WORN? <u>YES</u> / NO WERE INJURY CONVEYED BY AMBULANCE: YES / NO

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189); Motor Vehicles (Third-Party Risks And Compensation) Rules, 1960; Road Transport Act, 1987; Road Transport (Amendment) Act 2019; The Motor Vehicles (Third Party Risks) Rules, 1959

Name of Policyholder: PHUA MEI YUN (PAN MEIYUN)		Certificate No.: SI22V14982/ VPC / R05
Date of Issue: 04 Nov 2022	Effective Date of Commencement: 19 Dec 2022 00:00	Date of Expiry: 18 Dec 2023 23:59
Registration No.: SLU9807C	Chassis No.: ZVW508067575	Type of Certificate: MX1

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.

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.

Limitations as to use:

Use only 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 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.



For and on behalf of
LIBERTY INSURANCE PTE LTD
 Approved Insurers

For Information Only:

Coverage(s):	Comprehensive, Unlimited Windscreen, NCD Protection
Sum Insured:	MARKET VALUE AT THE TIME OF LOSS
Excess:	Section I - Named Drivers S\$500, Section I - Unnamed Drivers S\$1000, Additional Excess for Young, Elderly & Inexperienced Drivers S\$3000, Windscreen Excess S\$100
Name of Finance Company:	UNITED OVERSEAS BANK LIMITED
Name of Producer:	VENTURE CREDIT PTE LTD (A1451-2)

SCSL/B2BAAMT/SI22V14982/04-Nov-2022/MotorCI/v1.0