

NATIONAL Assessment Centre Services (wef 1 Jan 06)

Date In: 08/06/2023	Job description	Date & Time Completed	Done by
Ref No: NA/HP23005853/d4	SAS e-filing		
Veh No: 8LL1083Z	E-mail (within 8hrs. AIC 2hrs)		
D.O.A: 07/06/2023 13:27	i-Motor Claim Form		
OD / TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: 8L7 869M

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%. 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 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

NA2301682

Invoice Preparation Checklist

Am't (\$)
1st Bill

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Cat. 1:

Cat. 2 / 3:

1) AR : Accident Reporting (\$30);		
2) DA : Damage Assessment (\$100); INC (\$80)		
3) TF : Towing Fee \$40/\$45		
4) FT : Follow-Through Survey \$120		
5) FT : Follow-Through Survey (Resurvey) \$30		
For claiming against INC Only (wef 10 Jan 2005)		
6) TR : Re-inspection \$75		
7) N1 : Idac DA + SMRT Survey \$160		
8) NTUC Additional Services:-		
ON*		
*N5: Courtesy Car / Tpt Allowance \$5		
*N6: Repair Co-ordination \$10		
*N7: Post Repair Inspection \$25		
*N8: DV / Collect Excess Coordination \$5		
TP (N11): TP (Non INC) against INC \$20		
9) N12: Idac Mobile \$0		
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	08/06/2023 15:47 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	07/06/2023 13:27 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG AYE/MCE 6KM LANE 2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL1083Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM YOKE BENG
NRIC No	SXXXX866J
Email Address	benlimyb@gmail.com
Mobile Phone No	(Phone) +65-98222736
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SD23V00896/VPC/R06

DRIVER

Name of Driver	LIM YOKE BENG
NRIC No	SXXXX866J
Date Of Birth	16/08/1958
Occupation	Indoor

Date Of Driving Pass	12/07/1977
Driving experience	45 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98222736
Alt. Phone Number	-
Email Address	benlimyb@gmail.com
Address	APT BLK 208 CHOA CHU KANG CENTRAL
Address complement	# 08-74
Postcode	680208
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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	SLT869M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ZHONG YI
NRIC No	SXXXX917I

Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBG1254S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LIM MENG HAN
NRIC No	SXXXX100F
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SJW9601S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	JIANG JIBO
NRIC No	SXXXX598A
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 Authorised 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. 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;

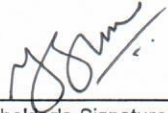
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

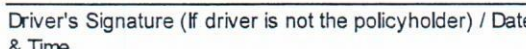
(collectively the "Purposes")

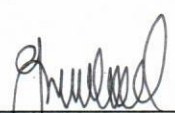
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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

8/6/23


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


Witnessed by Reporting Centre Personnel

8/6/2023

Sketch Plan

Along AVE / MCE 6KM Lane 2

— please Refer to the attached statement —

A - SLL1083Z

B - SLT869M

C - GBG1254S

D - SJW9601S

Describe Circumstance of the Accident

Please Refer to the attached
statement


Declaration

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


Policyholder's Signature / Date & Time

8/6/23

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


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

8/6/2023

Road Accident along AYE/MCE 6km Lane 2 (Collision of 4 vehicles) on 7 Jun 2023 at 1327hrs.

On 7 Jun 20203 at 1327hrs, I was driving my Honda Vezel SLL1083Z along AYE/MCE 6km Lane 2 (towards city). At that time, I was driving behind a Peugeot 3008 SLT869M driven by Mr Zhong Yi, IC number S8701917I about one and half to two car length (speed about 70kph). There is also tree pruning at the outermost left where vehicles are diverting out. Vehicle SLT869M came to a very sudden complete stop in front of me, by then I was not able to brake in time and hit the rear of the vehicle. Coming out of my car, I realised SLT869M hits the rear of a FIAT van GBG1254S driven by Mr Lim Meng Han, IC number S7909100F also at dead stop. GBG1254S actually hit the rear of another Toyota Vios SJW9601S driven by Jiang Jibo, IC number S2644598A who sudden braked because of a pickup suddenly cuts into his path and braked. SJW9601S was stopped at about four car length in front of GBG 1254S. The pickup was not hit and took off without stopping.

On examining, Puegeot 3008 car suffered rear bumper damaged while my vehicle bonnet damaged, complete front guard and grill damaged.

Sliproad to Alexandra

 **SJW9601S (D)**

 **GBG1254S (C)**

 **SLT869M (B)**

 **SLL1083Z (A)**

To Normanton Park


8/6/23

IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 07/06/2023	TIME OF ACCIDENT : 13:27 pm
VEHICLE NO : SLL 10832	TRANSMISSION : <u>AUTO</u> / MANUAL
MAKE & MODEL : Honda Vezel	LOCATION : Along AYE / MCE Glem Lane 2
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 : SD23V00896/vpc/R06
TYPE OF COVERAGE : <u>COMPREHENSIVE</u> / THIRD PARTY / THIRD PARTY & THEFT	VEHICLE TYPE : <u>(SALOON)</u> / COUPE/MPV/VAN/LORRY/MOTORCYCLE
NAME OF OWNER : Lim Yoke Beng	NRIC : S1290866J
ADDRESS : Apt B1k 208 Choa Chu Kang Central #08-74, S 680208	CONTACT NO : 98222736
EMAIL ADDRESS : benlimyb@gmail.com	VIDEO RECORDING : YES / NO
NAME OF DRIVER : <u>AS ABOVE</u> / IF NO :	NRIC : _____ CONTACT NO : _____
DRIVER OWNER RELATIONSHIP : <u>owner</u>	PASSENGER : _____ MALE () FEMALE ()
DATE OF BIRTH : 16 / 08 / 1958	DRIVING PASSING DATE : 12 / 07 / 1977
OCCUPATION : <u>INDOOR</u> / OUTDOOR	ADDRESS : _____
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>SLP 869M</u>	VEHICLE C REG NO : <u>GBG 1254S</u>
DRIVER NAME : <u>zhong yi</u>	DRIVER NAME : <u>Lim Meng Han</u>
NRIC : <u>88701917I</u>	NRIC : <u>57909100F</u>
CONTACT : _____	CONTACT : _____
VEHICLE D REG NO : <u>SJW 9601S</u>	ANY WITNESS ? <u>NO</u> , IF YES :
DRIVER NAME : <u>jiang Jibo</u>	NAME : _____
NRIC : <u>S2644598A</u>	CONTACT : _____
CONTACT : _____	
WAS NOTICE OF PROSECUTION GIVEN? (YES / NO) IF YES, AGAINST WHOM : _____	WERE SEAT BELTS WORN ? : <u>YES</u> / NO
	WERE INJURY CONVEYED BY AMBULANCE : YES / <u>NO</u>

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:

LIM YOKE BENG

Date of Issue:

06 Jan 2023

Registration No.:

SLL1083Z

Effective Date of Commencement:

14 Feb 2023 00:00

Chassis No.:

RU11204118

Certificate No.:

SD23V00896/ VPC / R06

Date of Expiry:

13 Feb 2024 23:59

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

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:

STANDARD CHARTERED BANK (SINGAPORE) LIMITED

Name of Producer:

VENTURE CREDIT PTE LTD (A1451-2)