

# NATIONAL Assessment Centre Services (wef 1 Jan'06)

Date In: # 28 / 06 / 2023	Job description	Date & Time Completed	Done by
Ref No: NA/C123006561 / d4	SAS e-filing		
Veh No: YP1985X	E-mail (within 3hrs, AIC 2hrs)		
D.O.A : 27/06/2023 08:50	i-Motor Claim Form		
OD / TP / <u>Reporting Only</u>	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: 89C 3277 A	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

NA2301935	Invoice Preparation Checklist	Amf (\$)	Ac
Claimant's Particulars :	1) AR : Accident Reporting (\$30);	1st Bill	Ac
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF : Towing Fee \$40/\$45		
Damaged Portion:	4) FT : Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT : Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 1:	6) TR : Re-inspection \$75		
Cat. 2 / 3:	7) N1 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*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 \$30		
	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	28/06/2023 13:23 (SGT)
Reported by	Actual Driver
Date of Accident	27/06/2023 08:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	KRANJI EXPRESSWAY
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP1985X
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DOUBLE-TRANS PTE LTD
Company Reg No	1XXXXX888E
Email Address	optionsgarage@hotmail.com
Mobile Phone No	(Phone) +65-82054488
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Canter
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 - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2998

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNA00006712303

#### DRIVER

Name of Driver	RAJENDRAN PRADEEP
Passport No/FIN	GXXXX899L
Date Of Birth	14/05/1991
Occupation	Outdoor

Date Of Driving Pass	13/03/2014
Driving experience	9 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94458121
Alt. Phone Number	-
Email Address	optionsgarage@hotmail.com
Address	4 SUNGEI KADUT STREET 2
Address complement	-
Postcode	729226
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

#### 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)	4
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	-

#### PASSENGER 1

Name	UNKNOWN
Gender	Male

#### PASSENGER 2

Name	UNKNOWN
Gender	Male

#### PASSENGER 3

Name	UNKNOWN
Gender	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Choa Chu Kang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007659999
Alt. Police Station Phone No	(Fax) +65-67644104
Police Station Address	No 20 Choa Chu Kang Street 52 #01-02 Singapore 689286
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230627/2062



## 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 ..... SGC3277A  
 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) ..... -

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number ..... SMC2109M  
 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) ..... -

## DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number ..... SLL9093S  
 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.
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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;

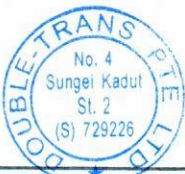
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

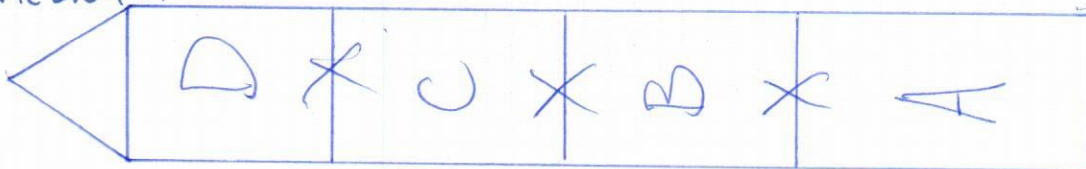
Sketch Plan

A- YP1985X

D- SLL9093S

B- SGC 3277A

C- SMC 2109 M



KRANJI EXPRESSWAY.



Describe Circumstances of the Accident

REFER TO POLICE REPORT.

T/20230627/02062.

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 & Time

  
28/06/2023

Witnessed by Reporting Centre Personnel



# SINGAPORE POLICE FORCE



T/20230627/2062

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

1 of 3

Report No. T/20230627/2062

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 27/06/2023 15:43	Vide Report No.:	Station Diary No.: 52
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**Informant's Particulars**

Name of Informant: RAJENDRAN PRADEEP			Address:		
ID Type / ID No.: FIN NO / G2281899L			Contact No.: Home/Office: Mobile: 94458121		
Nationality: INDIAN			Email:		
Sex: Male	Age: 32	Date of Birth: 14/05/1991	Type of Informant: Driver		
Race: Indian			Language:		
Occupation: DRIVER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/06/2023 08:50	Type of Location: Straight Road
Location:  KRANJI EXPRESSWAY				
Weather: Heavy rain		Road Surface: Wet		
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
SGC3277A	Car				Seriously Damaged	0
SLL9093S	Car				Slightly Damaged	0
SMC2109M	Car				Slightly Damaged	1
YP1985X	Lorry				Slightly Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20230627/2062

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

2 of 3

Report No. T/20230627/2062

**CONTINUATION OF REPORT**

**Brief Details.**

On the 27/06/2023 at around 0853hrs I was on KJE highway on the most left lane heading towards PIE on my company vehicle YP1985X. At that time there was a jam on the KJE highway, and it was raining heavily. All the sudden the vehicle in front of my suddenly braked and when I noticed it, I quickly applied my breaks too. However, I was not able to stop in time due to the wet road and ended up colliding with the vehicle (SGC3277A) in front of me.

I got off my vehicle and made a check on everyone involved in the incident and they affirmed that no one was injured due to the incident. Next, I make a check on my company vehicle and noticed that the front cover of the lorry is broken and cannot be closed back.

There is a total of 4 vehicle involved in this incident. SLL9093S was in the front, followed by SMC2109M, followed by SGC3277A and lastly, I was the last vehicle in the rear.

There are police (J/20230627/00340) and ambulance that had attended to the scene.





**SINGAPORE  
POLICE FORCE**



T/20230627/2062

3 of 3

Report No. T/20230627/2062

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

**CONTINUATION OF REPORT**

Signature of Officer Recording The Report:  
J/  
SGT 2 Patrick Ang Juin Hun

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
SR STAFF SGT Ahmad Syafiq Bin Harris  
Contact No.: 65476201

Signature Of Informant:

Date/Time:  
27/06/2023 15:43

Classification Of Case:

NP168

VEHICLE NO: YP 1985X.

MAKE & MODEL: MITSUBISHI CANTER ☒ AUTO ☐ MANUAL

DATE OF ACCIDENT	27 / 06 / 2023	C.C.
TIME OF ACCIDENT	0800	AM / PM
LOCATION OF ACCIDENT	KRANJI EXPRESSWAY	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	DOUBLE - TRANS PTE LTD	
EMAIL	OPTIONS GARAGE@hotmail.com	OFFICE: MOBILE: 8205 4488.
NRIC	1990018882	
CLAIM TYPE	OD / THIRTY PARTY / <u>REPORTING ONLY</u>	
FLEET POLICY	YES / <u>NO</u>	
INCURANCE CO.	CHINA TAIPING	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	DMCVSNA00006712303.	
NAME OF DRIVER	AS ABOVE / IF NO: RAJENDRAN PRADEEP	
NRIC	G22818992.	
DATE OF BIRTH	14 / 05 / 1991	
ANY PASSENGER	<u>YES</u> / NO	A(3) male.
NAME OF PASSENGER		
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	13 / 03 / 2014	
GENDER	MALE / FEMALE	
CONTACT NO.	Mobile: 9445 8121 Office: Home:	
EMAIL		
ADDRESS	4 SUNGEI KADUT STREET 2 S729226	
DOES DRIVER OWN OTHER VEHICLES?	<u>NO</u> / If yes, Reg No: INSURE:	
RELATIONSHIP	Employee / If No:	
WEATHER CONDITION	Clear / Raining / Other: <u>HEAVY</u>	
ROAD SURFACE	Dry / Wet / Other:	
ANY INJURIES	<u>NO</u> / If yes, Who?	
CONTACT NO.		
ROLICE REPORT	No / If yes, Where?	
NOTICE OF INTENDED PROSECUTION?	<u>NO</u> / If yes, Who?	
VEHICLE B NO.	SAC 3277 A	Any Passenger:
NAME		
CONTACT NO.		
VEHICLE C NO.	SME 2109 M	Any Passenger:
VEHICLE D NO.	SL 9093S	Any Passenger:
VEHICLE E NO.		Any Passenger:
VEHICLE F NO.		Any Passenger:
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / <u>NO</u>	
WAS THERE ANY AUDIO RECORDED?	YES / <u>NO</u>	
SCENE ACCIDENT PHOTOS TAKEN?	YES / <u>NO</u>	
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 / <u>NO</u>	





中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

**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)

MZ300/C

R SN

BR0057A

Cov. Type: C

CERTIFICATE No.

DMCVSNA00006712303

Engine No.: 4P10C05953

Cha. No.: FEB21EA20297

1. Index Mark and Registration  
Number of Vehicle

YP1965X

2. Name of Policy Holder

DOUBLE-TRANS PTE LTD

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment

01/01/2023

(00:00:00)

Excess Sect I.

S\$500.00

EX ON WINDSCREEN.

S\$100.00

4. Date of Expiry of Insurance

31/12/2023

5. Persons or Classes 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.

陳保險經紀私營有限公司  
TAN INSURANCE BROKERS PTE LTD  
3A/5A Aljunied Street, Chenn Leann Building  
Singapore 199896  
www.tb.com.sg  
Tel: (65) 6742 6766 Fax: (65) 6742 6669

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 Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover:

- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: DBS BANK LTD AS HP OWNER

\* 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.

**/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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Tan Jia Hwei

Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com