

NATIONAL Assessment Centre Services (wef 1 Jan'06)

Date In: 04/07/2023	Job description	Date & Time Completed	Done by
Ref No: NAEGI23006721 /d4	SAS e-filing		
Veh No: SNB 31635	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 03/07/2023 16:00	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: FBU 7057G	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

NA2302008

Invoice Preparation Checklist		Am't (\$)	Am't (\$)
		1st Bill	Add E
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:-			
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		

Claimant's Particulars:-
Driver/Owner:
Contact No:
Damaged Portion:
QC Checked by (Engr-In-Charge):
Auditors' Comments:-
Cat. 1:
Cat. 2 / 3:

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	04/07/2023 17:48 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	03/07/2023 16:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG WOODLANDS AVE 12 TOWARDS WOODLANDS AVE 10
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNB3163S

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KOH ENG WAN
NRIC No	SXXXX876G
Email Address	soon1729@gmail.com
Mobile Phone No	(Phone) +65-90050001
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Freed
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	1496

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMPG22010571

DRIVER

Name of Driver	KOH ENG WAN
NRIC No	SXXXX876G
Date Of Birth	26/03/1961
Occupation	Indoor

Date Of Driving Pass	06/10/1988
Driving experience	34 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90050001
Alt. Phone Number	-
Email Address	soon1729@gmail.com
Address	54 PUNGGOL WALK
Address complement	# 10-12
Postcode	828832
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver	SLE1393R
Insurance Company of Other Vehicle Owned by Driver	EQ Insurance Company Ltd

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
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)	2
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	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230703/2103

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	FBU7057G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	LATIB BIN PARMAN
NRIC No	SXXXX128Z
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	SLK1917Z
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	SFL5401J
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)	-

Describe Circumstance of the Accident

please refer to the attached
police Report
- 7/20230703/2103

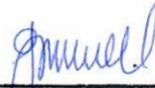
Declaration

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

 4/7/23

Policyholder's Signature / Date & Time

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

 4/7/2023

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



**SINGAPORE
POLICE FORCE**



T/20230703/2103

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

2 of 4

Report No. T/20230703/2103

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNB3163S	SHC INSURANCE PTE. LTD.	DMPG22010571	13/08/2022	12/08/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	Latib Bin Parman	ID No.	S0175128Z	
Related Vehicle	FBU7057G (Motorcycle)	Contact No.	NIL	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	
Driver				
Name	KOH ENG WAN	ID No.	S1509876G	
Related Vehicle	SNB3163S (Car)	Contact No.	90050001	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	

Brief Details.

I am the driver of SNB3163S.

On 03/07/2023, at about 1600hrs, I was driving along Woodlands Ave 12 towards Woodlands Ave 10.

I was driving along the left lane of Woodlands Ave 12 with 3 passengers in my car. Subsequently, on the right lane, the front of a red colour car (SLK1917Z) had collided into the rear of a black colour car (SFL5401J). One motorcycle (FBU7057G) was riding behind the red colour car. The rider was unable to stop in time and collided into the rear of the red colour car. The motorcycle had a pillion.

The motorcycle then fell towards his left side and hit the right side of my car. I immediately stopped my vehicle and alighted to make a check on the vehicles, the drivers, and the passengers.

The rider of the motorcycle informed that he had scratches on his leg but he did not informed that he needed ambulance. He did not request for my particulars.



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T/20230703/2103

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3 of 4

Report No. T/20230703/2103

CONTINUATION OF REPORT

The drivers and passengers of the other vehicles informed that they are not injured.

I made a check my vehicle and there are scratches and dent on the right side of my vehicle, from the side mirror to the passenger seat's door. My right side mirror was also damaged.

I called my insurance company and they informed that I just needed the particulars of the motorcyclist and the photos of the scene. Subsequently, I may leave as no one was injured.

After about 30mins, I left the scene as no one was injured.

Subsequently, I received a call from a Traffic Police Investigator who informed that a police report needs to be lodged.

As such, I came to lodge a police report.



**SINGAPORE
POLICE FORCE**



T/20230703/2103

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

4 of 4

Report No. T/20230703/2103

CONTINUATION OF REPORT

Signature of Officer Recording The Report:

F /

SGT 2 LIM JING JING JOANNE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

03/07/2023 23:00

Officer In Charge Of Case:

TP / GIA /

SI MUHAMMAD REEZA BIN AHMAD YUSOFF

Contact No.: 97377891

Classification Of Case:

NP168

IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 03/07/2023	TIME OF ACCIDENT : 16:00
VEHICLE NO : SNB 3163S	TRANSMISSION : <input checked="" type="radio"/> AUTO / MANUAL
MAKE & MODEL : Honda / Freed hybrid	LOCATION : Along woodlands Ave 12 towards woodlands Ave 10
EXACT PURPOSE USE DURING ACCIDENT: EMPLOYMENT / <input checked="" type="radio"/> PRIVATE USE / PRIVATE HIRE	CLAIM TYPE: <input checked="" type="radio"/> OD / THIRD PARTY / REPORTING ONLY
INSURANCE COMPANY : Ergo	POLICY NO : DMPG22010571
TYPE OF COVERAGE :	VEHICLE TYPE :
<input checked="" type="radio"/> COMPREHENSIVE / THIRD PARTY / THIRD PARTY & THEFT	(<input checked="" type="radio"/> SALOON / COUPE/MPV/VAN/LORRY/MOTORCYCLE)
NAME OF OWNER : Koh Eng Wan	NRIC : S1509876G
ADDRESS : 54 Punggol walk #10-12 S, 828832	CONTACT NO : 90050001
EMAIL ADDRESS : soon1729@gmail.com	VIDEO RECORDING : YES / <input checked="" type="radio"/> NO
NAME OF DRIVER : AS ABOVE / IF NO :	NRIC: _____ CONTACT NO: _____
DRIVER OWNER RELATIONSHIP: owner	PASSENGER: 1 MALE () FEMALE (1)
DATE OF BIRTH : 26 / 03 / 1961	DRIVING PASSING DATE : 06 / 10 / 1988
OCCUPATION: <input checked="" type="radio"/> INDOOR / OUTDOOR	ADDRESS : _____
ANY INJURIES: <input checked="" type="radio"/> NO, IF YES :	POLICE REPORT : NO / IF YES WHERE ? Hougang
WEATHER CONDITION: <input checked="" type="radio"/> CLEAR / RAINING / OTHERS:	ROAD SURFACE: <input checked="" type="radio"/> DRY / WET / OTHERS
VEHICLE B REG NO : FBU 7057G	VEHICLE C REG NO : SLK 1917Z
DRIVER NAME : Latib Bin Parman	DRIVER NAME : _____
NRIC : 80175128Z	NRIC : _____
CONTACT : _____	CONTACT : _____
VEHICLE D REG NO : SFL 5401J	ANY WITNESS ? <input checked="" type="radio"/> NO, IF YES :
DRIVER NAME : _____	NAME : _____
NRIC : _____	CONTACT : _____
CONTACT : _____	
WAS NOTICE OF PROSECUTION GIVEN? (YES / NO) IF YES, AGAINST WHOM :	WERE SEAT BELTS WORN ? <input checked="" type="radio"/> YES / NO
	WERE INJURY CONVEYED BY AMBULANCE : YES / <input checked="" type="radio"/> NO
DOES THE ACTUAL DRIVER OWN OTHER VEHICLES: <input checked="" type="radio"/> YES / NO	
VEHICLE NUMBER: SLE 1393R	HANDLING INSURER: EQI

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)
 ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

Certificate/Policy Number : DMPG22010571
Vehicle Registration Number : SNB3163S
Cover Type : Superior Comprehensive
Policy Type : Private Car
Name of Policyholder/Insured : KOH ENG WAN
Commencement Date of Insurance : 13/08/2022
Expiry Date of Insurance : 12/08/2023
Excess : EXCESS: (SECTION I)..... S\$ 500.00
 ADD'L EXCESS: UNNAMED DRIVERS (SECTION I)... S\$ 500.00
 ADD'L EXCESS: NON-AUTH WORKSHOPS (SECTION I) S\$ 300.00
 EXCESS: WINDSCREEN S\$ 100.00
 YOUNG & INEXP DRIVERS (SECTION I) S\$ 3,000.00



24-Hour Helpline: 6100 1620

Finance Company/Hire Purchase Owner : MAYBANK SINGAPORE LIMITED

*Persons or Classes of Persons entitled to drive:

1. The Policyholder
2. Any Person who is driving on the Policyholder's order or 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:

- 1) Use only for social domestic and pleasure purposes
- 2) Use for Policyholder's business

This Policy does not cover

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing and on race track
- 2) Use for the carriage of goods other than samples in connection with any trade or business
- 3) 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 (*).

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), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of **ERGO Insurance Pte. Ltd.**
 Approved Insurer

Karl-Heinz Jung

Authorized Signature

A000019	TH INSURANCE SPECIALIST AGENCY PTE LTD	Contact Number: 63487767
Vehicle Chassis Number : GB73149001, Vehicle Engine/Motor Number : LEB7258732		PC1, 29/07/2022 17:28