

# NATIONAL Assessment Centre Services

(wef 1 Jan 06)

SM09237H000F

Date In: 17/02/2023 18:02

Ref No: N/A/SM028007216/1

Veh No: SGG 187A

D.O.A: 15/07/2023 22:20

OD / TP / Reporting Only

TP Insurer:

Job description

SAS e-filing

E-mail (within 8hrs, AIC 2hrs)

i-Motor Claim Form

i-Motor W/O (Within: OD 2hrs, TP 4hrs)

i-Photo Uploaded

Assessment/Survey Report

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

Date & Time Completed

Done by

Preferred Wksp / INC Assign Wksp / QW: (

TP Particulars:

Veh. No:

SM 6060H

INC (

Tel:

Fax:

/ Non-INC (

Owner / Driver: (

Policy No: (

Period: (

Tel:

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)

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

2) QC Check / Post Repair Inspection ( )

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

Injury:

Date/Time

Actions

## Invoice Preparation Checklist

Amc (\$)

1st Bill

Amc

Add

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

TF (N11): TP (Non INC) against INC \$20

9) N12: Idac Mobile \$0

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	17/07/2023 18:02 (SGT)
Reported by	Actual Driver
Date of Accident	15/07/2023 22:20 (SGT)
Exact Location of Accident	5 Stadium Walk, Singapore 397693
Additional Location Information	LEISURE PARK BASEMENT CARPARK
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGG187A
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	WONG PUI SAN
NRIC No	SXXXX457Z
Email Address	yami_cai@hotmail.com
Mobile Phone No	(Phone) +65-96197211
Alternative Phone No	-

## VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Passat
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1798

## INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D23MTPV01006488

## DRIVER

Name of Driver	CHUA AH ME (CAI YAMI)
NRIC No	SXXXX821A
Date Of Birth	21/03/1973
Occupation	Indoor

Date Of Driving Pass	07/03/1994
Driving experience	29 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96197211
Alt. Phone Number	-
Email Address	yami_cai@hotmail.com
Address	BLK 73A REDHILL ROAD #27-32
Address complement	-
Postcode	151073
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	Collision - Major/Minor Rd
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)	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	WONG PUI SAN
Gender	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230716/7017

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMS6060H
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.
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

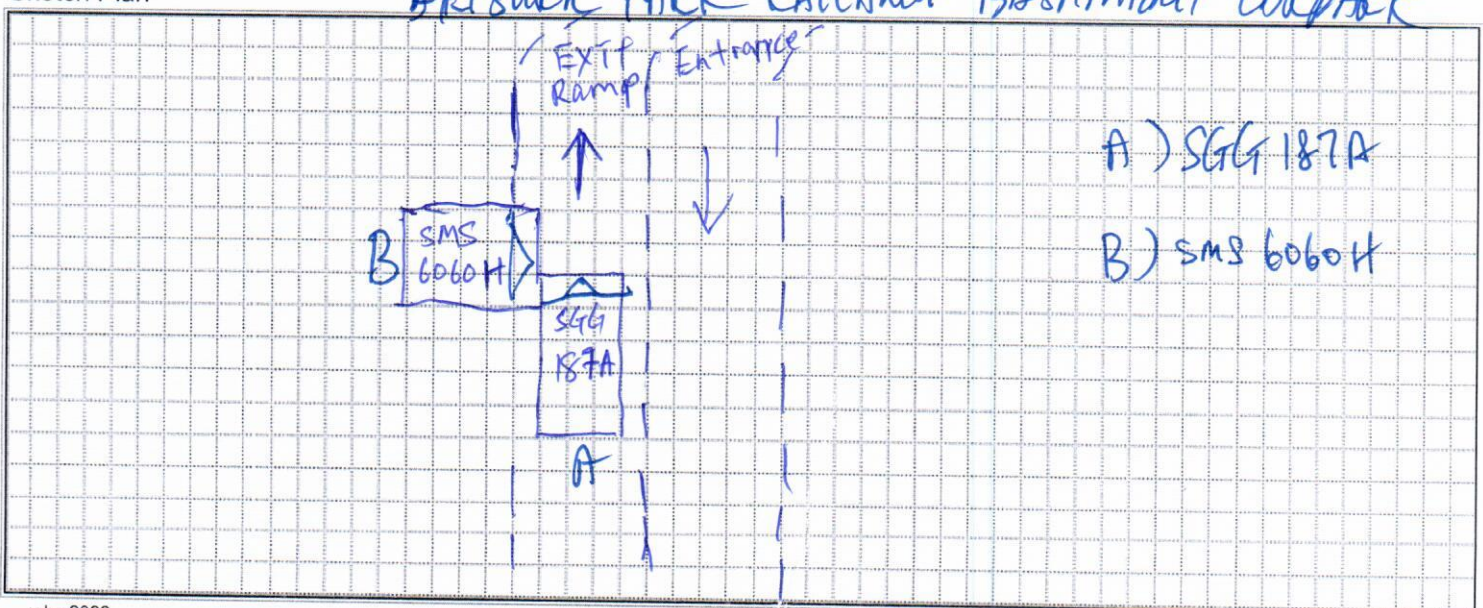
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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)

Sketch Plan



Describe Circumstance of the Accident

REFER TO POLICE REPORT 7/20230716/2017

Declaration

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

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)



# SINGAPORE POLICE FORCE



T/20230716/7017

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20230716/7017

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/07/2023 15:25		Vide Report No.:		Station Diary No.:
<b>Informant's Particulars</b>				
Name of Informant: CHUA AH ME		Address: 73A REDHILL ROAD #27-32 SINGAPORE 151073		
ID Type / ID No.: NRIC NO / S7309821A		Contact No.: Home/Office: Mobile: 91282103		
Nationality: SINGAPORE CITIZEN		Email: yami_cai@hotmail.com		
Sex: Male	Age: 50	Date of Birth: 21/03/1973	Type of Informant: Driver	
Race: Chinese		Language: English		
Occupation: IT support technician		Driving Licence Information: Class: Date of Expiry:		

## General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/07/2023 22:20	Type of Location: Car Park
Location:  STADIUM WALK				
Weather: Underground car park		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SGG187A	Car					0
SMS6060H	Car	MERCEDES BENZ	Not sure.	White	Slightly Damaged	2



# SINGAPORE POLICE FORCE



T/20230716/7017

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20230716/7017

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHUA AH ME	ID No.	S7309821A
Related Vehicle	SGG187A (Car)	Contact No.	91282103
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

### Brief Details.

I was leaving the underground carpark of Leisure Park Kallang after Jacky Cheung concert. The driver of vehicle SMS6060H got into his vehicle and proceeded to aggressively positioned his vehicle to cut into my lane even though I have the right of way.

He might have side swiped the vehicle (SKB5933J - white Honda Vezel) in front of me and I tried to keep right to avoid a collision with him but failed. I got out of the vehicle to inspect the damage and SMS6060H driver got out as well. He took some pictures and a picture of my license plate and then got into his vehicle and drove off without exchanging particulars.

I am lodging this report to ensure that this accident is recorded with the authorities to safeguard myself against fraudsters. I have video recordings of the incident and picture of the damage but I do not know what is the best course of action for me. Please advise.



**SINGAPORE  
POLICE FORCE**



T/20230716/7017

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20230716/7017

**CONTINUATION OF REPORT**

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
SUFIYAN BIN KHAIRI  
Contact No.: 65476148

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
16/07/2023 15:25

Classification Of Case:

# IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 15 July 2023	TIME OF ACCIDENT : 22:20 hrs
VEHICLE NO : SGG187A	TRANSMISION : AUTO / <del>MANUAL</del>
MAKE & MODEL : Volkswagen Passat	LOCATION : Leisure Park Kallang underground car park
EXACT PURPOSE USE DURING ACCIDENT : EMPLOYMENT / PRIVATE USE / PRIVATE HIRE Private Use	CLAIM TYPE : OD / THIRD PARTY / <u>REPORTING ONLY</u>
INSURANCE COMPANY : Sompo	POLICY NO : D23MTPV01006488
TYPE OF COVERAGE : COMPREHENSIVE / <del>THIRD PARTY</del> / <del>THIRD PARTY &amp; THEFT</del> preferred Workshop Plan	VEHICLE TYPE : ( SALOON / COUPE/MPV/VAN/LORRY/MOTORCYCLE )
NAME OF OWNER : Wong Pui San	NRIC : S72454572
ADDRESS : 73A Redhill Road #27-32	CONTACT NO : 96197211
EMAIL ADDRESS : yami-cai@hotmail.com	VIDEO RECORDING : YES / <del>NO</del>
NAME OF DRIVER : AS ABOVE / IF NO : Chua Ah Me	NRIC : S7309821A CONTACT NO : 91282103
DRIVER OWNER RELATIONSHIP : Spouse	PASSENGER : MALE ( ) FEMALE ( <input checked="" type="checkbox"/> ) WONG PUI SAN
DATE OF BIRTH : 21/03/1973	DRIVING PASSING DATE : 07/03/1994
OCCUPATION : INDOOR / <del>OUTDOOR</del> IT Professional	ADDRESS : 73A Redhill Road #27-32
ANY INJURIES : NO, IF YES : No	POLICE REPORT : NO/ IF YES WHERE ? T/20230716/7017 (online)
WEATHER CONDITION : CLEAR / RAINING / OTHERS Underground Carpark	ROAD SURFACE : <u>DRY</u> / WET / OTHERS
VEHICLE B REG NO : SMS 6060H	VEHICLE C REG NO : _____
DRIVER NAME : _____	DRIVER NAME : _____
NRIC : _____	NRIC : _____
CONTACT : _____	CONTACT : _____
VEHICLE D REG NO : _____	ANY WITNESS ? <u>NO</u> , IF YES : _____
DRIVER NAME : _____	NAME : _____
NRIC : _____	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 / NO

## PRIVATE CAR POLICY SCHEDULE

Policy No. : D23MTPV01006488

This Schedule is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of the PRIVATE CAR Policy wordings, ref. MTP.31A

Insured : WONG PUI SAN  
 Address : 73A REDHILL ROAD  
           27-32  
           SINGAPORE 151073  
 Business/Profession : UNEMPLOYED  
 Period of Insurance : 09 JUNE 2023 00:00 TO 08 JUNE 2024 23:59

VEHICLE DETAILS		PREMIUM DETAILS	
Vehicle Registration No.	: SGG187A	Premium Before GST	S\$ 1,023.60
Chassis No.	: WVVZZZ3CZGE213489	GST Amount	S\$ 81.89
Engine No./Motor No.	: CHH149477	<b>TOTAL PREMIUM PAYABLE</b>	<b>S\$ 1,105.49</b>
Vehicle Make & Model	: VOLKSWAGEN PASSAT 2.0		
Engine Capacity	: 1984		
NCD Entitlement	: 50%		
Year of Registration	: 2016		
NCD Protection	: COVERED		
Loss of Use	: COVERED		
Waiver of Excess	: COVERED		
Estimated Vehicle Value	: MARKET VALUE AT TIME OF LOSS		
Hire Purchase Owner	: DBS BANK		

Coverage : Comprehensive - Preferred Workshop Plan  
 Excess : S\$600 - Section I  
 Voluntary Excess : N.A.  
 Additional Excess :
 

Named Young and/or Inexperienced Drivers	S\$1,500
Un-named Young and/or Inexperienced Drivers	S\$3,000
Un-named All Other Drivers	S\$500

'Young Drivers' shall be defined as drivers (including the Insured) who are below 27 years old.  
 'Inexperienced Drivers' shall be defined as drivers (including the Insured) who have less than 1 year of driving experience in Singapore roads.

Windscreen Excess : S\$100 for each and every applicable claim  
 Endorsements Applicable :
 

- Endorsement V - NCD Protection
- Endorsement W1 - Preferred Workshop Plan
- Endorsement WE - Waiver of Excess
- Endorsement Z - Loss of Use Benefit

Additional Cover : NIL

Named Drivers :
 

1. Name : WONG PUI SAN  
    Age (in years) : 50  
    Driving Experience in Singapore (in years) : 23
2. Name : CHUA AH ME  
    Age (in years) : 50  
    Driving Experience in Singapore (in years) : 23

Date of Issue : 24 APRIL 2023  
 Intermediary Name / Code : TAG GI PTE LTD / 11C15504  
 Producer Name / Code : TAG GI PTE LTD / CSP15505

Signed on this 24th day of April 2023  
 for and on behalf of SOMPO INSURANCE SINGAPORE PTE. LTD.



Authorised Signatory  
 CI Code : 22A

SOMPO ASSIST HOTLINE  
**Tel: (65) 6226 3323**

In the event of road accident, please call our Sompo Assist Hotline immediately. Our MARS Specialist will arrive at the accident site within 20 minutes anywhere in Singapore. Alternatively, you may approach any of our Accident Reporting Centres for assistance in E-filing your accident report with your vehicle within 24 hours or on the next working days after the accident. Please note that this is compulsory regardless of whether there is any damage to your vehicle or if you are making a claim under your own policy.