

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

SUBS7K0004

Date In: 20/07/2023 15:59	Job description	Date & Time Completed	Done by
Ref No: NPA/C72230073431	SAS e-filing		
Veh No: G5M 233C	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 17/07/2023 14:05	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: J8J 2718	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

NA2302164	Invoice Preparation Checklist	Am't (\$)	Am't
Claimant's Particulars:-	1) AR : Accident Reporting (\$30);	Inc Bill	Add
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		
	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 \$30		
Cat. 1:	Invoice dated	Fee Charged	
Cat. 2 / 3:	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	20/07/2023 15:59 (SGT)
Reported by	Actual Driver
Date of Accident	17/07/2023 14:05 (SGT)
Exact Location of Accident	Pioneer Walk, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBM233C
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	HOCK LEONG TECK KEE PTE. LTD.
Company Reg No	2XXXXX534D
Email Address	hltk83@singnet.com.sg
Mobile Phone No	(Phone) +65-62248813
Alternative Phone No	-

## VEHICLE PARTICULARS

Manufacturer	Honda
Model	N-VAN
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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	658

## INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00118022200

## DRIVER

Name of Driver	TEO MONG WAH WILSON
NRIC No	SXXXX697H
Date Of Birth	03/12/1975
Occupation	Indoor

Date Of Driving Pass .....	20/01/1996
Driving experience .....	27 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98559911
Alt. Phone Number .....	-
Email Address .....	w.teo75@gmail.com
Address .....	BLK 942 JURONG WEST STREET 91 #04-451
Address complement .....	-
Postcode .....	640942
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 .....	Collision - Head to Rear
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	Yes
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 .....	-

#### FOREIGN VEHICLE 1

Vehicle Registration Number .....	JSJ2778
Vehicle Category .....	Commercial vehicle

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Nanyang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18007929999
Alt. Police Station Phone No .....	(Fax) +65-67912972
Police Station Address .....	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230717/2057

#### 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	JSJ2778
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +60-192649185
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 willful 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.

HOCK LEONG TECK KEE PTE LTD

No. 5 Toh Guan Road East

#01-06 Singapore 608831

Tel: 6224 8813 / 6376 4339

Fax: 6271 3760

UEN: 201820534D

Policyholder's Signature / Date & Time

HOCK LEONG TECK KEE PTE LTD

No. 5 Toh Guan Road East

#01-06 Singapore 608831

Tel: 6224 8813 / 6376 4339

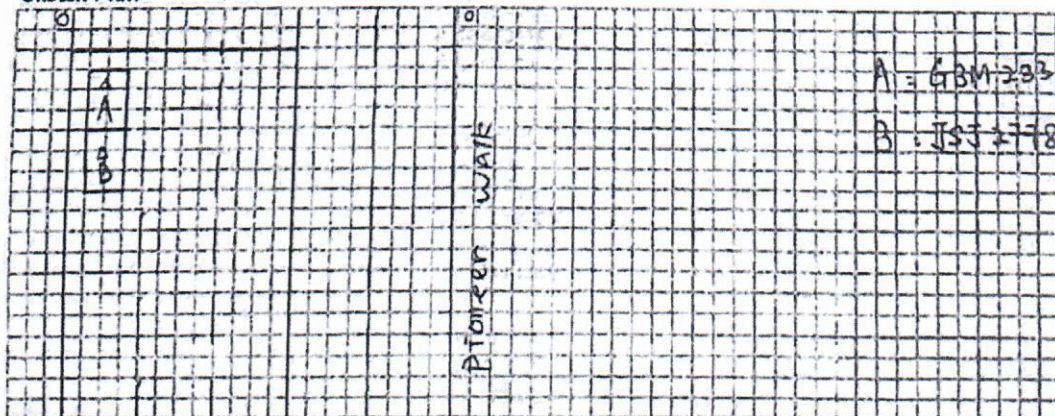
Fax: 6271 3760

UEN: 201820534D

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

Witnessed by Reporting Centre Personnel

### Sketch Plan





**Describe Circumstances of the Accident**

Please refer to the police report: T/2023 077/2057.

**Declaration**

We declare the foregoing particulars are true in every respect.

HOCK LEONG TECK KEE PTE LTD HOCK LEONG TECK KEE PTE LTD

No. 5 Toh Guan Road East

#01-06 Singapore 608831

Tel: 6224 8813 / 6376 4339

Fax: 6271 3760

UEN: 201820534D

Policyholder's Signature / Date & Time

No. 5 Toh Guan Road East

#01-06 Singapore 608831

Tel: 6224 8813 / 6376 4339

Fax: 6271 3760

UEN: 201820534D

Driver's Signature (if different from the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel





# SINGAPORE POLICE FORCE



T/20230717/2057

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

1 of 3  
Report No. T/20230717/2057

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/07/2023 15:25		Vide Report No.:		Station Diary No.: 99	
<b>Informant's Particulars</b>					
Name of Informant: TEO MONG WAH WILSON		Address: APT BLK 942 JURONG WEST STREET 91 #04-451 SINGAPORE 640942			
ID Type / ID No.: NRIC NO / S7535697H		Contact No.: Home/Office: 62248813      Mobile: 98559911			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 47	Date of Birth: 03/12/1975	Type of Informant: Driver		
Race: Chinese		Language: English			
Occupation: OPERATION MANAGER		Driving Licence Information: Class: 3,4      Date of Expiry:			

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 17/07/2023 14:05	Type of Location: X-Junction
Location:  PIONEER WALK				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBM2233C	Van	HONDA	Nvan	Blue	Slightly Damaged	0
JSJ2778	Lorry	HINO		Beige	No Damage	1

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**



T/20230717/2057

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

2 of 3  
Report No. T/20230717/2057

**CONTINUATION OF REPORT**

<b>Driver</b>				
Name	TEO MONG WAH WILSON		ID No.	S7535697H
Related Vehicle	GBM2233C (Van)		Contact No.	98559911
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
<b>Driver</b>				
Name	KHALIDI BIN RAHMAT		ID No.	690211015693
Related Vehicle	JSJ2778 (Lorry)		Contact No.	0192649185
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

**Brief Details.**

On 17/07/2023 at about 1405hrs, I was driving my company (Hock Leong Teck Kee Pte Ltd) van Blue/Honda Nvan bearing registration plate number GBM2233C along Pioneer walk towards Sunview Way. Thereafter, I stopped at the junction of Pioneer Walk and Pioneer Rd while the traffic light was red. While waiting for the traffic light to turn green, suddenly I felt an impact at the back of my company van. Immediately, I alighted from my company van and observed one Malaysian lorry, Beige/Hino bearing registration plate number JSJ2778 had hit onto the rear bumper of my company van. The rear right light was cracked and the top rear portion of my company van was also cracked due to the collision. The Malaysian lorry is from Securiforce Sdn.Bhd. (55 Udarama Kompleks Jln. 2/64A Off Jln. Ipoh 51200 K.Lumpur W.P.). No one was injured due to the accident. I was advised by my company's insurance company to lodge this traffic accident report.





**SINGAPORE  
POLICE FORCE**



T/20230717/2057

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

3 of 3

Report No. T/20230717/2057

**CONTINUATION OF REPORT**

Signature of Officer Recording The Report:  
J/  
SGT 3 SAW HUI YING

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
SI ANG YI TING, STEPHANIE  
Contact No.: 65476414

Signature Of Informant:

Date/Time:  
17/07/2023 15:25

Classification Of Case:

NP168



Date of Accident : 17.07.2023 Accident Time : 14.05pm (24-HR-Format)

Who reported the accident? : Owner / Driver / Both

Accident Place : Pioneer Walk

Vehicle No (Car Plate No) : GBM 233C Make/Model: Honda N.van

Insurance Company : China Taiping Policy No: DMCVSNW 00118022200

Fleet Policy : YES / NO

Type of Coverage : Comprehensive / Third Party / Third Party Fire & Theft

Name of Owner / IC No : Hock Leong Teck Kee Pte Ltd (201820534D)

Owner Contact No : \_\_\_\_\_ Owner's Hp \_\_\_\_\_ Company Tel 6224 8813

Driver Name / IC No : Teo Mong Wah Wilson (S7535697H)

Driver's Date of Birth : 03.12.1975 Driver's License Pass Date: 20.01.1996

Relationship of Driver : Spouse / Parents / Children / Sibling / Employee / Other: \_\_\_\_\_

Driver's Address : APT 8LK 942 Jurong West street 91 # 04-451 S (640942)

Driver's Contact No : 1) 98559911 2) \_\_\_\_\_

Driver's Occupation : INDOOR / OUTDOOR (e.g. working inside or outside office)

Email Address : W.teo75@gmail.com (driver) / htk83@singnet.com.sg (company)

Weather & Road Surface : CLEAR & DRY / RAINING & WET / AFTER RAIN & WET

Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance

Number of Passenger(include Driver) : 1 person (driver)

Was ther any video footage? : YES / NO

Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose

Any injury (If Yes, Pls State) : No injury

Other Party Driver's Particular (If any)

VEH B : <u>JSI 2778</u>	Name & Contact No: <u>019-2649185 (M'sia number)</u>
VEH C : _____	Name & Contact No: _____
VEH D : _____	Name & Contact No: _____
VEH E : _____	Name & Contact No: _____

\*NEW - Passenger's Name & Gender:

**HOCK LEONG TECK KEE PTE LTD**

No. 5 Toh Guan Road Eas  
 #01-06 Singapore 608831  
 Tel: 6224 8813 / 6376 4339  
 Fax: 6271 3760  
 UEN: 201820534D  
 htk83@singnet.com.sg







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

MZ300/C

E SN

AN0622A

Cov. Type: C

### 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)

CERTIFICATE No.

DMCVSNW00118022200

Engine No.: S07B4023729

Cha. No.: JJ16003373

1. Index Mark and Registration  
Number of Vehicle

GBM233C

AUTOSAFE

=====

2. Name of Policy Holder

HOCK LEONG TECK KEE PTE LTD

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

22/09/2022  
(09:07:34)

Excess Sect I S\$450.00

EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

21/09/2023

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.

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.

\* 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.

**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 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Chua Suat Lay Sally  
Authorised Officer

Authorised Signatory

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

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☎ 6222 1033

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