

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

Date In: 17/07/2023	Job description	Date & Time Completed	Done by
Ref No: NA10123007373/d4	SAS e-filing		
Yeh No: SMC 2189 G	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 15/07/2023 03:00	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/Wksn		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SLE 8795T	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

NA2302172	Invoice Preparation Checklist	Am't (\$)	Am't
Claimant's Particulars:	1) AR: Accident Reporting (\$30);		
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: Idao 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: Idao 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	17/07/2023 17:48 (SGT)
Reported by	Actual Driver
Date of Accident	15/07/2023 03:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BALESTIER ROAD TOWARDS BOON TECK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMC2189G
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	1AXIS PRESTIGE LEASING PTE LTD
Company Reg No	2XXXXX962N
Email Address	reporting.gt@gmail.com
Mobile Phone No	(Phone) +65-96971707
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	C-hr
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 hire
Transmission	Auto
CC	1797

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNA00017352200

#### DRIVER

Name of Driver	GOH JUN XIAN
NRIC No	SXXXX988E
Date Of Birth	26/03/1993
Occupation	Outdoor

Date Of Driving Pass	29/05/2015
Driving experience	8 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98449588
Alt. Phone Number	-
Email Address	alfredgoh933@gmail.com
Address	APT BLK 111 WHAMPOA ROAD
Address complement	# 04-39
Postcode	321111
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	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	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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?	Yes
Police Station Name	Tanglin Division Headquarters
Police Station Phone No	(Phone) +65-18003910000
Alt. Police Station Phone No	(Fax) +65-63964900
Police Station Address	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - E/20230715/7018

#### 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	SLE8795T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-



Vehicle Colour	-
Vehicle Category	-
Name of Driver	Private car
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	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
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)	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	GOH JUN XIAN
Gender	Male
Phone No	(Phone) +65-98449588
Address	APT BLK 111 WHAMPOA ROAD
Address Complement	# 04-39
Post Code	321111
Approximate Age Years Old	-
Injuries Sustained	HEAD, NECK AND BACK-GIVEN 3 DAYS OF MC
Injured person in which vehicle?	SMC2189G
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

## 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 willful misrepresentation or withholding of material facts may allow insurance companies to reudiate 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.

### 5. 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.

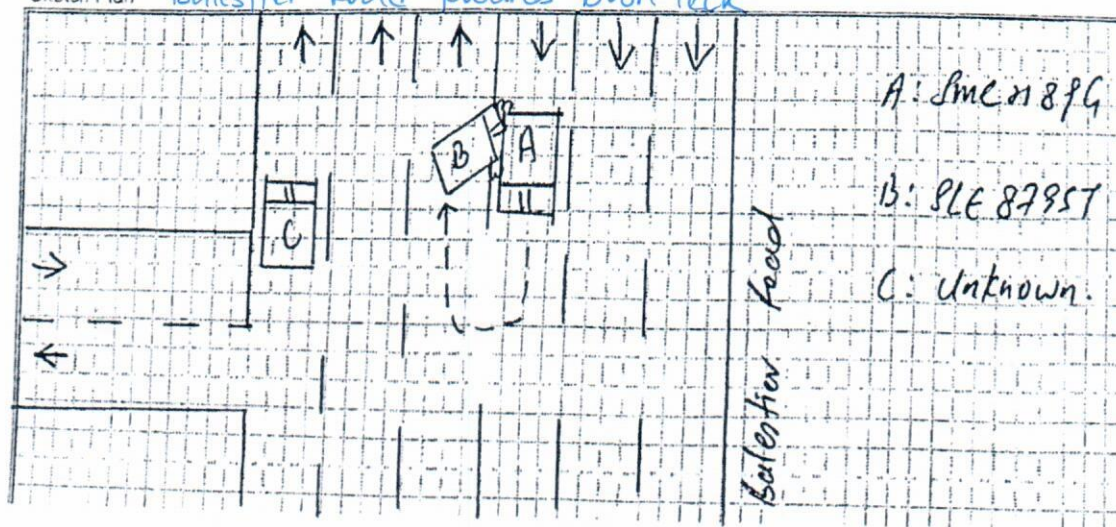


Policyholder's Signature / Date & Time

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

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

Sketch Plan Balestier Road towards Buon Teck





Describe Circumstance of the Accident

Refer to TP report

E/ 20230715/ 7018

I wish to add on that I was stationary waiting to move off when suddenly vehicle (B) lost control and went up the kerb and hit onto me after being collided with vehicle (C). The road railing also dislodged and collided with my car.

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

Witnessed by Reporting Centre Personnel



# SINGAPORE POLICE FORCE



E/20230715/7018

1 of 2

Report No. E/20230715/7018

## POLICE REPORT (NP299)

Police Station Of Origin  
Tanglin Division HQ  
21 Kampong Java Road SINGAPORE  
228892  
Tel No:1800-3910000

Date/Time Report Made 15/07/2023 18:08	Vide Report No.	Station Diary No.
Name Of Informant GOH JUN XIAN	Address 111 WHAMPOA ROAD #04-39 SINGAPORE 321111	
ID Type / ID No. NRIC NO / S9309988E	Contact No. Home/Office:	Mobile: 98449588
Nationality SINGAPORE CITIZEN	Email Address ALFREDGOH933@GMAIL.COM	
Occupation Private-hire car driver	Sex Male	Age 30
Institution/School Name	Date of Birth 26/03/1993	Race Chinese
Date/Time Of Incident 15/07/2023 00:00 - 15/07/2023 03:00	Location Of Incident 111 WHAMPOA ROAD #04-39 SINGAPORE 321111	

### Brief details.

Car accident along Balestier Road at around 15/7/2023 3am, I was driving straight and suddenly car SLE8795T bang across over the barrier and hit the side of my car onto my driver seat door, my car was damage and I am injured. I was given 3 days MC for my injury.

Subjects Involved			
Victim			
Person Name	GOH JUN XIAN		
ID Type	NRIC NO	ID No	S9309988E

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:  
15/07/2023 18:08

Classification Of Case:





**SINGAPORE  
POLICE FORCE**



E/20230715/7018

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**POLICE REPORT (NP299)**

**CONTINUATION OF REPORT**

**Report No. E/20230715/7018**

Gender	Male	Age	30
Race	Chinese	Language	English
Occupation	Private-hire car driver	Address	111 WHAMPOA ROAD #04-39 SINGAPORE 321111
Mobile No	98449588	Is Informant A Victim?	Yes
Person Name	GOH JUN XIAN (Informant)		

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:  
15/07/2023 18:08

Classification Of Case:



This Car Rental Agreement ("Agreement") is made and entered into as of 1/7/2023 between 1AXIS PRESTIGE LEASING PTE. LTD. ("Owner"), and Goh Jun Xian ("Renter")

Owner and Renter may also be referred to as "Party" in the singular or "Parties" in the plural in this agreement subject to the following terms and conditions.

RENTER - means the person(s) signing this agreement, Any other person or entity to which the charges incurred under the agreement are to be billed, permitted to drive the vehicle with written consent of the Owner.

VEHICLE- means the motor vehicle or any substitute or replacement vehicle described in this agreement and other Form of Records, includes tires, tools, accessories, equipment, keys and vehicle documents of vehicle.

OWNER - means, 1AXIS PRESTIGE LEASING PTE. LTD. (Company).

#### RENTAL VEHICLE

Vehicle Make	Vehicle Model	Vehicle Plate Number	Vehicle Colour
Toyota	C-HR	SMG 2189 G	Black

Owner agrees to rent Vehicle to Renter for the following period:

Start Date: 1/7/2023 End Date: 1/7/2024 Contract Period: 1 year

☒ NO CONTRACT

The Parties agree that this Agreement will run perpetually until either party provides a termination notice of at least fourteen (14) days OR pay the rental in-lieu of the shortfall days if notice is less than fourteen (14) days.

☐ CONTRACT

The Parties agree that this Agreement terminates upon the End Date specified above. Notwithstanding anything to the contrary in this Agreement or any Exhibits. RENTER may terminate this agreement ONLY to End Date specified above, if given fourteen (14) days' notice prior End Date. If this agreement is terminated prior to the End Date, the Owner reserves the right to forfeit full deposit and one month's worth of rental.

#### RENTAL FEES

The Renter hereby agrees to pay the Owner for use of Vehicle as follows:

Rental Fees : \$ 70 per 01 day(s) month.

Payment Reminders will be send up to 2 weeks(or earlier if Renter is under Early Bird Promo) prior to rental expiry date

WITNESS WHEREOF, the Parties have signed this Agreement as of the day and year written.

ACCEPTED BY RENTER	ACCEPTED BY OWNER
Name: <u>Goh Jun Xian</u>	Name: <u>1Axis Prestige Leasing Pte Ltd</u>
NRIC Number: <u>S9309988E</u>	Registration Number: <u>202121962N</u>
Signature: <u>[Signature]</u>	Signature/Company Stamp: <u>[Stamp]</u>

Date of Accident : 15/07/23 Accident Time: 0300 (24-HR-FORMAT)  
Accident Place : Balestier Road towards Boon Teck  
Vehicle Reg. No (Car plate No.) : SMC 21896 CC: 1.8. Vehicle Make/Model: Toyota CHR  
Insurance Company : China TP Policy No. DMHCSNA0001735220  
Name of Registered Owner : Company / Individual Axis Prestige Leasing Pte Ltd.  
ID of Registered Owner : Co Reg No: 202121962N Owner's NRIC No: \_\_\_\_\_  
OWNER EMAIL ADDRESS: reporting.gt@gmail.com : Co Contact No: \_\_\_\_\_ Owner's Contact No: 9697 1707  
DRIVER'S Name : Goh Jun Xian DRIVER'S NRIC No: 99309988E  
DRIVER'S Date of Birth : 25/03/93 DRIVER'S License Pass Date 29/05/15  
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Hired  
DRIVER'S Address : Block 111 Whampoa Road #04-38 1/341111  
DRIVER'S Contact No./ Alt No. : 1) 9844 9588 2) \_\_\_\_\_  
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)  
Email Address : alfredgoh933@gmail.com  
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (including Driver): 1 Name & Gender: \_\_\_\_\_  
Was the accident reported to the police? YES \ NO  
Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose  
Any injuries, if yes (name of the injured person) Driver Only Hand, Neck & Back

**Other Party Driver's Particulars (if any)**

Vehicle Reg No: 9LE17957	Vehicle Reg No: Unknown
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

REPORT FORM EXPLAINED IN : ENGLISH / CHINESE / MALAY / TAMIL OTHERS: \_\_\_\_\_

WHO REPORTED THE ACCIDENT : OWNER / DRIVER / BOTH



Motor Hire Car

MZ406L/B

E SN

AN0055A

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. DMHCSNA00017352200

Engine No.: 2ZR8437306

Cha. No.: ZYX102119976

1. Index Mark and Registration  
Number of Vehicle

SMC2189G

AUTOSAFE  
=====

2. Name of Policy Holder

1AXIS PRESTIGE LEASING PTE LTD

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

04/11/2022

(00:00:00)

Excess Sect. I.

S\$2,000.00

Excess Sect. I (Outside Singapore)

S\$4,000.00

Excess Sect. II

S\$1,500.00

Excess Sect. II (Outside Singapore).

S\$3,000.00

EX ON WINDSCREEN.

S\$100.00

4. Date of Expiry of Insurance

18/09/2023

5. Persons or Classes of Persons entitled to drive\*

As per Named Driver(s) stated below.

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 for the carriage of passengers or goods in connection with the Policyholder's business.
- (2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

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

HIRE PURCHASE CO.: SKYWAY CREDIT &amp; LEASING PTE LTD

\* 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: Chai Huilin Lynn  
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