

NATIONAL Assessment Centre Services

(wef 1 Jan 06)

SM09237P0003

Date In: 25/01/2023 15:02	Job description	Date & Time Completed	Done by
Ref No: NBR/1423007511/Y	SAS e-filing		
Veh No: SLH 7425C	E-mail (within 8hrs, AIC 2hrs)		
D.O.A : 22/01/2023 19:00	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: FBL 11984	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

NA2302217

Invoice Preparation Checklist

Amnt (\$)
1st Bill Add

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 : 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	
	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 First Submission	25/07/2023 15:02 (SGT)
Reported by	Actual Driver
Date of Accident	22/07/2023 19:00 (SGT)
Exact Location of Accident	Woodsville Flyover, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH7425C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ST (PREMIUM) RENT & DRIVE PTE. LTD.
Company Reg No	2XXXXXX664R
Email Address	strentanddrive@gmail.com
Mobile Phone No	(Phone) +65-87812161
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
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	Private hire
Transmission	Auto
CC	1197

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D23MFL0002593

DRIVER

Name of Driver	NG YU CHAI
NRIC No	SXXXX748C
Date Of Birth	12/09/1968
Occupation	Outdoor

Date Of Driving Pass	02/09/1994
Driving experience	28 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97113188
Alt. Phone Number	-
Email Address	strentanddrive@gmail.com
Address	BLK 540 BUKIT BATOK STREET 52 #08-511
Address complement	-
Postcode	650540
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	5
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	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/20230724/7064

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	FBL1198U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Motorcycle
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	YQ9227T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	SLA1348T
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 4

Vehicle Registration Number	SNL5418S
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	NG YU CHAI
Gender	Male
Phone No	(Phone) +65-97113138
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLH7425C
Were seat belts worn?	Yes
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 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

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

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

[Signature]
25/07/2023

Sketch Plan

<p>WOODVILLE FLYOVER</p>		<p>(A) SLH7425C</p> <p>(B) FBL1198U</p> <p>(C) YQ9227T</p> <p>(D) SLA1348T</p> <p>(E) SNL5418S</p>
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Describe Circumstance of the Accident

- REFER TO POLICE REPORT -

7/20230724/7064

Declaration

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



A handwritten signature in blue ink.

Driver's Signature of accident report (to be signed by driver)

A handwritten signature in blue ink.
25/07/2023

Driver's Signature of accident report (to be signed by driver)



SINGAPORE POLICE FORCE



T/20230724/7064

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

1 of 3

Report No. T/20230724/7064

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/07/2023 15:46		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: NG YU CHAI		Address: 540 BUKIT BATOK STREET 52 #08-511 SINGAPORE 650540	
ID Type / ID No.: NRIC NO / S6834748C		Contact No.: Home/Office:	Mobile: 97113188
Nationality: SINGAPORE CITIZEN		Email: DARRENNNG2268@GMAIL.COM	
Sex: Male	Age: 54	Date of Birth: 12/09/1968	Type of Informant: Driver
Race: Chinese		Language: English	
Occupation: DRIVER		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/07/2023 19:00	Type of Location: Straight Road
Location: WOODSVILLE FLYOVER				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBL1198U	Motorcycle					0
SLA1348T	Car					0
SLH7425C	Car				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20230724/7064

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

2 of 3

Report No. T/20230724/7064

CONTINUATION OF REPORT

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SNL5418S	Car					0
YQ9227T	Lorry					0

Details of Person Involved

Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NG YU CHAI	ID No.	S6834748C
Related Vehicle	SLH7425C (Car)	Contact No.	97113188
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	23/07/2023	Date	23/07/2023
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

I was travelling straight along Woodsville Flyover on lane 2.
Suddenly, a motorcycle on lane 4 collided onto a lorry and a car and skidded.
The motorcycle skidded and collided onto the rear left portion of my vehicle.

I felt unwell after the accident and visited OneCare Clinic Bukit Batok and was given 3 days MC (23.07.23 TO 25.07.23)



**SINGAPORE
POLICE FORCE**



T/20230724/7064

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

3 of 3

Report No. T/20230724/7064

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
FADLI SHAIFUDDIN BIN MOHAMED SANI
Contact No.: 65476845

Signature Of Informant:

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

Date/Time:

24/07/2023 15:46

Classification Of Case:



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No:

E/20230722/0131

1.

SS) 7130019 Zulhi/m:

(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of

7P

(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1

1 Road 32GB micvu SD

2

3

4

5

6

7

8

9

10

from

Ng Yu Chai

S6834748/C

(Name, NRIC or Passport No. / Rank and No.)

of

9711 3188

(Address / Police Station / NPC / NPP)

on

22.7.23

(Date)

at

2100

(Time)

Witnessed by / * Handed over by:

(* Delete if applicable)

Received by:

(Signature)

Ng Yu Chai S6834748/C

(Name, NRIC or Passport No. / Rank and No.)

(Signature)

SS) 7130019 Zulhi/m:

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks:

20 Med Mukd

tel: 6597 6258

(1) Lodge Accident report

ST(PREMIUM) RENT & DRIVE PTE LTD

Reg No. 201816664R

210 Turf Club Road, The Grandstand Car Mall, Lot A12/A27, Singapore 287 995

Name: NG YU CHAI

NRIC No.: S6834748C

Address: APT BLK 540BUKIT BATOK STREET 52
#08-511 S(650540)

Age: 54

DOB: 12 SEP 1968

Driving Experience: YEARS

Contact No: +65 97113188

Next-of-kin Contact No

Email:

**** Remark: Hirer agreed to allow this rental company to keep a photocopy of his NRIC and driving License**

Vehicle Details

Make & Model: NISSAN QASHQAI	Vehicle Reg No.: SLH7425C
Commencing Start Date/Time: 04 APR 2023	Commencing End Date/Time: 4 JUL 2023
Rental Price: \$65	Collision Damage Waiver: \$5 Deposit: \$500

**** Contract Duration:**

*It is the customer's responsibility to inspect the vehicle upon collection. He/she should take photographs of any existing scratches and dents and WhatsApp them within 30 minutes after the collection of the vehicle. **Repair charges** will be imposed if the customer fail to do so when the vehicle is being returned.

*Deposit will only be refunded to customer by cheque within 10 working days upon returning of vehicle.

*Insurance Excess amount must be paid in full before the customer is able to do an accident report

1 st Party Excess: \$500	3 rd Party Excess: \$500	Collision with Foreign Vehicles Excess \$5000
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*No additional charge for usage in Malaysia (towing is not covered in Malaysia)

*Deposit will be forfeited if the hirer decided to Early Termination of the contract.

*Cost of \$100 will be charged if the PH Decal is being defaced or damaged

Name/Signature of Customer

Name/Signature of Authorized Person

ACCIDENT STATEMENT

Date of accident: 22/07/2023

Time: 19.00

Location of accident: WOODSVILLE FLVOVER

Vehicle Number: SLH7425C

Make/Model: NISSAN QASHQAI

Insurer: INDIA INTERNATIONAL INSURANCE

Eng. cc & Transmission:

Policy No: D23MFL0002593

Policy Type: C/TPFT/TRO

Name: ST (PREMIUM) RENT & DRIVE PTE LTD

NRIC/FIN no: 201816664R

Email: STRENTANDDRIVE@GMAIL.COM

Contact no: 8781 2161

Name: NG YU CHAI

NRIC/FIN no: S6834748C

Email:

Contact no: 97113188

Occupation: Indoor/Outdoor

D.O.B: 12-09-1968

Address: BLK 540 BUKIT BATOK STREET 52 #08-511 SINGAPORE 650540

Driving pass date: 02-09-1994

Relationship with Policyholder: HIRER

Weather conditions: Clear/Raining

Road surface: Dry/Wet

Police report: Yes/No

Video Footage: Yes/No

Prosecution Letter: Yes/No

If Yes against whom:

Passenger (incl. Driver): 5 Please provide ALL passengers details:-

	Passenger 1	Passenger 2
Name:	GRAB PASSENGER x 3	GRAB PASSENGER
Gender:	Male/Female	Male/Female

Witness: Yes/No If Yes, provide injuries details:-

	Witness 1	Witness 2
Name:	-	-
Contact no:	-	-

Injuries: Yes/No If Yes, provide injuries details:-

Name	Veh No.	Seatbelt	Consented to treatment
NG YU CHAI	SLH7425C	Yes/No	Yes/No
		Yes/No	Yes/No


	Vehicle A	Vehicle B	Vehicle C
Vehicle no:	B FBL1198U	C YQ9227T	D SLA1348T
Driver name:			E SNL5418S
NRIC/FIN no:			
Contact no:			
Insurance Co:			
Remarks:			

Claim Type:



CERTIFICATE OF INSURANCE

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D23MFL0002593		COVER: Third Party Only	
1. Index Mark and Registration Number of Vehicle	:	SLH7425C	
Chassis No	:	SJNFEAJ11U1776284	
2. Name of Policyholder	:	ST (Premium) Rent & Drive Pte. Ltd.	
3. Effective date of Insurance	:	31 Mar 2023	
4. Expiry date of Insurance	:	30 Mar 2024	
5. Persons or Classes of Persons entitled to drive*			
Any person who is driving on the Policyholder's order or with his/her permission. The Hirer.			
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*			
Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social, domestic, pleasure purposes and business purposes of the Policyholder or of any person to whom the vehicle is hired			
The Policy does not cover			
(1) Use for hire or reward (other than when the vehicle is hired for the carriage of passengers under Z10/Z11 for hire and reward). (2) Use for racing, pace-making, reliability trial, or speed-testing. (3) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. (4) 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.			
Excess Section II WITHIN SINGAPORE	:	SGD	1,500.00
Excess Section II OUTSIDE SINGAPORE	:	SGD	3,000.00
FOR DRIVERS BELOW 22 YEARS OLD OR ABOVE 75 YEARS OLD &/OR WITH LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN ADDITIONAL EXCESS OF \$1,500.00 ON SECTION II WILL BE APPLICABLE.			
PRIVATE HIRE SERVICE (USE FOR HIRE & REWARD) - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE ONLY.			
FOR SOCIAL, DOMESTIC & LEISURE PURPOSES ONLY - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE AND WEST MALAYSIA.			
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).			
Agent/Broker	:	F000002-GENRIVER FINANCIAL PTE. LTD.	
Date of Issue	:	30-03-2023 17:10:36	
MZ406 - Hire Car (U/G)		For India International Insurance Pte Ltd  Nalini Venugopal MD & CEO	