

NATIONAL Assessment Centre Services

(wef 1 Jan 06)

SNL923880003

Date In: 03/08/2023 11:47
Ref No: X/BA/1123007883/4
Yeh No: SNL 76387
D.O.A: 02/08/2023 2016

Job description	Date & Time Completed	Done by
SAS e-filing		
E-mail (within 3hrs, 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		

OD / TP / Reporting Only

TP Insurer:

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Yeh No: SNL 1183C

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%. P: 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

1142302310

Claimant's Particulars

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist

- 1) AR : Accident Reporting (\$30);
- 2) DA : Damage Assessment (\$100); INC (\$80)
- 3) TP : 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) NI : 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 \$0

Am't (\$)
Est. Bill

Invoice dated

Fee Charged

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	03/08/2023 11:47 (SGT)
Reported by	Actual Driver
Date of Accident	02/08/2023 20:16 (SGT)
Exact Location of Accident	Keppel Rd, Singapore
Additional Location Information	TURNING TO ANSON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNL2638T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	JY LEASING PTE. LTD.
Company Reg No	2XXXXX518R
Email Address	jchankh@gmail.com
Mobile Phone No	(Phone) +65-81136375
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Shuttle
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	Commercial vehicle
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D23MFL0001749

DRIVER

Name of Driver	CHAN KWANG HONG (ZENG GUANGHONG)
NRIC No	SXXXX177B
Date Of Birth	23/04/1974
Occupation	Indoor

Date Of Driving Pass	12/01/1996
Driving experience	27 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81136375
Alt. Phone Number	-
Email Address	jchankh@gmail.com
Address	BLK 402 BEDOK NORTH AVENUE 3 #13-255
Address complement	-
Postcode	460402
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	2
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNA1183C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-

NRIC No	SXXXX602J
Contact Number	(Phone) +65-97901221
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	CHAN KWANG HONG(ZENG GUANGHONG)
Gender	Male
Phone No	(Phone) +65-81136375
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SNL2638T
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 Authorised 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. 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.
 - (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.



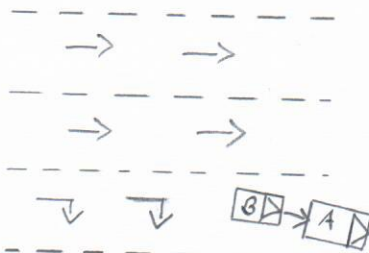
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

KEPPEL ROAD TURNING TO ANSON ROAD.



A: SNL 2638T

B: SNA 1183C

Describe Circumstances of the Accident

On 02/08/2023 at about 2016hrs, I was driving along Keppel Road turning to Anson Road, while waiting for the road clear before turning right. Suddenly vehicle B (SNA 1183C) bumped into my rear portion of my car.

Declaration

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



Policyholder's Signature / Date & Time

A handwritten signature in blue ink.

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

Witnessed by Reporting Centre Personnel

03/08/2023

IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 02/08/2023	TIME OF ACCIDENT : 2015hrs
VEHICLE NO : SNL2638T	TRANSMISSION : AUTO / MANUAL
MAKE & MODEL : Honda Shuttle	LOCATION : Keppel Road turning to Anson Road.
EXACT PURPOSE USE DURING ACCIDENT : EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	CLAIM TYPE : OD / THIRD PARTY / REPORTING ONLY
INSURANCE COMPANY : India International Insurance	POLICY NO : D23MFL0001749
TYPE OF COVERAGE : COMPREHENSIVE / THIRD PARTY / THIRD PARTY & THEFT	VEHICLE TYPE : (SALOON / COUPE/MPV/VAN/LORRY/MOTORCYCLE)
NAME OF OWNER : JY Leasing Pte Ltd	NRIC : 202232518R
ADDRESS : 53 Ubi Avenue 1 #01-44 Paya ubi Industrial Park S(408934)	CONTACT NO :
EMAIL ADDRESS : jchanh@gmail.com	VIDEO RECORDING : YES / NO
NAME OF DRIVER : AS ABOVE / IF NO : chan kwang Hong (Zeng Guanghong)	NRIC : S7412177B CONTACT NO : 8113 6375
DRIVER OWNER RELATIONSHIP :	PASSENGER : MALE (✓) FEMALE ()
DATE OF BIRTH : 23 / 04 / 1974	DRIVING PASSING DATE : 12 / 01 / 1996
OCCUPATION : INDOR / OUTDOOR	ADDRESS : BIK 402 Bedok North Avenue 3 #13-255 S(460402)
ANY INJURIES : NO, IF YES :	POLICE REPORT : NO / IF YES WHERE ?
WEATHER CONDITION : CLEAR / RAINING / OTHERS	ROAD SURFACE : DRY / WET / OTHERS
VEHICLE B REG NO : SNA 11830	VEHICLE C REG NO :
DRIVER NAME :	DRIVER NAME :
NRIC : S9519602J	NRIC :
CONTACT : 9790 1221	CONTACT :
VEHICLE D REG NO :	ANY WITNESS ? NO, IF YES :
DRIVER NAME :	NAME :
NRIC :	CONTACT :
CONTACT :	
WAS NOTICE OF PROSECUTION GIVEN? (YES / NO) IF YES, AGAINST WHOM :	WERE SEAT BELTS WORN ? : YES / NO
	WERE INJURY CONVEYED BY AMBULANCE : YES / NO

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1966 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

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

CERTIFICATE NO.: D23MFL0001749 **COVER:** Comprehensive

1. **Index Mark and Registration Number of Vehicle** : SNL2638T
Chassis No : GP72004103
2. **Name of Policyholder** : JY LEASING PTE. LTD.
3. **Effective date of Insurance** : 28 Jun 2023
4. **Expiry date of Insurance** : 23 Feb 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 I WITHIN SINGAPORE	: SGD	1,500.00
Excess Section I OUTSIDE SINGAPORE	: SGD	3,000.00
Excess Section II WITHIN SINGAPORE	: SGD	1,500.00
Excess Section II OUTSIDE SINGAPORE	: SGD	3,000.00
Windscreen Excess	: SGD	100.00
Hire Purchase Company	: Teck Wei Credit Pte Ltd	

SUNROOF EXCESS: \$200.00

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 I & II (SEPARATELY) WILL BE APPLICABLE.

AUTHORISED WORKSHOP: ACCIDENT REPAIRS MUST BE DONE AT MY CAR CONSULTANT PTE LTD. THE COMPANY WILL NOT PROVIDE INDEMNITY UNDER SECTION I OF THE POLICY IF THE MOTOR VEHICLE IS REPAIRED ELSEWHERE.

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 : A000089/CFHQ PTE. LTD.

Date of Issue : 30/06/2023 11:31:47

MZ406 - Hire Car (G/R)

For India International Insurance Pte Ltd


Nalini Venugopal
MD & CEO