

NATIONAL Assessment Centre Services

Date In: 24/11/2017 15:17	Job description	Date & Time Completed	Done by
Ref No: NA/FCI17022440/K4	SAS e-filing		
Veh No: 7N7103X	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 18/11/2017 08:00	i-Motor Claim Form		
OD TP: Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: HITCUB	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

NA1707267	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);	1st Bill	Add Bill
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:		
	OD*		
	*N5: Courtesy Car / Tpl 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 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 ability.
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 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 Report	24/11/2017 15:17
Date Of Accident	18/11/2017 08:00
Exact Location Of Accident	PUNGGOL RD TWDS SENGKANG
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN7103X
Insured/Policyholder	
Name Of Registered Owner	AETOS SECURITY MANAGEMENT PTE LTD
Co Reg No	-
Email Address	MURUGAN.ARUNACHALM@AETOS.COM.SG
Mobile Phone No	(LOCAL) +65-90870885
Alternative Phone No	OFFICE-90870885

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	SPRINTER
Exact Purpose for which vehicle was being used at time of accident	WORK

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D-17087376MFCV/9
Cover Note Number	

Driver

Name of Driver	RANJEET KUMAR S/O MUTHUSAMY
NRIC No	S8414330H
Date Of Birth	12/05/1984
Occupation	OUTDOOR
Date Of Driving Pass	27/03/2006
Driving Experience	11 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90870885
Fax Number	
Contact Number	OTHERS-90870885
Email Address	MURUGAN.ARUNACHALM@AETOS.COM.SG

Address	BLK 250 CHOA CHU KANG AVE 2
	#05-464
Postcode	680250
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT BY FALLEN TREE / OTHER OBJECTS
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE INCIDENT REPORT .

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REVERT
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	HITCURB
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

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.
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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 lodgment 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)**

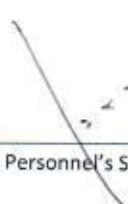
I understand, acknowledge, agree and consent that:

- (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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



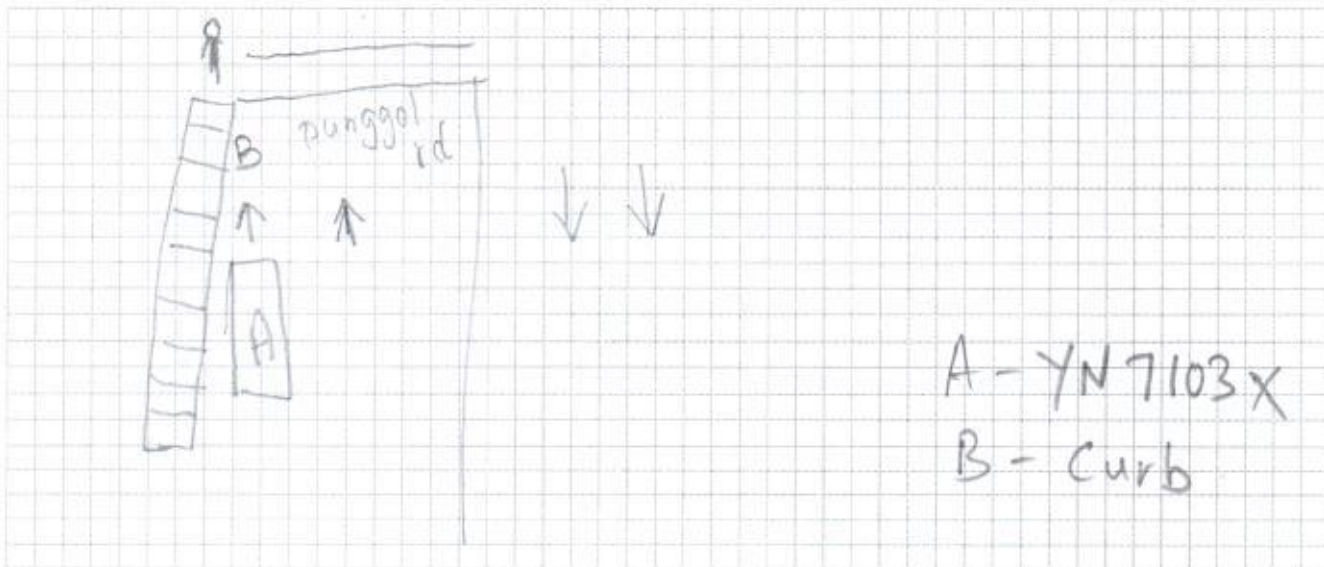
Policyholder's Signature
Date & Time:


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


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Punggol rd to Sengkang

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls Refer to the Incident Report

DECLARATION

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



Policyholder's Signature
Date & Time:

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

24/11/2017
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



AETOS AUXILIARY POLICE FORCE

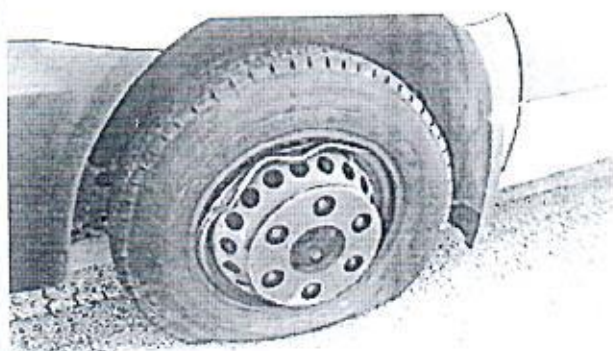
INCIDENT REPORT

Nature of Incident/Arrest		Location of Incident/Arrest	
SSB vehicle YN 7103 X Accident		Punggol Rd towards Sengkang	
Date/Day:	18 Nov 2017 (Saturday)	Informant:	PC (APF) T10688 Ranjeet Kumar
Time:	0800 hrs	Team:	Team SW 7 (CRD)
Particulars of Subject/s			
Name	:	PC (APF) T10688 Ranjeet Kumar	
Sex/Age	:	Male	
NRIC/FIN No:	:	S8414330H	
Nationality	:	Singaporean	
Address	:	NA	
Occupation	:	APO	
Company	:	AETOS SECURITY HOLDING PTE LTD	
Vehicle No	:	YN 7103 X	
Contact No	:	+65 9087 0885	

1. On the mentioned date and time, Informant driver PC (APF) T10688 Ranjeet Kumar together with Guardsman L/CPL (APF) T11191 Gan Chen Wea and RO PC (APF) T11146 Seet Chun Kit were on duty for section One (CRD) team SW 7. The mentioned team was on the way to replenish ATM machine id : at Punggol Field from the last location at Hougang ATM machine id :
2. While the vehicle travelling on the left lane along Punggol Rd towards Sengkang at about 60-70km/h before the traffic light junction of Sengkang West Ave found 01 metal object on the road, to avoid from run over the metal object driver swilled the vehicle to the left and mount the front tyre on the curb follow by the rear tyre hit the curb, cause the front and rear left rim dented and the both tyre burst.
3. Driver called SSB OPS Centre and informed OPS In Charge SGT (APF) 9401 Ravindran on the incident. ACC DO Insp. Azroy was informed about the incident and activated Response Team. At about 0830hrs OPS In Charge SGT (APF) 9401 and ATL CPL (APF) 5873 left Aetos Complex with the replacement vehicle YP 3608 Y to the incident location.
4. At 0849 hrs Response Team L/CPL (APF) T10602 and WPC (APF) T08143 arrived at location. At 0900 hrs SGT (APF) 9401 and ATL CPL (APF) T05873 arrived at location with the replacement vehicle and transfer all the cassettes from YN 7103 X to YP 3608 Y safely after ensure the location is safe to transfer the cassettes. Completed transfer all the cassettes at 1010 hrs. Team SW 7 resumed duty at 1015 hrs with the vehicle YP 3608 Y after done a security checked on the accident vehicle to ensure there is no items left behind. At 1020 hrs Response Team resumed rounds.
5. At 1022 hrs tow truck YN 7890 G arrived at location, driver Mr Bai Xiaowei (G 5348621 K).At 1050 hrs vehicle YN 7103 X towed away to Cycle & Carriage.
6. PC (APF) T10688 Ranjeet Kumar is driving Aetos vehicle for the past 2 years and with 10 years of driving experience.

Declaration:





The above incident report was read over and explained to me in English and I affirmed it to be true, correct and No injuries not require medical attention. I was offered to make any changes to the incident report but I declined.

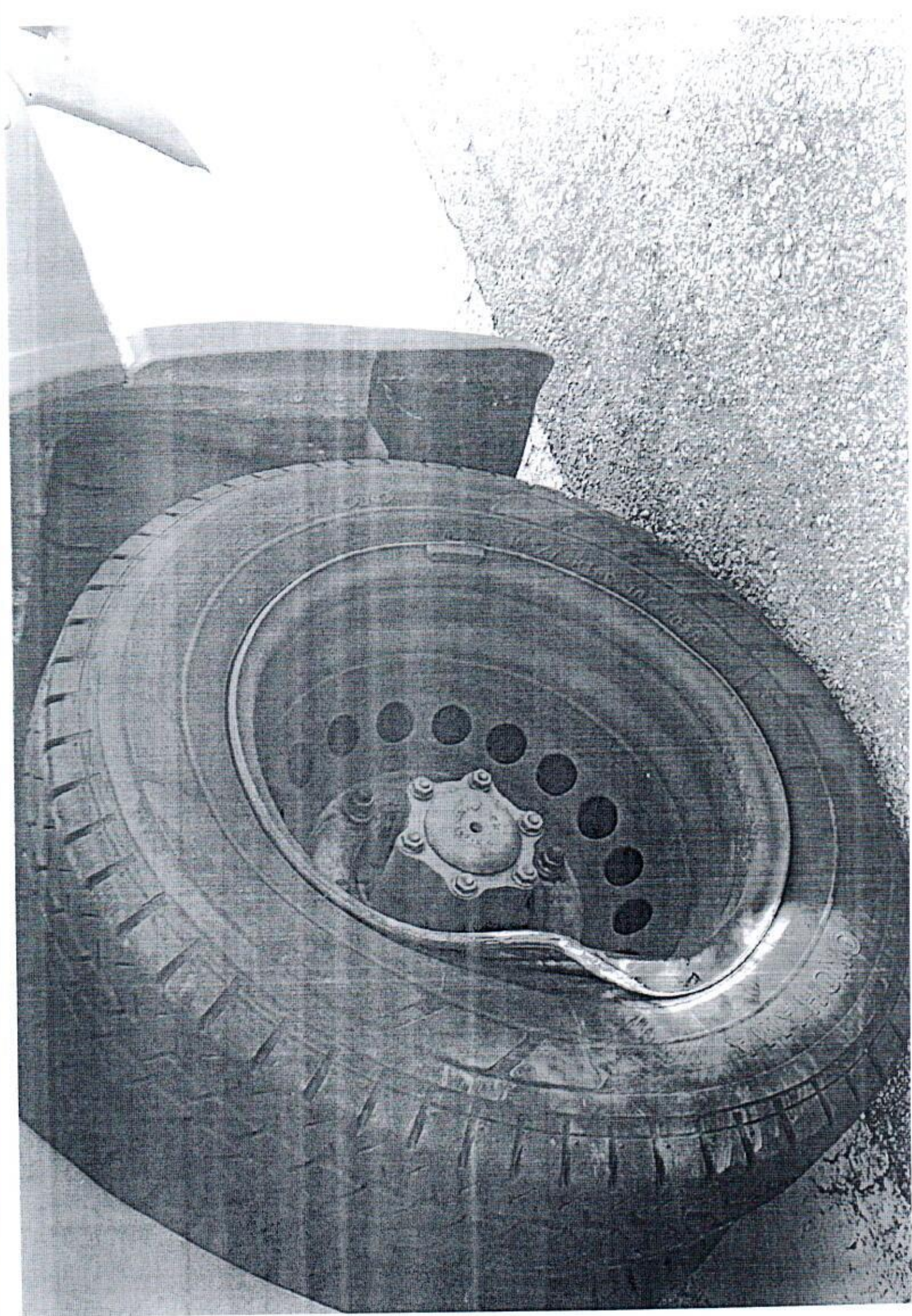


Front Left Wheel



Rear Left Wheel

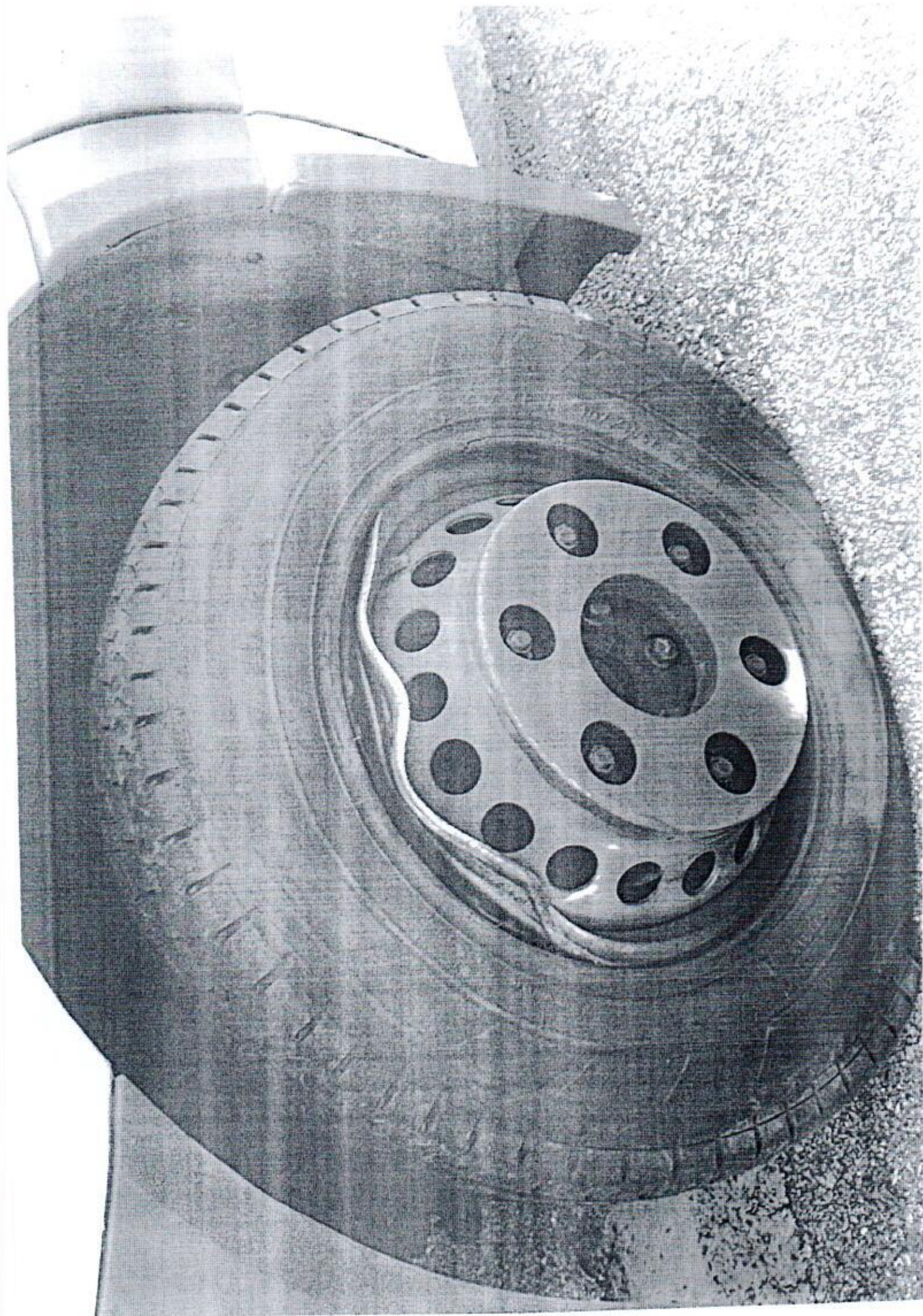
Recorded by : CPL (APF) T05873 VIVEK SAMUEL P	Signature: 	Date : 18.11.2017(Sat)
Ops Driver : PC 10088 Ranjeet Kumar	Signature: 	Date : 18/11/17
Replenish Officer : LCP 11146 Seet Chen Kit	Signature: 	Date : 20/11/17
Guardzman : LCP 11191 Gan Chen Wea	Signature: 	Date : 20/11/17



AETOS



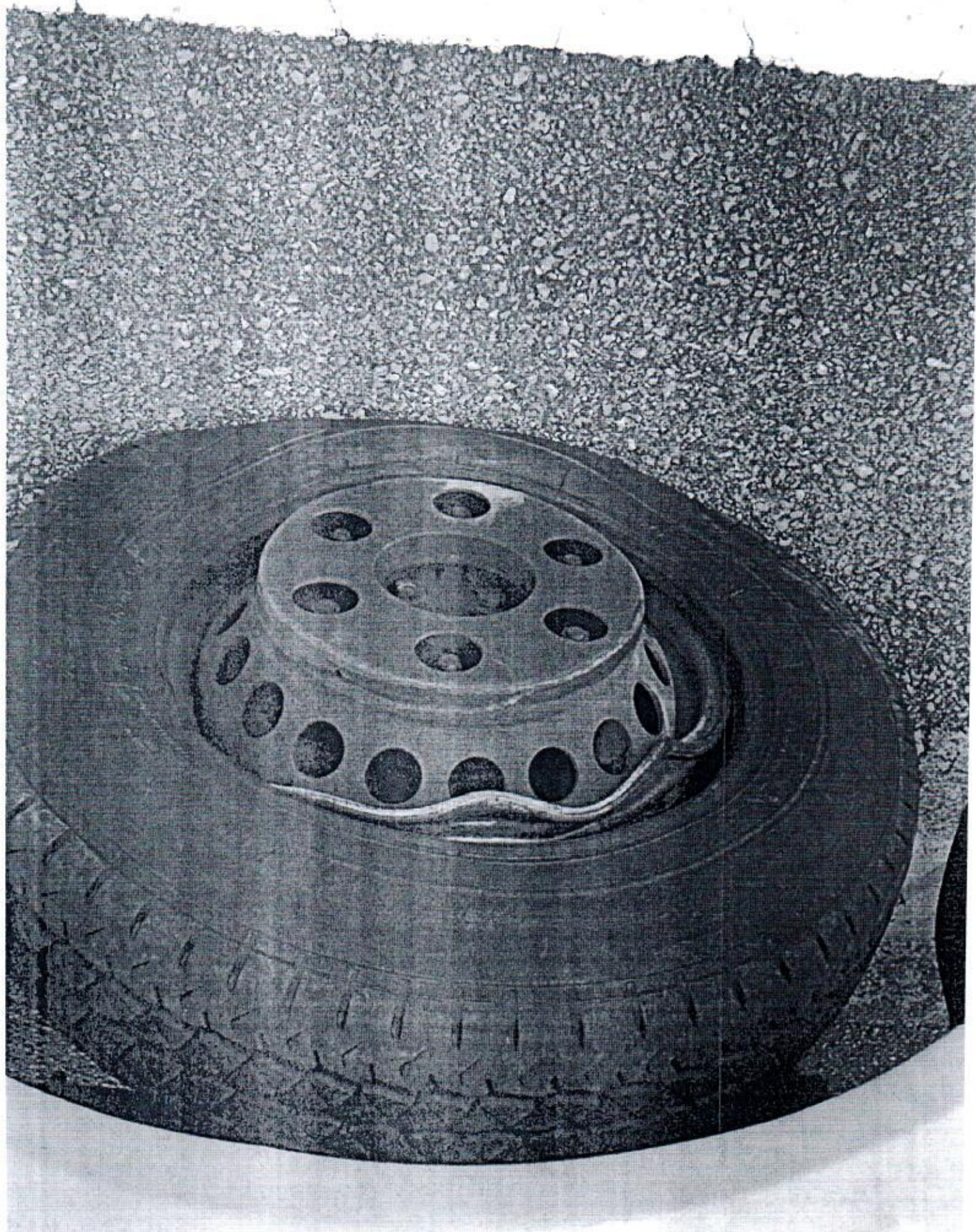
YN7103X



AELOS



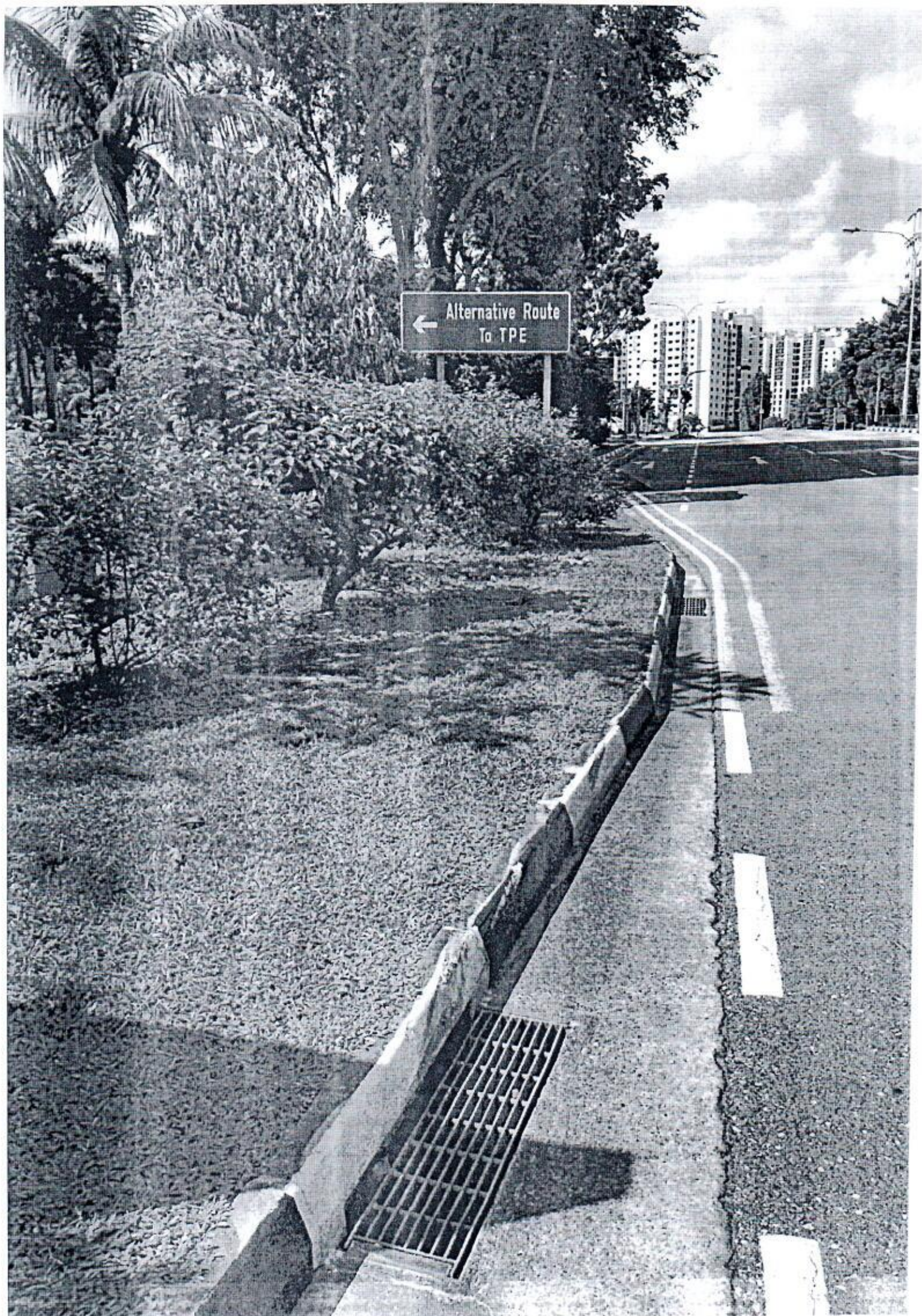
YN 7103X











Reported on 24/11/2017
@ 1455HRS.

ACCIDENT STATEMENT

ACCIDENT DATE: (18/11/2017) (DD/MM/YYYY), TIME: (08:00) (HH:MM) AM

LOCATION: Punggol Rd towards Sengkang.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: YN7103X
b) INSURANCE COMPANY: _____
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: _____
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) ☒ YES ☐ NO
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 90870885
c) ADDRESS: _____

*d) DATE OF BIRTH: (____/____/____) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: _____

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) _____
b) ROAD SURFACE: (DRY / WET / OTHERS) _____

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: Curb MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

*No of passengers
(including driver)
(3)

*No of passengers
(including driver)
()

*No of passengers
(including driver)
()

Mar 11 Time

Insurance

agreed
to do the

AIA report? without the vehicle
24/11/2017 present at idoc.
@ 1524HRS.

Email = Murugan.arunachalam@aetos.com.sg
fax =
HP: 85697790

Waiting for Vehicle Photos?

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8414330H**



Name

**RANJEET KUMAR S/O
MUTHUSAMY**

Race

INDIAN

Date of birth

12-05-1984

Sex

M

S8414330H

Country of birth

SINGAPORE

3905736



NRIC No. **S8414330H**

Date of issue

14-07-2006

APT BLK 250 CHOA CHU KANG AVENUE 2 #05-464
SINGAPORE 680250

NRIC No: **S8414330H**

Date: **21/11/2007 (R)**

No: **5857683**

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8414330H**
Name **RANJEET KUMAR S/O MUTHUSAMY**

Birth Date: **12 May 1984**
Issue Date: **30 Dec 2009**





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg

PASS DATE

27 Mar 2006

NP 428A



CERTIFICATE OF INSURANCE

ORIGINAL

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)

Type of Policy. : COMMERCIAL VEHICLE - FLEET
Type of Cover. : Comprehensive
Certificate No. : D-17087376MFCV/9
Vehicle No / Chassis No : YN7103X / WDB9066532S921650
Name of Insured : AETOS SECURITY MANAGEMENT PTE LTD
Period Of Insurance : 01.01.2017 To 31.12.2017
Insured Estimated Value : Market Value At Time Of Loss
Financial Institution : N/A

Excess :

SGD750.00 SECTION I

AN EXCESS OF SGD3,000.00 ON SECTION II IS IMPOSED ON THOSE DRIVERS WHO
ARE BELOW 22 YEARS OLD AND/OR WHO HAVE LESS THAN 2 YEARS OF DRIVING
EXPERIENCE

Authorised Driver*

ANY AUTHORISED DRIVERS

Persons or classes of persons entitled to drive*

Any person who is driving on the insured'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.

Limitations as to use*

- (1) Use in connection with the insured's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the insured's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover:-

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

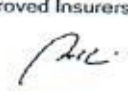
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section
95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

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)

First Capital Insurance Limited
(Approved Insurers)

SUSAN/B0009/MZ300C

Issued at Singapore on 20.03.2017


Authorised Signature