

NATIONAL Assessment Centre Services

Date In: 09/01/2018 14:43	Job description	Date & Time Completed	Done by
Ref No NA/AIG18000522/K4	SAS e-filing		
Veh No SLP2983Z	E-mail (within 8hrs, AIC 2hrs)		
D.O.A 08/01/2018 17:30	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: SJH2810E	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	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

<p>NA1800247</p> <p>Claimant's Particulars :-</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments :-</p> <p>Cat. 1:</p> <p>Cat. 2/3:</p>	<p>Invoice Preparation Checklist</p> <table border="1"> <tr> <th></th> <th>Am't (\$)</th> <th>Am't (\$)</th> </tr> <tr> <td>1) AR: Accident Reporting (\$30);</td> <td></td> <td></td> </tr> <tr> <td>2) DA: Damage Assessment (\$100); INC (\$30)</td> <td></td> <td></td> </tr> <tr> <td>3) TF: Towing Fee \$40/\$45</td> <td></td> <td></td> </tr> <tr> <td>4) FT: Follow-Through Survey \$120</td> <td></td> <td></td> </tr> <tr> <td>5) FT: Follow-Through Survey (Resurvey) \$30</td> <td></td> <td></td> </tr> <tr> <td colspan="3">For claiming against INC Only (wef 10 Jan 2005)</td> </tr> <tr> <td>6) TR: Re-inspection \$75</td> <td></td> <td></td> </tr> <tr> <td>7) NI: Idac DA + SMRT Survey \$160</td> <td></td> <td></td> </tr> <tr> <td>8) NTUC Additional Services:-</td> <td></td> <td></td> </tr> <tr> <td>OP*</td> <td></td> <td></td> </tr> <tr> <td>*N5: Courtesy Car / Tpt Allowance \$5</td> <td></td> <td></td> </tr> <tr> <td>*N6: Repair Co-ordination \$10</td> <td></td> <td></td> </tr> <tr> <td>*N7: Post Repair Inspection \$25</td> <td></td> <td></td> </tr> <tr> <td>*N8: DV / Collect Excess Coordination \$3</td> <td></td> <td></td> </tr> <tr> <td>TP (N11): TP (Non INC) against INC \$20</td> <td></td> <td></td> </tr> <tr> <td>9) N12: Idac Mobile 30</td> <td></td> <td></td> </tr> </table> <p>Fee Charged</p> <p>Invoice dated</p> <p>Fee Charged</p>		Am't (\$)	Am't (\$)	1) AR: Accident Reporting (\$30);			2) DA: Damage Assessment (\$100); INC (\$30)			3) TF: 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: Idac DA + SMRT Survey \$160			8) NTUC Additional Services:-			OP*			*N5: Courtesy Car / Tpt Allowance \$5			*N6: Repair Co-ordination \$10			*N7: Post Repair Inspection \$25			*N8: DV / Collect Excess Coordination \$3			TP (N11): TP (Non INC) against INC \$20			9) N12: Idac Mobile 30		
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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	09/01/2018 14:43
Date Of Accident	08/01/2018 17:30
Exact Location Of Accident	UPPER PAYA LEBAR TURNING TO BARTLEY RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP2983Z
Insured/Policyholder	
Name Of Registered Owner	SIM CHOON KHIANG (SHEN JUNQIANG)
NRIC No	S8000548B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90077148
Alternative Phone No	OTHERS-90077148

Vehicle Particulars

Manufacturer	SUBARU
Model	FORESTER 2.0I-L
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700010842
Cover Note Number	

Driver

Name of Driver	SIM CHOON KHIANG (SHEN JUNQIANG)
NRIC No	S8000548B
Date Of Birth	09/01/1980
Occupation	OUTDOOR
Date Of Driving Pass	13/01/2004
Driving Experience	13 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90077148
Fax Number	
Contact Number	OTHERS-90077148
Email Address	NOEMAIL

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.
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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.:

SKETCH PLAN

A - SLP 2983A

B - SJH 2810E

upper
paya
lebar
turning
to
Bartley
Road

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time, I was driving along upper paya lebar slip Road to Bartley Road, when suddenly, vehicle 'B' rear ended me.

Passenger of: Suhaini (F)

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 & Time:

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

Email: sm@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 08/01/2018 (dd/mm/yy) Time of Accident: 17:30 (24-HR-FORMAT)
Vehicle No.: SLP 2983A Vehicle Make & Model: Subaru Forester
Exact location of Accident: Upp Paya Lebar Turning to Bartley Rd.
Policyholder's Name / IC No.: Sim Chuan Kheng (Shen Jung, my) / 580005488
Driver's Name / IC No.: _____ (As Above) ☒
Driver's Contact No.: 96077148 Company Contact No.: _____
Driver's Address: Blk 451A Serangoon West way #17-361 S 791451
Insurance Company: ALG Email address (if any): _____

Relationship between Owner & Driver: (Please **CIRCLE** one only)

☒ Owner / ☐ Spouse / ☐ Children / ☐ Friend / ☐ Parents / ☐ Sibling / ☐ Relative / ☐ Employee / ☐ Hirer or Others specify: _____

What do you wish to claim? (Please **TICK** one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident?

☒ Private use / ☐ Work purpose

Occupation (nature of job) ☐ Indoor / ☒ Outdoor

No. of Passengers (Including Driver): 02

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No.: _____ Vehicle No: SJH 2810E

Driver's Contact No.: _____ Insurance Company (If any): _____

2. Driver's Name / IC No.: _____ Vehicle No: _____

Driver's Contact No.: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

4634408



NRIC No. S8000548B



Date of issue
01-10-2010

APT BLK 451A SENGKANG WEST WAY #17-361
SINGAPORE 791451

NRIC No: S8000548B Date: 29/05/2014


YOU ARE PERMITTED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIE

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	19 Nov 1998
Class 3 Motor cars and Motor Tractors the weight unladen does not exceed 2500 kg	13 Jan 2004

S8000548B



S / No. 9000015935

Licence No: S8000548B



NP 428A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8000548B

Name
SIM CHOON KHIANG
(SHEN JUNQIANG)



沈俊强

Race
CHINESE

Date of birth
09-01-1980

Sex
M

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8000548B

Name:
SIM CHOON KHIANG
(SHEN JUNQIANG)

Birth Date: 09 Jan 1980

Issue Date: 11 Nov 2003




0009936388



CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Sim Choon Kheng (Shen Junqiang)
Period of Insurance : 31 May 2017 To 30 May 2018
Engine No. : PB20Y677229
Chassis No. : JF12J9KC3H0088737

Vehicle No. : SLP29832
Policy No. : 1706010842
Endorsement No. :
Issued Date : 16 Jun 2017

ABOUT THE COVER

Make/Model : SUBARU/Forester 2.0i-L
Engine Capacity/Tonnage : 1,995.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
Insuring with COE/PAFF : Yes

Person or Classes of Persons Entitled to Drive*

a) The Policyholder
to Any other person who is driving on the Policyholder's order or with his/her permission
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or
business or use for any purpose in connection with Motor Trade
You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDE") if You are or Your Authorized Driver (named or unnamed) is under the age of 23 and/or has less
than 3 years' driving experience.

Age Condition : All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or
business or use for any purpose in connection with Motor Trade

Loss of Use (10 days) 1500cc - 1600cc

* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be
included under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Sim Choon Kheng (Shen Junqiang) - \$800 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Motor Image Enterprises Pte Ltd. Add: 19 Lorong 8 Toa Payoh Singapore 316255 64170100

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg
or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

* We hereby certify that this policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Part IV of
the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third-Party Risks) Rules, 1989 (Malaysia).

0500619227

TAN CHONG CREDIT SUBARU-CXL
911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE
SINGAPORE 589622

AIG Asia Pacific Insurance Pte. Ltd.
Singapore 0500619227