

NATIONAL Assessment Centre Services

(wef 1 Jan 05)

MNA118004731

Date In: 10/01/18 13:26	Job description	Date & Time Completed	Done by
Ref No: NA1 AIG 18000594164	SAS e-filing		
Veh No: SGV 4576 E	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 911119 08:00	i-Motor Claim Form		
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SKS SG22 S	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

NA1800284	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
		1st Bill	Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);	30.00	
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		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QD:		
	*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 (N11) against INC \$20		
	9) N12: Idao Mobile 30		
Auditors' Comments:-	Invoice dated	Fee Charged	
at 1:	Invoice dated	Fee Charged	
at 2/3:			

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 10/01/2018 13:26
 Date Of Accident 09/01/2018 08:00
 Exact Location Of Accident ALONG TOA PAYOH LOR 8
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGV4576E
Insured/Policyholder
 Name Of Registered Owner KENNETH TANG SENG KHAI
 NRIC No S7629820C
 Email Address NOEMAIL
 Mobile Phone No (LOCAL) +65-94518733
 Alternative Phone No OFFICE-94518733

Vehicle Particulars

Manufacturer MAZDA
 Model MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
 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 2100410397-02000
 Cover Note Number -

Driver

Name of Driver KENNETH TANG SENG KHAI
 NRIC No S7629820C
 Date Of Birth 03/10/1976
 Occupation INDOOR
 Date Of Driving Pass 05/01/1998
 Driving Experience 20 YEARS AND 0 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-94518733
 Fax Number
 Contact Number OFFICE-94518733
 Email Address NOEMAIL

Address	BLK 245 BISHAN ST 22 #06-312
Postcode	570245
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKS5622S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

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 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:

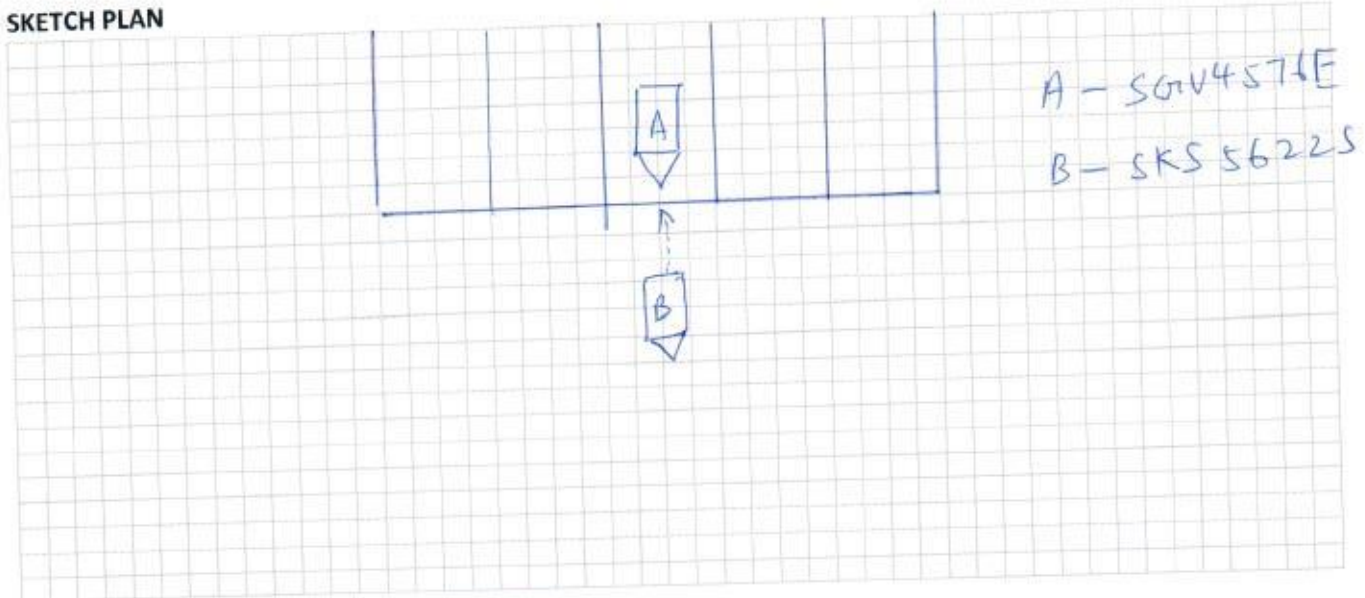


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the police report T/20180109/2036

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.:

Date of Accident: 9/1/2018	Accident Time: 08:00	
Vehicle (A) No: SGV4576E	Make Model: Mazda 3	
Location: Along Toa Payoh Lor 8		
Owner Name: Tang Seng Khai		
Owner Address: BIK 245 Bishan St 22 #06-312 9570245		
Owner NRIC: 57629820C	Email:	
HP: 94518733	Home:	Office:
Insurance Company: AIG (Comprehensive / Third Party / Third Party Fire & Theft)		Insurance Policy No:
Driver Name:		
Driver NRIC: } as above	Date of Birth: 3/10/1976	
Driver Contact No:	Occupation: instructor	
Driving License Pass Date: 05/01/1998	Relationship With Owner: owner	

Claiming Under: (Own Damage Claim / Third Party Claim / Reporting Only)

Weather Condition: (Clear / Raining / Drizzling / After Rained)

Road Surface: (Wet / Dry)

Damage Portion of Vehicle(A): Rear / Front / Right Side / Left Side / Chain Collision

Anyone Injured: YES / NO	Name:
Police Report: YES / NO	If YES, Where: 10 Ubi Ave 3
Passenger In Vehicle (A):	
Witness Name:	NRIC: HP:

Vehicle (B) No: SKS 56223	Vehicle (C) No:
Driver Name:	Driver Name:
Driver NRIC:	Driver NRIC:
Contact No:	Contact No:
Insurance: NTUC	Insurance:
Damage portion of vehicle(B):	Damage portion of vehicle(C):

Vehicle (D) No:	Vehicle (E) No:
Driver Name:	Driver Name:
Driver NRIC:	Driver NRIC:
Contact No:	Contact No:
Insurance:	Insurance:
Damage portion of vehicle(D):	Damage portion of vehicle(E):



SINGAPORE POLICE FORCE



T/20180109/2036

1 of 3

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

Report No. T/20180109/2036

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/01/2018 11:09	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: KENNETH TANG SENG KHAH			Address: APT BLK 245 BISHAN ST 22 #06-312 HDB-BISHAN SINGAPORE 570245	
ID Type / ID No.: NRIC NO / S7629820C			Contact No.: Home/Office:	Mobile: 94518733
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 41	Date of Birth: 03/10/1976	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: ELECTRONIC ENGINEER			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 09/01/2018 08:00	Type of Location: Car Park
Location: Along Road 1 LORONG 8 TOA PAYOH CARPARK NEXT TO MARYMOUNT KINDERGARTEN				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Hit And Run			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGV4576E	Car	MAZDA	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT	Grey		0
SKS5622S	Car	TOYOTA	COROLLA ALTIS 1.6 AUTO	Silver		0



**SINGAPORE
POLICE FORCE**



T/20180109/2036

2 of 3

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

Report No. T/20180109/2036

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGV4576E	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100410397	08/04/2017	07/04/2018

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Driver				
Name	KENNETH TANG SENG KHAI		ID No.	S7629820C
Related Vehicle	SGV4576E (Car)		Contact No.	94518733
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION,

I PARKED MY VEHICLE AT ABOUT 0752HRS. AT ABOUT 0830HRS I CAME BACK TO MY VEHICLE AND NOTICE A DENT ON MY FRONT PESSANGER SIDE BUMPER. ACCORDING TO MY IN-CAR CAMERA FOOTAGE AT 0802HRS, (SKS5622S) MADE A RIGHT TURN FIRST AND REVERSED AND HIT ONTO MY FRONT PESSANGER SIDE AND JUST DROVE OFF WITHOUT LEAVING A NOTE OR WHAT SO EVER.



**SINGAPORE
POLICE FORCE**



T/20180109/2036

3 of 3

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

Report No. T/20180109/2036

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
TP /
NICHOLAS YEO HAO QUAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
SI ABDUL KAREEM BIN ABDUL HAGUE
Contact No.: 65476079

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
09/01/2018 11:09

Classification Of Case:



**SINGAPORE
POLICE FORCE**

Signature: _____

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7629820C**

Name: **KENNETH TANG SENG KHAI**

Birth Date: **03 Oct 1976**

Issue Date: **21 Jun 2004**

001243646K




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7629820C**

Name: **KENNETH TANG SENG KHAI**

董成凱

Race: **CHINESE**

Date of birth: **03-10-1976**

Sex: **M**

Country of birth: **SINGAPORE**





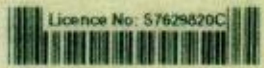
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg

PASS DATE: **05 Jan 1998**

NP 428A

Licence No: **S7629820C**



3925627

NRIC No: **S7629820C**

Date of issue: **15-08-2006**

APT BLK 245 BISHAN STREET 22 #06-312 SINGAPORE 570245

NRIC No: **S7629820C** Date: **04/12/2012** No: **7152626**




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)

M.X.1

TRANS EUROKARS AUTO PROTECTOR

CERTIFICATE NO. 2100410397-02000

(The below excess is subject to GST)

OWN DAMAGE EXCESS S\$600.00 (1)
WINDSCREEN EXCESS S\$100.00

(Windscreen excess is waived if the repair is done at Trans Eurokars Pte Ltd)

SUM INSURED Market Value**INSURING WITH COE/PARF** Yes

SGV4576E

Kenneth Tang Seng Khai

1) VEHICLE REGISTRATION NO.**2) NAME OF INSURED****3) EFFECTIVE DATE OF THE COMMENCEMENT
OF INSURANCE FOR THE PURPOSES OF THE ACT**

8 Apr 2017

4) DATE OF EXPIRY OF INSURANCE

7 Apr 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE***SUBJECT TO AGE CONDITION : All Age Condition**

a) The Insured.

b) Any other person who is driving on the Insured's order or with his permission.

This policy will indemnify the insured or any authorised driver only if he/she meets the age conditions.

A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition to the Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.

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) LIMITATION AS TO USE*

Use only for social, domestic and pleasure purposes and for the Insured's business.

The Policy does not cover use for hire or rewards, tuition, driving test, racing, pace-making, reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

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

1. Trans Eurokars Pte Ltd - No. 5 Ubi Close (Tel: 63958899)
2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501)
4. Ethoz - 30 Bukit Batok Cres (Tel: 66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only
6. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 7. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)
8. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)
10. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)

LOSS OF USE Loss of Use 10 Days (1500 - 1600cc) - Refer to policy wordings for details*** NAMED DRIVER** NA**HIRE PURCHASE COMPANY / EMPLOYER'S LOAN** HONG LEONG FINANCE 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).

Issued in Singapore 15 Mar 2017

AIG Asia Pacific Insurance Pte. Ltd.

503599-190
ARF (AP) PTE LTD - MAZDA
7 MAXWELL ROAD #01-100
ANNEX B MND COMPLEX
SINGAPORE 069111


AUTHORISED REPRESENTATIVE**ORIGINAL**

SSCFKJ