

NATIONAL Assessment Centre Services

Date In: 12/02/18	Job description	Date & Time Completed	Done by
Ref No: NA/01418002817/13	SAS e-filing		
Veh No: SCT8555R	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 09/02/18 1220	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: (	ETHICARZ	Tel:	Fax:
TP Particulars:	Veh No: SR2069B	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

Claimant's Particulars:-	NA1800916	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
Driver/Owner:		1) AR: Accident Reporting (\$30);	1st Bill	Add Bill
Contact No:		2) DA: Damage Assessment (\$100); INC (\$30)		
Damaged Portion:		3) TP: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):		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: 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 \$5		
		TP (N11): TP (N'n INC) against INC \$20		
		9) N12: Idac Mobile 30		
Cat. 1:		Invoice dated	Fee Charged	
Cat. 2 / 3:		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 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 12/02/2018 18:36
 Date Of Accident 09/02/2018 12:20
 Exact Location Of Accident MANDAI AVE SLIP RD TO SEMBAWANG RD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLT8555R
Insured/Policyholder
 Name Of Registered Owner KARAVAN CAR
 Co Reg No -
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-98198243

Vehicle Particulars

Manufacturer KIA
 Model K3
 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 HIRE

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number 1700077136
 Cover Note Number

Driver

Name of Driver TAN KENNER
 NRIC No S9706199H
 Date Of Birth 29/01/1997
 Occupation INDOOR
 Date Of Driving Pass 07/04/2016
 Driving Experience 1 YEAR AND 10 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-93867268
 Fax Number
 Contact Number
 EMail Address NOEMAIL

Address	BLK 120B CANBERRA CRESCENT #12-371
Postcode	752120
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

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 this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	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)	5
Passenger 1	NAME: : CHOW THUAN YEN GENDER: : FEMALE
Passenger 2	NAME: : GAN CHOON PING GENDER: : MALE
Passenger 3	NAME: : LEE SI YING CHERLY GENDER: : FEMALE
Passenger 4	NAME: : REENA TAN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180210/2020

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJR2069B
Vehicle Make/Model/Colour	TOYOTA
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)	

DETAILS OF INJURED PERSON 1

Name	TAN KENNER
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SLT8555R
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

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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.

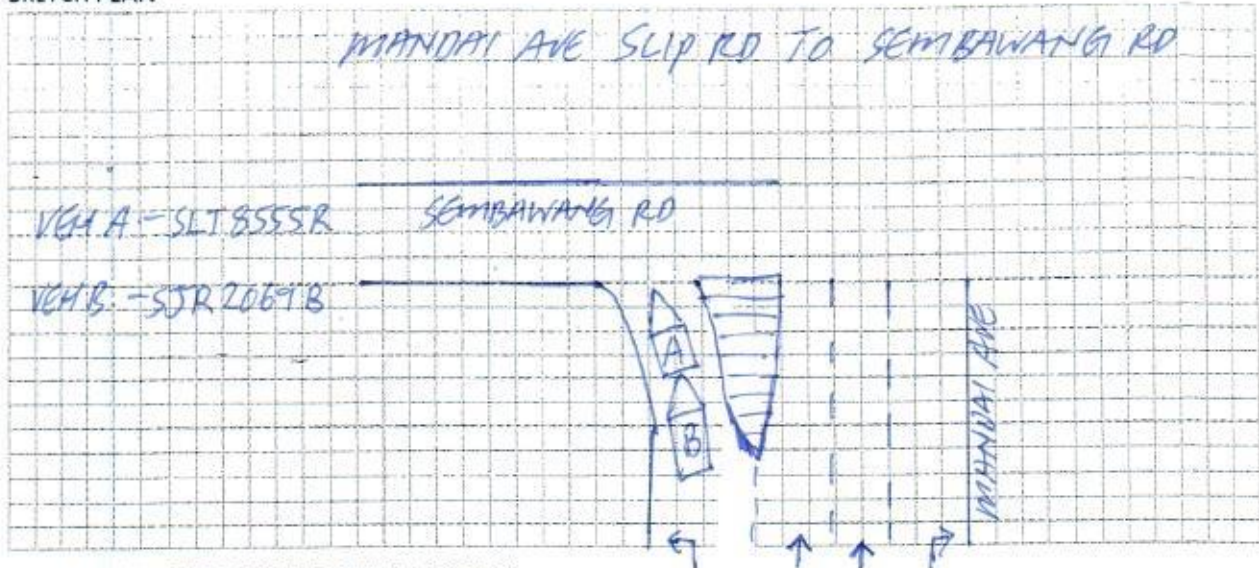


Policyholder's Signature
Date & Time:


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

 12/02/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE STATED DATE AND TIME. I, VEHICLE 'A' WAS TRAVELLING ON THE STATED VENUE. AS I SLOW DOWN MY VEHICLE AT THE SLIP ROAD TOWARDS SEMBAWANG ROAD, SUDDENLY, VEHICLE 'B' BANG ONTO MY VEHICLE CAUSING DAMAGES TO THE REAR PORTION.

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.:



Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20180210/2020

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/02/2018 07:28	Vide Report No.:	Station Diary No.: 35
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Informant's Particulars

Informant's Particulars			
Name of Informant: TAN KENNER			Address: APT BLK 120B CANBERRA CRESCENT #12-371 SINGAPORE 752120
ID Type / ID No.: NRIC NO / S9706199H			Contact No.: Home/Office: Mobile: 93867268
Nationality: SINGAPORE CITIZEN			Email:
Sex: Male	Age: 21	Date of Birth: 29/01/1997	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Student		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/02/2018 12:20	Type of Location: Bend
Location: Along Road 1 MANDAI AVENUE SEMBAWANG ROAD Along Mandai Avenue Slip Road towards Sembawang Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJR2069B	Car				Slightly Damaged	0
SLT8555R	Car				Slightly Damaged	0

Details of Person Involved

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180210/2020

2 of 3

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20180210/2020

CONTINUATION OF REPORT

Driver Name	TAN KENNER	ID No.	S9706199H
Related Vehicle	SLT8555R (Car)	Contact No.	93867268
Hospital/Clinic	ATRIO FAMILY CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	10/02/2018	Date Discharge	10/02/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver Name	Pirakash S/O Ramarishnan	ID No.	S8327701G
Related Vehicle	NIL	Contact No.	91070701
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL 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 09/02/2018 at around 1218hrs , I was driving my car along Mandai Avenue slip Road merging into Sembawang Road in the direction towards Yishun. I slowed down my vehicle along the slip road before merging into Sembawang Road and all of sudden another car , vehicle no SJR 2069 B , collided into the rear of my vehicle. We stopped and exchanged particulars. After the accident , I felt pain at my neck and seek medical treatment at a private GP Clinic and was given 3 days MC.



Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20180210/2020

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:

F /

Staff Sgt ZENG ZHIMIN, KEVIN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Signature Of Informant:

Date/Time:

10/02/2018 07:28

Classification Of Case:

SN 085

Authentication Stamp
NP168



Signature:

Singapore Police Force

Date of Accident : 9/2/2018 Accident Time: 12.18 (24-HR-Format)
 Accident Place : MANDAI AVE : SLIP ROAD TO SEMBAWANG RD
 Vehicle. No. (Car Plate No.) : SLT 8555 R Make/Model: KIA K3
 Insurance Company : AIG Policy No: 1700077136
 Owner or Company Name /IC No. : KARAVAN CAR
 Owner or Company Contact No. : 98198243 Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : TAN KENNER 59706199H
 DRIVER'S Date Of Birth : 29/01/1997 DRIVER'S License Pass Date 07/04/2016
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : BLK 120 B CANBERRA CRESCENT #12-371
 DRIVER'S Contact No./ Alt No. : 1) 93867268 2) _____
 DRIVER'S Occupation : INDOOR OUTDOOR (e.g. working inside or outside office)
 Email Address : KENNERTAN@GMAIL.COM
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 05
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): _____

Other Party Driver's Particular (if any)

Vehicle. No: <u>(B) SJR 2069 B</u>	Vehicle. No: _____
Vehicle Make/Model: <u>TOYOTA</u>	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

REPORTING@ETHICARZ.SG

*** NEW - Passenger's name & gender:**

CHOW THUAN YEN - FEMALE
LIAT CHOOM PING - MALE
LEE SI YING CHERLY - FEMALE
REGNA TAN - FEMALE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9706199H



Name

TAN KENNER

陈 凯 乐

Race

CHINESE

Date of birth

29-01-1997

Sex

M

Country/Place of birth

SINGAPORE

S9706199H

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S9706199H

Name

TAN KENNER

Birth Date: 29 Jan 1997

Issue Date: 07 Sep 2016



002607014E

5400752



NRIC No: S9706199H



Date of issue
29-04-2016

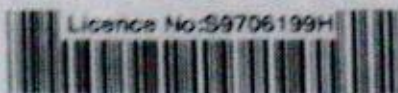
APT BLK 120B CANBERRA CRESCENT #12-371
SINGAPORE 752120

NRIC No: S9706199H Date: 30/08/2017

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

EFFECTIVE DATE

Class 1 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ 07 Apr 2016



Licence No: S9706199H

SP 172A



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : KARAVAN CAR
Period of Insurance : 15 Nov 2017 To 14 Nov 2018
Engine No. : G4FGHH685423
Chassis No. : KNAFX411MJ5752050

Vehicle No. : SLT8555R
Policy No. : 1700077136
Endorsement No. :
Issued Date : 15 Nov 2017

ABOUT THE COVER

Make/Model : KIA Cerato K3 1.6 EX

Engine Capacity/Tonnage : 1591 Tonnage

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2017

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*

Any person who is driving on the Policyholder's order or with their permission.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if you are or Your Authorised Driver (named or unnamed) is under the age of 25 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use*

Use for the carriage of passengers or goods in connection with the Policyholder's business. Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired. This Policy does not cover:

1) use for driving tuition, driving test, racing, pace-making, reliability test or speed-testing;

2) use whilst driving a vehicle except the towing of a trailer for a disabled vehicle; and

3) use for the carriage of passengers for hire or reward by any person for whom the Vehicle is hired; or use for any purpose in connection with Motor Trade.

Limitations provided independent by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 188) and Section 92 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$2000 Theft - \$0 Flood Cover - \$2

Section 2

Property Damage - \$2000

Windscreen : \$100

Named Driver and Excess (where applicable)

TAN KHENG HUAT - \$2000 (Own Damage) \$2000 (Property Damage)

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

1. Cycle & Carriage Customer Service Centre (For windscreen claim only): Add: 330 Ubi Rd 3 Singapore 408655 67461000
2. Cycle & Carriage Body & Paint Centre: Add: 209 Pandan Gardens Singapore 606226 69664501

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour Accident Emergency hotline at +65 6718 4205. Alternatively, you may refer to AIG website www.aig.com.sg or AIG 360 Mobile App. Simply search and download "AIG 360" from iTunes or Google Play.

IMPORTANT NOTES

If the vehicle is used for the carriage of passengers for hire or reward, each driver shall be named under the Policy and registered with an intermediary which facilitates the carriage of passengers for hire or reward. Should you decide to include any other driver, please indicate. (Company reserves the right to accept/reject the inclusion of any Named Drivers).

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

We hereby certify that the 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. 188), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia).

0500708912

CYCLE & CARRIAGE - GARYQ08A

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Smile

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE