

Date In: 26/12/18 15:12	Job description	Date & Time Completed	Done by
Ref No: NA/18003590/hy	SAS e-filing		
Veh No: SKW 1149Y	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 25/12/18 12:35	i-Motor Claim Form		
OD: <input checked="" type="checkbox"/> Reporting Only	i-Motor W/O (Within: OD 3hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

SHD 7101E

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 &amp; 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 &amp; Time Completed

Done by

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo [Repair Cost &gt; \$3000] ( )

Injury:

Date/Time

Actions

## Invoice Preparation Checklist

Amt (\$)

Amt (\$)

Inc Bill

Add Bill

Claimant's Particulars:-

1) AR: Accident Reporting (\$30)

30.00

2) DA: Damage Assessment (\$300)

INC (\$30)

3) TP: Towing Fee

\$40.545

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: Idas DA + SMRT Survey

\$160

8) NIUC Additional Services:-

QDI:

• NI: Courtesy Car / Tpl Allowance

\$5

• NI: Repair Co-ordination

\$10

• NI: Post Repair Inspection

\$25

• NI: DV / Collect Bussess Coordination

\$5

TP (NI1): TP (NI) INC, against INC

\$20

9) NI12: Idas Module

\$10

Invoice dated

Fee Charged

Invoice dated

Fee Charged

NA 1801245

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Cat 1:

Cat 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 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	26/02/2018 15:12
Date Of Accident	25/02/2018 12:35
Exact Location Of Accident	TELOK BLANGAH RD TWDS SENTOSA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW1149Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NAZIRAH BEGAM D/O MOHAMED HANIFFA
NRIC No	S8020025J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90235407
Alternative Phone No	OFFICE-90235407

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	OUTLANDER 2.4 CVT AWD S/R FACELIFT
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	2100433245-02
Cover Note Number	-

### Driver

Name of Driver	GOVINDARASU GANESAN
NRIC No	G8389559X
Date Of Birth	11/06/1990
Occupation	OUTDOOR
Date Of Driving Pass	19/04/2013
Driving Experience	4 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94893407
Fax Number	
Contact Number	
EMail Address	NOEMAIL



Address	BLK 61C STRATHMORE AVE #25-32
Postcode	144061
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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?	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)	2
Passenger 1	NAME: : UNKNOWN
	GENDER: : MALE

#### 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

PLEASE REFER TO ATTACHED STATEMENT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD7101E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

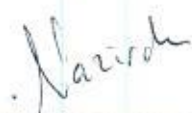
## SKETCH PLAN


### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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 enquired 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.

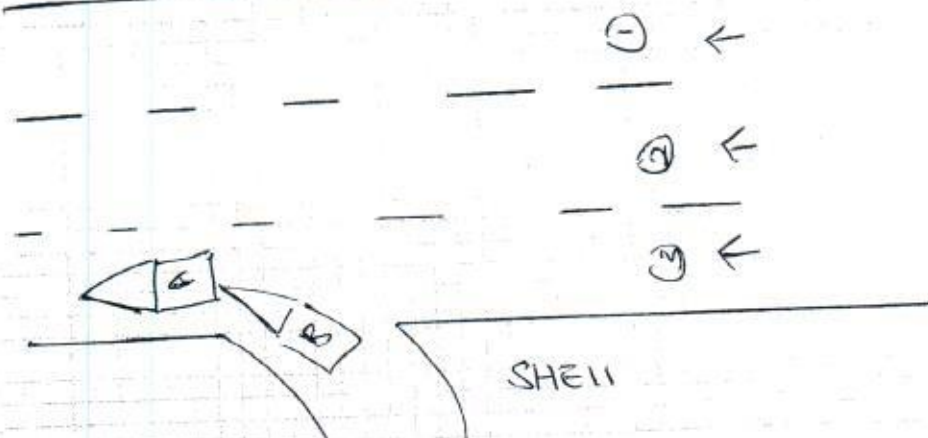
  
Policyholder's Signature  
Date & Time:

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

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

TELOK BLANGGAH → Sentosa

A = SKW 1149Y  
B = SHD 7101 E



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As I was travelling along the mention road, I signal and wanted to make a left turn. Suddenly I feel an impact from my vehicle rear. I step out of my vehicle and I realise vehicle 'B' failed to stop and collided onto my vehicle 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.:



Vehicle No.

SKW 1149X

Make / Model :

MITSUBISHI OUTLANDER

Date of Accident

25/02/18

Time of Accident

1235 HRS

Location of Accident

TELOK BIANGAH RD TOWARD SUTONG

Purpose of Use

Private

Name of Owner

Nazirah Begum d/o mohamed haniffa 880200253

NRIC / Business UEN :

Contact No :

HP: 90235407

Home :

Claim Type :

Own Damage

Third Party

Reporting Only

Private Hire :

Uber / Grab

Insurance Company :

AIG

Type Of Coverage :

Comprehensive

Third Party

TPFT

Policy No :

2100433245-02

Name Of Driver : (as above)

GOVINDARASU GANESAN

No. Of Passenger : 01

NRIC :

98389559X

Male :

✓

Female :

Date Of Birth :

11/06/1990

License Pass Date :

19/04/2013

Gender :

Male

Female

Occupation :

DRIVER

Contact No. :

HP: 94893407

Home :

Address :

BK61C STRATHMORE AVE #25-32 SC144061)

Driver Own Vehicle :

NO

Relationship :

Employee / Relative / Friend

Weather Condition :

Day

Night

Raining

Road Surface :

Dry

Wet

Any Injuries :

NO

Contact No. :

Police Report :

NO

Vehicle B No. :

SHD7101E

No. Of Passenger :

0

Driver / NRIC

Male :

Female :

Driver Contact :

No. Of Passenger :

Vehicle C :

Male :

Female :

Driver / NRIC

Driver Contact :

No. Of Passenger :

Vehicle D :

Male :

Female :

Driver / NRIC

Driver Contact :

No. Of Passenger :

Vehicle E :

Male :

Female :

Driver / NRIC

Driver Contact :

Particulars of Workshop :

Motor Intel Automo Pte. Ltd.

Tel no : 6281 0087

Fax No: 6281 0187

Person In Charge :

Wilson Ong (HP : 8838 3318)

Address :

Bartley Biz Centre, 13 Kaki Bukit Rd 4, #01-20 S(417807)

Email :

sales@mia.com.sg



A0106



NRIC No. **S8020025J**

Blood Group      Date of issue  
**A+**                      **20-02-2002**

**T BLK 145 MEI LING STREET #02-137  
SINGAPORE 140145**

**IC No: S8020025J                      Date: 23/11/2017**

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S8020025J**



Name

**NAZIRAH BEGAM D/O  
MOHAMED HANIFFA**

**நசிரா பேகம்**

Race

**INDIAN**

Date of Birth

**23-06-1980**

Sex

**F**

Country of Birth

**SINGAPORE**



**S8020025J**





## S PASS

Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer

**YONGYANG LIFT ENGINEERING PTE. LTD.**

Sector: **CONSTRUCTION**

Name

**GOVINDARASU GANESAN**

Occupation

**DRIVER**



S Pass No.

**0 34536406**

Date of Application

**10-12-2016**

Date of Issue

**28-12-2016**

Date of Expiry

**18-03-2018**



**L7506379**



## VISIT PASS

Immigration Regulations

Name

**GOVINDARASU GANESAN**



Date of Birth

**11-06-1990**

Sex

**M**

Nationality

**INDIAN**

FIN

**G8389559X**

Date of Issue

**28-12-2016**

Date of Expiry

**18-03-2018**

**MULTIPLE JOURNEY VISA ISSUED**

**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED  
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**





**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**



Licence Number **G8389559X**  
Name

**GOVINDARASU GANESAN**

Birth Date: **11 Jun 1990**

Issue Date: **19 Apr 2013**

**Valid Till 18 Apr 2018**



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)**

**Class 2B**

**Class 3**

**Class 4**

**MOTORCYCLES NOT EXCEEDING 200 CC**

**MOTOR CARS AND MOTOR TRACTORS THE WEIGH OF WHICH UNLADEN DOES NOT EXCEED 2500 KILOGRAMS**

**HEAVY MOTOR CARS AND MOTOR TRACTORS THE WEIGH OF WHICH UNLADEN EXCEED 2500 KILOGRAMS**

**EFFECTIVE DATE**

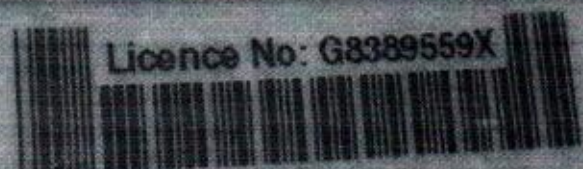
**19 Apr 2013**

**19 Apr 2013**

**08 Sep 2016**

**S / No. 9000251587**

**G8389559X**



**428A**



## CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Nazirah Begam D/o Mohamed Haniffa  
Period of Insurance : 19 Oct 2017 To 18 Oct 2018  
Engine No. : 4B12PY6727  
Chassis No. : JMYXTGF3WGZ001206

Vehicle No. : SKW1149Y  
Policy No. : 2100433245-02  
Endorsement No. :  
Issued Date : 17 Oct 2017

### ABOUT THE COVER

Make/Model	MITSUBISHI OUTLANDER 2.4 CVT	Sum Insured	Market Value	First Year of Registration	2015
Engine Capacity/Tonnage	2,360.00 CC	Off Peak Car	No	Insuring with COE/PARF	Yes
Driver Restriction	NA				

#### Person or Classes of Persons Entitled to Drive\*

a) The Policyholder

b) Any other person who is driving on the Policyholder's order or with higher 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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 35 years old and above

#### 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: \$500/- - \$600/-

\* Limitations rendered inoperative by Section 3 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 - \$600; Theft - \$0; Flood Cover - \$0

Section 2  
Property Damage - \$0

Windscreen - \$100

#### Named Driver and Excess (where applicable)

Nazirah Begam D/o Mohamed Haniffa - \$600 (Own Damage)

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

Cycle & Carriage Customer Service Centres (For windscreen claim only): Add: 20 Ling Kee Rd Singapore 159094 64706068

Cycle & Carriage Customer Service Centre (For windscreen claim only): Add: 130 Ubi Rd 3 Singapore 408650 67461000

Cycle & Carriage Body & Paint Centre: Add: 205 Poonan Gardens Singapore 609338 65684501

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](http://www.aig.com) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

ire Purchase Company/Employer's Loan: MERCEDES-BENZ FINANCIAL SERVICES (S) LTD

Whereby 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. 189) and Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189) (Malaysia).