

Date In: 713118 10:50	Job description	Date & Time Completed	Done by:
Ref No: NA1 AIG 180043551h4	SAS e-filing		
Veh No: SBD 133E	E-mail (within 3hrs, AIG 2hrs)		
D.O.A: 613 119 15:30	i-Motor Claim Form		
OD: <input checked="" type="checkbox"/> Reporting Only	i-Motor W/O (within: OD 2hrs, 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: SKG 13595	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

MA1801486	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/\$48		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 16 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
QC Checked by (Engr-In-Charge):	*N3: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments:-	TP (N11): TP (Non INC) against INC \$20		
Dat 1:	9) N12: Idac Mobile 30		
Dat 2 / 3:	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 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	07/03/2018 10:50
Date Of Accident	06/03/2018 15:30
Exact Location Of Accident	PIE (TUAS) B4 SLIP RD INTO CTE (SLE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBD133E
Insured/Policyholder	
Name Of Registered Owner	NG KHEE SAM
NRIC No	S1182356D
Email Address	KHEESAM@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97364364
Alternative Phone No	OFFICE-97364364

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA
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	1700079886
Cover Note Number	-

Driver

Name of Driver	NG KHEE SAM
NRIC No	S1182356D
Date Of Birth	04/04/1956
Occupation	INDOOR
Date Of Driving Pass	07/06/1978
Driving Experience	39 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97364364
Fax Number	
Contact Number	OFFICE-97364364
Email Address	KHEESAM@YAHOO.COM.SG

Address	60 SELETAR TERRACE
Postcode	806948
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	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)	1

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	SKG1359S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIN CHUAN XIANG
NRIC/Passport Number	S6863236F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	NG KHEE SAM
Approximate Age	

Injuries Sustain

GIDDY

Injured person in which vehicle?

SBD133E

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.

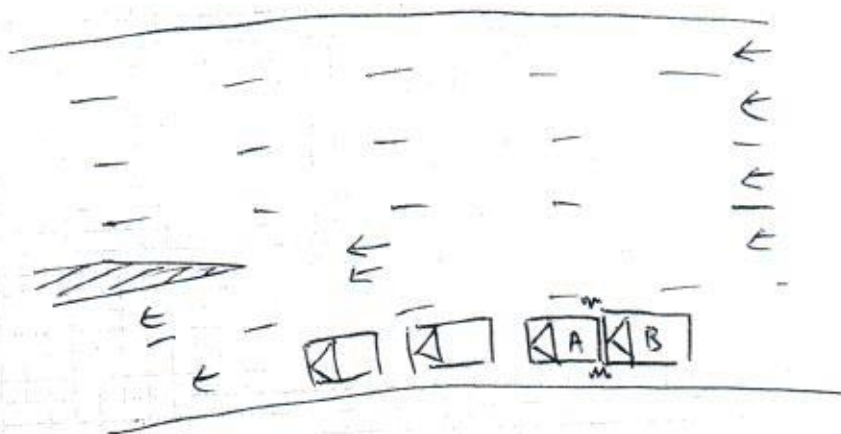
Policyholder's Signature
Date & Time:

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

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

PIE(TUAS) before slip road into CTE(SLE)

Ueh A: SBD 133E
Ueh B: SKG 1359S



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along PIE(TUAS) on the left most lane of a 5-lane road towards slip road of CTE(SLE). Somewhere before entering the slip road of CTE(SLE), I saw vehicles ahead slowing down hence I also slowed down and stopped completely behind vehicles ahead of me. Moments after I stopped, I suddenly felt a strong impact from the rear portion of my vehicle. After the accident, I alighted to see that vehicle B had collided into the rear portion of my vehicle. Hence I was involved in an accident of 2 vehicles. I felt giddy after the accident, upon impact.

Ueh A: SBD 133E.

Ueh B: SKG 1359S.

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.

SBD 133E.

Make / Model :

VW Jetta.

Date of Accident

6 Mar 2018.

Time of Accident

1530hrs.

Location of Accident

PIE (Tuas) b4 slip road into CTE. (SLE).

Purpose of Use

On the way home.

Name of Owner

Ng Khel Sam.

NRIC / Business UEN :

S118 2356D.

Contact No :

HP : 97364364

Home :

Claim Type :

Own Damage

Third Party

Reporting Only

Private Hire :

Uber / Grab

khreesam@yahoo.com.sg

Insurance Company :

AIK.

Type Of Coverage :

Comprehensive

Third Party

TPET

Policy No :

1700079886.

Name Of Driver : (as above)

No. Of Passenger :

NRIC :

S118 2356D.

Male :

Female :

Date Of Birth :

04-04-1956.

License Pass Date :

07-06-1978.

Gender :

Male

Female

Occupation :

Retiree.

Contact No. :

HP : 97364364

Home :

62000130.

Address :

60 Selatar Terrace S(806948).

Driver Own Vehicle :

Yes.

Relationship :

Employee / Relative / Friend

Weather Condition :

Day

Night

Raining

Road Surface :

Dry

Wet

Any Injuries :

Contact No. :

Police Report :

Vehicle B No. :

SKG 1359S

No. Of Passenger :

Driver / NRIC

Lin Chuan Xiang S 68 63236F.

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

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

PASS DATE

07 Jun 1978

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

Licence No: S1182356D

NP 42EA

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S1182356D

NG KHEE SAM

Birth Date: 04 Apr 1956

Issue Date: 21 Apr 2003

10004039438



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1182356D

Name

NG KHEE SAM

黄祺山

Race

CHINESE

Date of Birth

04-04-1956

Country of Birth

SINGAPORE

Sex

M



07234665



Licence No: S1182356D



Record Class

B+

Date of issue

11-01-1993

60 SELETAR TERRACE
SINGAPORE 806948

NRIC No: S1182356D

Date: 30-05-2003

No: 4740301



CERTIFICATE OF INSURANCE

AUTOPLAN PRIVATE VEHICLE

Name of Policyholder : NG KHEE SAM
Period of Insurance : 20 Nov 2017 To 19 Nov 2018
Engine No. : CAXF83726
Chassis No. : wwwzzz16zgm011854

Vehicle No. : SBD133E
Policy No. : 1700079886
Endorsement No. :
Issued Date : 20 Nov 2017

ABOUT THE COVER

Make/Model : VOLKSWAGEN JETTA 1.4 TSI
Engine Capacity/Tonnage : 1,390.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2016
Insuring with COE/PAF : Yes

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 his/her 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 23 and/or has less than 2 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.

* Limitations rendered inoperative by Section 8 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)

NG KHEE SAM - \$600 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us)

For 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: NA

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. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0501749000

YE LI LI KITTY

BLK 36 TOA PAYOH LOR 5 #09-341

SINGAPORE 310036 SP-LCJ

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

YE LI LI KITTY YE