

**NATION 11 Assessment Centre Services**

Date In: <b>13/04/18</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA/1618006884/13</b>	SAS e-filing		
Veh No: <b>SLW50820</b>	E-mail (within 3hrs, AP 2hrs)		
TO: <b>12/04/18 0750</b>	i-Motor Claim Form		
OD: <b>31</b> Reporting Only	i-Motor W/O (within 10/2hrs, 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: ( **M GARAGE** ) Tel: Fax: )

TP Particulars: Veh No: **SLW820L** INC ( ) / Non-INC ( ) Tel: )

Owner / Driver ( ) Cover Type: ( )

Policy No. ( ) Period ( )

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 :-	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
		1st Bill	Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors' Comments :-	5) FT: Follow-Through Survey (Resurvey) \$30		
Cat. 1:	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 2/3:	6) TR: Re-inspection \$75		
	7) NI: Idnc DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*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 (Non-INC) against INC \$20		
	9) N12: Idnc Mobile \$0		
	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	13/04/2018 16:58
Date Of Accident	12/04/2018 07:50
Exact Location Of Accident	SLIP RD FROM LOR 2 TOA PAYOH TWDS PIE(CHANGI)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW5082D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WOODLANDS 11 CAR RENTAL
Co Reg No	53227415J
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-84842127

### Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 3
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	999994666
Cover Note Number	

### Driver

Name of Driver	MOHAMED BIN MANAP
NRIC No	S2002183G
Date Of Birth	31/03/1953
Occupation	OUTDOOR
Date Of Driving Pass	11/01/1984
Driving Experience	34 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84842127
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 329 SERANGOON AVE 3 #03-350
Postcode	550329
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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)	2
Passenger 1	NAME: : NORINA BINTI ABDOL LATIFF GENDER: : FEMALE

#### 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

PLS REFER TO THE 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	SLW820L
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

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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 (c) 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.



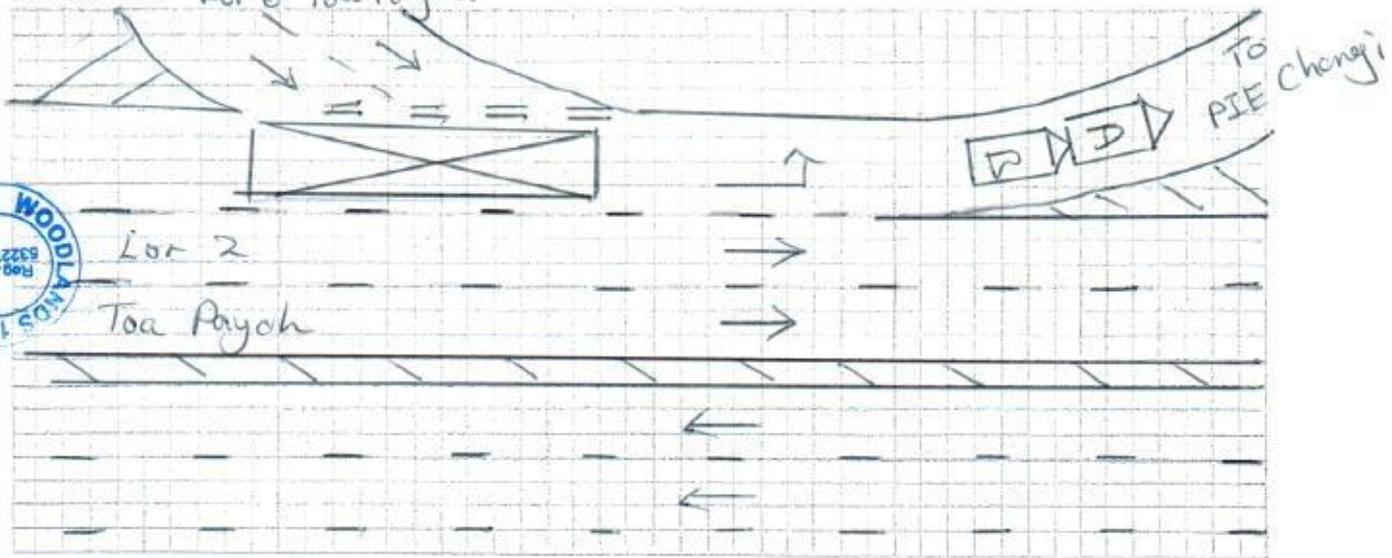
Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN

Lor 6 Toa Payoh



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/04/2018 at about 0750 hrs at slip road from Lor 2 Toa Payoh towards PIE (Changi). I was travelling on the above mentioned slip road and when my front vehicle slow down and stop due to heavy traffic hence I follow suit. Suddenly I heard a loud bang from behind and when I alighted, I realised that it was Vehicle (B) who hit onto my Rear Portion of my Vehicle (A) causing damages to my vehicle. I have one passenger inside my vehicle.



(A) SKW 5082 D

(B) SLW 820 L

DECLARATION

I declare the foregoing particulars are true in every respect.



Policyholder's Signature  
Date & Time:

*Tavel*

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

*Syuan 13/04/18*

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

M93 Solution  
@gmail.com

SINGAPORE ACCIDENT STATEMENT

Accident Date: 12/04/2018	Time: 0750	(hh:mm) 24 hr format
Location	Slip road from Lor 2 Toa Payoh towards PIE (Changi)	
Vehicle Number	SKW 5082D	
Insured Name	WOODLANDS 11 CAR RENTAL	
NRIC / FIN	53227415J	Contact Number
Make	MAZDA	Model MAZDA 3
Are you claiming under your own insurance policy for repair to your vehicle?		
( ) Yes If No, Pls select: ( / ) Third Party ( ) Reporting		
Insurance Company	All	
Type of Policy	( / ) Comprehensive ( ) Third Party Fire & Theft ( ) TP Only	
Policy Number	999994666	
Name of Driver	MOHAMED BIN MANAP	( ) Same as Insured
NRIC / FIN	S20021836	Contact Number 8484 2127
Date of Birth	31/03/1953	
Driving Pass Date	11/01/1984	
Occupation	( ) Indoor ( / ) Outdoor	
Gender	( / ) Male ( ) Female	
Email Address	( ) NO EMAIL	
Address of Driver	BLK 329 SERANGOON AVE 3 #03-350 S(550329)	
Was driver an employee of the Insured's Company? ( / ) Yes ( ) No		
If No, Relationship of the Driver with the Insured HIREE		
( ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling		
Does the Driver Own Any Other Vehicle? ( ) Yes ( / ) No		
If Yes, Vehicle Registration Number of Driver's Own Vehicle		
Insurance Company of Driver's Own Vehicle		
Weather Conditions ( / ) Clear ( ) Raining ( ) Others		
Road Surface ( / ) Dry ( ) Wet ( ) Others		
Was any foreign vehicle involved in this accident? ( ) Yes ( / ) No		
Was anybody injured in the accident? ( ) Yes ( / ) No		
If yes, injured detail		
Was there any video captured by Car Camera? ( ) Yes ( / ) No		
Was the Accident reported to the Police? ( ) Yes ( / ) No If yes attach police report		
DETAILS OF 3 <sup>rd</sup> party	Name / Nric	Contact
Veh B	SLW 820L	
Veh C		
Veh D		
Veh E		
Veh F		

passenger (1) : Norina Binti Abdul Latiff. ; female.  
include drivers : 2 persons

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2002183G



Name

MOHAMED BIN MANAP

Race

MALAY

Date of birth

01-03-1953

Sex

M

S2002183G

Country of birth

MALAYSIA

SKW 5082D

Driver

S042250



NRIC No. S2002183G



Nationality

MALAYSIAN

Date of issue

03-07-2009

Address

APT BLK 329 SERANGOON AVENUE 3  
#03-350  
SINGAPORE 560329

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of Mohamed Bin Manap

Licence Number: S2002183G  
Name: MOHAMED BIN MANAP  
Birth Date: 31 Mar 1953  
Issue Date: 16 Mar 2012

002051311D



SKW 5082D  
Driver -

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

	EFFECTIVE DATE
Class 3: Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	11 Jan 1984

NP 428A

Licence No: S2002183G





HOTLINE TEL: (65) 6419-3000  
FAX: (65) 6415-3723

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 169)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

THIRD PARTY FIRE & THEFT - COMMERCIAL MOTOR		(The below excess is subject to GST)	
CERTIFICATE NO.	SKW5082D	POLICY EXCESS	SS1500.00 Section (II)
POLICY NO.	999994666	WINDSCREEN EXCESS	NA
1 ) VEHICLE REGISTRATION NO.		SUM INSURED	MARKET VALUE
2 ) NAME OF INSURED		INSURING WITH COE/PARF	Yes
3 ) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		SKW5082D	
4 ) DATE OF EXPIRY OF INSURANCE		Woodlands 11 Car Rental	
5 ) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*		01 March 2018	
		28 February 2019	
<p>Any person who is driving on the Insured's order or with their permission.            SS1,500.00 Section II Excess is applicable to driver's age above 22 years old and more than 2 years driving experience in Singapore.            SS6,000.00 Section II Excess is applicable to driver's age below 22 years old and/or less than 2 years driving experience in Singapore.</p>			
<p>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.</p>			
6 ) LIMITATION AS TO USE*			
<p>1) Use for social, domestic, pleasure purposes and business purposes of Insured            2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.            3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.</p>			
<p>The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.</p>			
LOSS OF USE		Not Included	
HIRE PURCHASE COMPANY		NA	
<p>*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</p>			

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 169) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 01 Mar 2018

AIG Asia Pacific Insurance Pte. Ltd.

503052-000  
HUND  
55 Lorong L Telok Kurau,  
#02-59  
Bright Centre  
Singapore 425600

ORIGINAL

AUTHORISED REPRESENTATIVE

SSPOEC