

NAH 48050193

Date In: 16 Oct 2018 14:38	Job Description	Date & Time Completed	Done by:
Ref No: N/A/NR/800701617	SAS e-tiling		
Vel: No: SL 83912	E-mail (while there, also there)		
D.O.A: 15 Oct 2018 14:20	E-Motor Claim Form		
OD: TP Reporting Only	E-Motor YPO (ymlmssd shw, YP, YP???)		
	E-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / OWI: Tel: Fax:

TP Particulars: Yell No: SL 2915G INC: / Non-INC: /

Owner / Driver: Tel: /

Policy No: / Period: / Cover Type: /

Confirmed by: / Date: / Time: /

Insured/Driver Liability: () % (Note: BSL Status (WO): N: 0-20%; P: 21-79%; P: 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 relay of reporter.

() Total Loss Case: E-mail Insurer URGENTLY.

Driver-In: () / Towed-In: () / Invoice: YES () / NO () / Towing Co: ()

Remarks: (IN Repair/Inc 6788 0016) Date & Time Completed: Done by:

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

2) QC Check / Post Repair Inspection ()

3) Upload Repair Photo (Repair Cost > \$3000) ()

Injury: /

Date/Time: / Action: /

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NAH 802430

Invoice Preparation Checklist	Amount	Invoice	Check/Bill
1) AR: Accident Reporting (330)			
2) DA: Damage Allowance (3100)	INC (48)		
3) TP: Towing Fee	\$400.00		
4) PT: Follow Through Survey	210		
5) PT: Follow Through Survey (Repair)	210		
Total Invoice: INC Only (2100)			
6) TR: Bill of Lading	210		
7) H: 1144 DA + 3MRT Survey	210		
8) NTUC Audit/Repair Survey			
9) Q13			
10) N: Courtesy Car / Tel Allowance	210		
11) N: Repair Coordination	210		
12) N: Post Repair Inspection	210		
13) N: OY / Collect Vehicle Coordination	210		
14) TP (N13) TP (N14) INC: Total INC	210		
15) H: 1144 DA			
Invoice Total			
Invoice Paid			

C. Checked by (Engr-In-Charge): /

Comments: /

L1: /

L2: /

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	16/04/2018 14:38
Date Of Accident	15/04/2018 14:20
Exact Location Of Accident	PIE TOWARDS TUAS BEFORE STEVENS ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ8391Z
Insured/Policyholder	
Name Of Registered Owner	YAP HWEE SECK
NRIC No	S1539960J
Email Address	YHS@HOTMAIL.SG
Mobile Phone No	(LOCAL) +65-94502912
Alternative Phone No	OTHERS-94502912

Vehicle Particulars

Manufacturer	TOYOTA
Model	VELLFIRE-2.5 CVT (A)
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	2100494248-00000
Cover Note Number	

Driver

Name of Driver	YAP HWEE SECK
NRIC No	S1539960J
Date Of Birth	10/10/1962
Occupation	INDOOR
Date Of Driving Pass	14/07/1982
Driving Experience	35 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94502912
Fax Number	
Contact Number	OTHERS-94502912
Email Address	YHS@HOTMAIL.SG

Address	101 PASIR RIS GROVE #06-03
Postcode	518195
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	SIDE SWIPE
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	4
Passenger 1	NAME: : TAN GEOK LAN GENDER: : FEMALE
Passenger 2	NAME: : YAP JUN ALVIN GENDER: : MALE
Passenger 3	NAME: : YAP JINHUI ALSTON 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 SKETCH PLAN

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLN2915G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE FOOK LOONG ,EUGENE
NRIC/Passport Number	

Contact Number 93392501
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name YAP HWEE SECK
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SLJ8391Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name TAN GEOK LAN
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SLJ8391Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 3

Name YAP JUN ALVIN
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SLJ8391Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 4

Name YAP JUNHUI ALSTON
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SLJ8391Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

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:

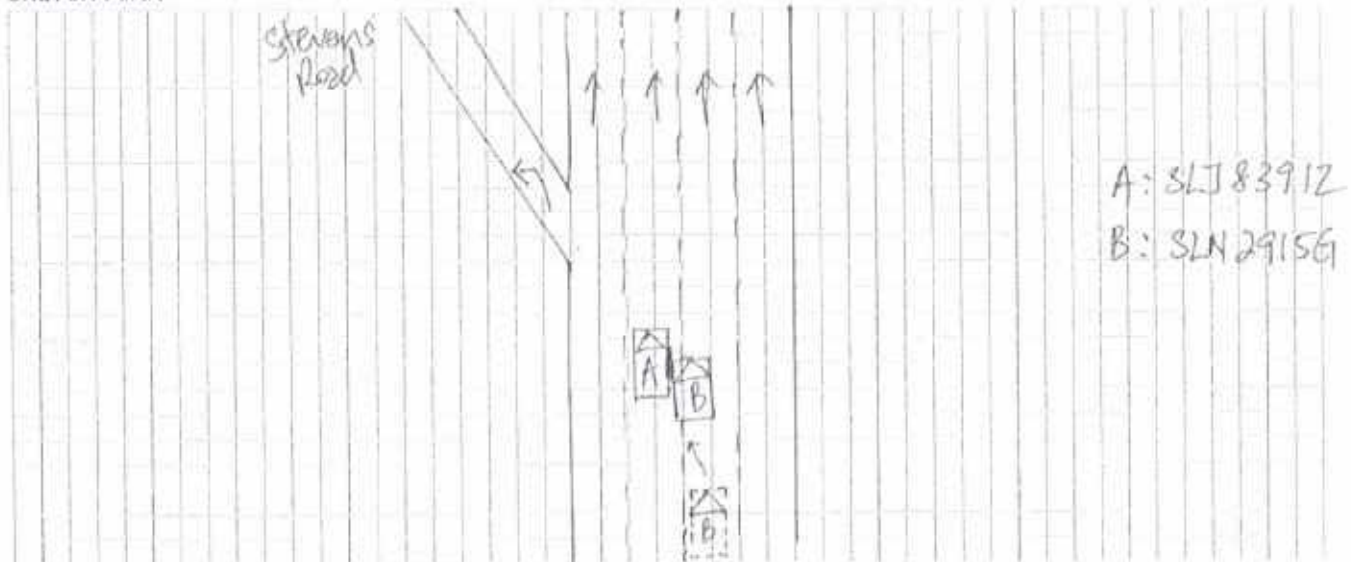
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

On 15th April 2018, at about 14:20 Hrs, I was travelling on the third lane of PIE, towards town, just before Stevens Road exit. I was driving straight in my lane on vehicle A, SLJ8391Z, when a vehicle B, SLN29156, suddenly swerved to his left from the second lane, thus causing a side swipe collision.

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.:

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 15th April 2018		TIME: 14:20	(hh:mm) 24 hrs Format
LOCATION PIE towards Tass, before Stevens Road			
VEHICLE NUMBER SLJ 83912			
INSURED NAME Yap Hwee Seck			
NRIC / FIN 815399607		CONTACT: 94502912	
MAKE Toyota		MODEL Vellfire	
Are you claiming under your own insurance policy for repair to your vehicle?			
() Yes, If No, Pls Select : (<input checked="" type="checkbox"/>) Third Party () Reporting Only			
INSURANCE COMPANY AIG			
TYPE OF POLICY (<input checked="" type="checkbox"/>) COMPREHENSIVE () THIRD PARTY () TPFT			
POLICY NUMBER: 2100494248-00000			
NAME DRIVER :		(<input checked="" type="checkbox"/>) SAME AS INSURED	
NRIC / FIN 815399607		CONTACT:	
DATE OF BIRTH: 10th October 1962			
DRIVING PASS DATE: 14th July 1982			
OCCUPATION: (<input checked="" type="checkbox"/>) INDOOR () OUTDOOR			
GENDER: (<input checked="" type="checkbox"/>) MALE () FEMALE			
EMAIL ADDRESS: yhs@hotmial.sg		() NO EMAIL	
ADDRESS OF DRIVER: 101, Pasir Ris Grove, #06-03, S'pore (518195)			
Number Of Passenger Include Driver: 4; 1 driver & 3 passengers			
Was driver an employee of the Insured's Company? () YES (<input checked="" type="checkbox"/>) NO			
If No, Relationship Of The Driver With The Insured			
(<input checked="" type="checkbox"/>) Owner () Spouse () Friend () Relative () Children () Sibling () Others			
Does The Driver Own Any Other Vehicle?: () YES (<input checked="" type="checkbox"/>) NO			
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:			
Insurance Company Of Driver's Own Vehicle			
Weather Conditions: () Clear (<input checked="" type="checkbox"/>) Raining () Drizzling () Others			
Road Surface : () Dry (<input checked="" type="checkbox"/>) Wet () Others			
Was Any Foreign Vehicle Involved In This Accident? () YES (<input checked="" type="checkbox"/>) NO			
Was Anybody Injured In The Accident? (<input checked="" type="checkbox"/>) YES () NO			
If YES, Injured details : 1. neck, back, head pain (1) Yap Hwee Seck (m)			
(2) Tan Geok Lan (f) (3) Yap Jun Alvin (m) (4) Yap Junhui Akton (m)			
Convey By Ambulance: () YES (<input checked="" type="checkbox"/>) NO			
Was There Any Video Capture By Car Camera? (<input checked="" type="checkbox"/>) YES () NO			
Was There Accident Reported To The Police? () YES () NO If Yes Attach Police Report			
Police Report Number (if any)			
Details Of 3rd Party		Name / NRIC	Contact
Veh B SLN2915E		Lee Fook Loong, Eugene	93392501
Veh C			
Veh D			
Veh E			
Veh F			
Veh G			

5243295





NRIC No. S1539960J



Date of issue
29-11-2013

Address
101 PASIR RIS GROVE #06-03
SINGAPORE 518195
NRIC No: S1539960J Date: 08/12/2016 (R)

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1539960J



Name
YAP HWEE SECK

叶 慧 石


Race
CHINESE

Date of birth
10-10-1962

Country/Place of birth
SINGAPORE

Sex
M

S1539960J



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

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	16 Jul 1990
Class 2A	Motorcycles between 201 cc and 400 cc	16 Jul 1990
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	14 Jul 1982

NP 428A



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S1539960J**

Name:

YAP HWEE SECK

Birth Date: **10 Oct 1962**

Issue Date: **17 Feb 2004**





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

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

TOYOTA AUTO PROTECTOR (2-YEAR)

CERTIFICATE NO. 2100494248-00000

(The below excess is subject to GST)

OWN DAMAGE EXCESS S\$1000.00 (1)

WINDSCREEN EXCESS S\$100.00

(Windscreen excess is waived if the repair is done at Borneo Motors Workshop)

SUM INSURED Market Value

INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO.

SLJ8391Z

2) NAME OF INSURED

Yap Hwee Seck

3) EFFECTIVE DATE OF THE COMMENCEMENT
OF INSURANCE FOR THE PURPOSES OF THE ACT

28 Dec 2016

4) DATE OF EXPIRY OF INSURANCE

27 Dec 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, pacemaking, 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 / TOYOTA AUTHORISED REPAIRERS

1. Borneo Motors (S) Pte Ltd - 2 Pandan Crescent (Tel: 6631 1188)

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

2. Comfori Delgro Engrg - 205 Braddell Rd (Tel: 63837116) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501)

4. Ethos - 30 Bukit Batok Cres (Tel: 66547777) 5. Glass-Fix - 62 Ubi Ave 3 (Tel: 62780887) - For windscreen only

6. Kan Fook Sing Motor - 61 Delu Lane 12 (Tel: 67479560) 7. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)

8. Moya Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415338)

10. SME Motor - 1 Kaki Bukit Ave 6 Bld D (Tel: 67476106)

LOSS OF USE Loss of Use 15 Days (1500 - 1600cc) - Refer to policy wordings for details

* NAMED DRIVER NA

HIRE PURCHASE COMPANY United Overseas Bank Limited

/EMPLOYER'S LOAN

*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 28 Dec 2016

AIG Asia Pacific Insurance Pte. Ltd.

030210-219

INCHCAPE AUTO TOYOTA-UBITCH

33 LENG KEE ROAD

SINGAPORE 159102

AUTHORISED REPRESENTATIVE

ORIGINAL

IASHEC

Enquire PARF/COE Rebate for Registered Vehicle**Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC
Owner ID: 9960J

Vehicle Details

Vehicle No.: SLJ8391Z
Vehicle to be Exported: No
Intended De-registration Date: 30 Apr 2018
Vehicle Make: TOYOTA
Vehicle Model: VELLFIRE 2.5 CVT S/R
Primary Colour: Black
Manufacturing Year: 2016
Engine No.: 2ARH786464
Chassis No.: JTNGF3DH408006749
Maximum Power Output: 134.0 kW (179 bhp)
Open Market Value: \$45,431.00
Original Registration Date: 28 Dec 2016
First Registration Date: 28 Dec 2016
Transfer Count: 0
Actual ARF Paid: \$55,604.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 27 Dec 2026
PARF Rebate Amount: \$41,703.00

Intended COE Rebate Details

COE Expiry Date: 27 Dec 2026
COE Category: E - Open Category
COE Period(Years): 10
QP Paid: \$54,901.00
COE Rebate Amount: \$45,877.00
Total Rebate Amount: \$87,580.00

The information contained herein is correct as at 16 Apr 2018

OK