

NATIONAL Assessment Centre Services

19 MAY 18059983

Qdr III: 08/05/2018 15:25
 Ref No: VBA/0000008421
 Veh No: SKU III R
 D.O.A: 07/05/2018 19:40

Job description	Date & Time Completed	Done by
SAS e-illing		
E-moll (Vehicle Data, AIO Data)		
E-motor Claim Form		
E-motor W/O (Vehicle Data, AIO Data)		
E-Photo Uploaded		
Assessment/Survey Report		
Assessment Report by Fax/Hand to Owner/Veh		

OO (TP) Reporting Only
 TP Intouch

Preferred Wksp / INC Assign Wksp / CWI

TP Particulars: Yell No: SGL 9980 R, INC () / Non-INC ()

Owner / Driver () Tell ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % (Note: B/L Status (WO): N/D-20%; P: 21.79%; P: 30.100%)

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks: ()

() Walk-In Customer: Customers Information strictly Confidential & strictly NO release of report.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () / Invoiced YES () / NO () / Towing Co: ()

Remarks: ()

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

2) QC Check / Post Repair Inspection ()

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

Injury: ()

Date/Time: ()

Invoice Preparation Checklist	Amount	Checklist
1) AR: Accidental Reporting (330)		
2) DA: Damage Assessment (3100)	INC (410)	
3) TP: Towing Fee	150/150	
4) ET: Follow Through Survey	150	
5) ET: Follow Through Survey (Recovery)	150	
6) TR: Repairation	150	
7) NTUC Additional Survey (300)		
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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	08/05/2018 15:25
Date Of Accident	07/05/2018 19:40
Exact Location Of Accident	ALONG LIANG SEAH STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU1111R
Insured/Policyholder	
Name Of Registered Owner	CHUA KOK KHOON (CAI GUOKUN)
NRIC No	S7019111C
Email Address	KKCHUA88@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-97378683
Alternative Phone No	OTHERS-97378683

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALPHARD
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
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	1700077800
Cover Note Number	

Driver

Name of Driver	CHUA KOK KHOON (CAI GUOKUN)
NRIC No	S7019111C
Date Of Birth	12/06/1970
Occupation	INDOOR
Date Of Driving Pass	28/07/2001
Driving Experience	16 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97378683
Fax Number	
Contact Number	OTHERS-97378683
EMail Address	KKCHUA88@SINGNET.COM.SG

Address	BLK 237 PASIR RIS STREET 21 #12-17
Postcode	510237
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

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?	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)	0

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?	NO
Was there any audio recorded?	NO

Details of Witness 1

Name	MONA
Phone Number	84682356
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGL9980R
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)

VEHICLE NO: _____

DOA: _____

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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to reputate policy liability.
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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 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.
8. Consent under the Personal Data Protection Act (PDPA)

Witnessed by Reporting Centre
Personnel

B) SGL 9980 R

Describe Circumstances of the Accident

My car was stationary along Liang Seah St. The car B while parking & hit onto my car. There is witness name Mona HP: 8468 2356 which trying to stop the vehicle B from moving forward before hitting onto my car. But the driver still fail to do so.

Declaration

We declare the foregoing particulars are true in every respect.



on 28/05/2018

Personal Particulars

Date of Accident: 07/05/2018 (dd/mm/yy)

Time of Accident: 19:40 (24 Hrs)

Vehicle No.: SKW1111 R Vehicle Make / Model: Toyota Alpha

Exact location of Accident: Along Liang Seah Street

Owner's Name / IC No.: Chua Kok Khoo IC No: S7919111 C

Driver's Name / IC No.: Chua Kok Khoo IC No: S7919111 C

Driver's Contact No.: 97378683 Insurance Company & Policy No.: AIG Ins 1700077800

Driver's E-mail address: hancanrepairs@gmail.com / kkhua88@singnet.com.sg

Relationship between Owner & Driver: Spouse / Children / Friend / Parents / Others specify: _____

What do you wish to claim? (Please circle one only)

(1) Own Insurance / (2) Other Vehicle (The one you want to claim against) / (3) Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident? (Please circle one only)

Private use / Work purpose

Weather condition & Road conditions?

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet

Occupation

Indoor / Outdoor

Any Injuries? (MC of 3 days or more, police report is required)

Yes / No If Yes, which police station? _____

The Other Party (Vehicle B) Details:

Driver's Name / IC No.: _____

Vehicle No.: SGL 9980 R Mercedes

Insurance Company: _____

Driver's Contact No: _____

(If more than 2 vehicles involved, please indicate the other party vehicle numbers below)

Other (Vehicle C) Involved: _____

Independent Witness (If Any): _____

Contact No: _____

Preferred workshop Name (If Any): _____

Contact No: _____

* If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7019111C



Name

CHUA KOK KHOON
(CAI GUOKUN)

蔡 国 坤

Race

CHINESE

Date of birth

12-06-1970

Sex

M

Country of birth

SINGAPORE



4599509



NRIC No. S7019111C

Date of issue

23-06-2010

Address

APT BLK 237 PASIR RIS STREET 21
#12-17
SINGAPORE 510237

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number: **S7019111C**

Name:

CHUA KOK KHOON
(CAI GUOKUN)

Birth Date: **12 Jun 1970**

Issue Date: **24 Jun 2003**



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

PASS DATE

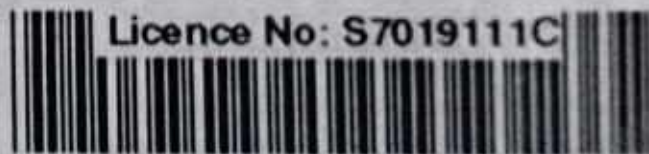
Class 3

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

28 Jul 2001

97378683

NP 428A



Licence No: S7019111C



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : CHUA KOK KHOON
 Period of Insurance : 20 Dec 2017 To 19 Dec 2018
 Engine No. : 2ARH738589
 Chassis No. : AGH300072863

Vehicle No. : SKU1111R
 Policy No. : 1700077800
 Endorsement No. :
 Issued Date : 17 Nov 2017

ABOUT THE COVER

Make/Model : TOYOTA VELLFIRE
 Engine Capacity/Tonnage : 2,494.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2018
 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.

Loss of Use 1500cc - 1800cc Optional

* Limitations rendered inoperative by Section 6 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 - \$1000 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreens : \$100

Named Driver and Excess (where applicable)

CHUA KOK KHOON

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 must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.

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.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: MayBank

I/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).

0603877000

SUNSHINE SERVICES & CONSULTANCY
 46 EDGEFIELD PLAINS #17-02 WATERBAY
 SINGAPORE 828710
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. Anik

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

Ann Kie Tan