

NATIONAL Assessment Centre Services

NAI8060719

Date In: 10/05/2018 10:15
 Ref No: NBI/ATG/0008535/Y
 Vch No: SDB 1368A
 D.O.A: 06/05/2018 14:15
 OO: TP / Reasoning Only

Job description	Date & Time Completed	Done by
PAY e-billing		
B-small (white blue, no blue)		
1-Motor Claim Form		
1-Motor V/O (with 100 shot, 17 shot)		
1-Photo Uploaded		
Assessment/Survey Report		
Ass Report by Fax/Hand to Owner/VHIS		

TP Insult

Preferred Wksp / INC Assign Wksp / OW: () Toll () Fax ()

TP Description: Yell No: 930 135A INC () / Non-INC ()

Owner / Driver: () Toll ()

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

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

Insured/Driver Liability: () % (Note: Bil. Limit (WO): NI 0.20%, PI 21.79%, PI 80.1400%)

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 repeller.

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

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

Remarks: INC 601 line 6788 60157

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

2) QC Check / Post Repair Inspection ()

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

Injury:

Other Tolls / Actions:

NAI803013

Item	Invoice Preparation/Checklist	Bill	Hand Bill
1) AR Incident Reporting (300)			
2) DA Damage Assessment (300)	INC (42)		
3) TP Towing Fee	200/17		
4) PT Follow Through Survey	110		
5) PT Follow Through Survey (Recovery)	110		
6) TR Bill of Materials	210		
7) NI (44) DA + SMRT Survey	210		
8) NTUC Additional Survey (900)			
9) NI Courtesy Car / Tot Allowance	110		
10) NI Repair Coordination	110		
11) NI Total Repair Inspection	110		
12) NI DY / Collect Goods / Coordination	110		
13) NI (11) TP INVA INC / Vehicle INC	110		
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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	10/05/2018 10:15
Date Of Accident	06/05/2018 14:15
Exact Location Of Accident	ANG MO KIO AVE 8 SLIP RD TO ANG MO KIO AVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDB1368A
Insured/Policyholder	
Name Of Registered Owner	CHAN WENG SENG (CHEN YONGCHENG)
NRIC No	S7210199E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97657201
Alternative Phone No	OTHERS-97657201

Vehicle Particulars

Manufacturer	TOYOTA
Model	SIENTA-1.5 (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	2100415943-02000
Cover Note Number	

Driver

Name of Driver	LIM SIEW CHENG (LIN XIUZHEN)
NRIC No	S7605532G
Date Of Birth	24/02/1976
Occupation	INDOOR
Date Of Driving Pass	09/01/1998
Driving Experience	20 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97657201
Fax Number	
Contact Number	OTHERS-97657201
Email Address	NOEMAIL

Address	BLK 312 SERANGOON AVENUE 2 #10-174
Postcode	550312
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	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)	3
Passenger 1	NAME: : PASSENGER GENDER: : MALE
Passenger 2	NAME: : PASSENGER 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

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD135A
Vehicle Make/Model/Colour	NISSAN NV200
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	RYAN CHAN YU JUN
NRIC/Passport Number	S9341735F
Contact Number	96906601
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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 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.
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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:

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

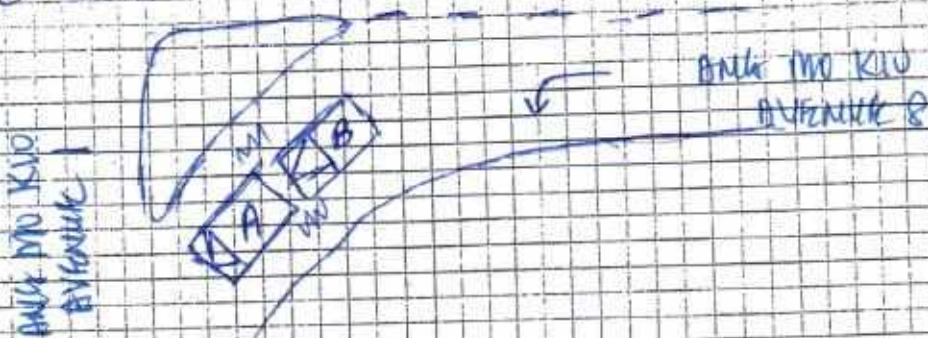
10/05/2018

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

SKETCH PLAN

(A) SDB1368A

(B) GBD135A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On mentioned date and time, I stop at the said slip road. Suddenly vehicle B 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.:

10/05/2018
Keshi WATKES

Personal Particulars of Owner & Driver (Vehicle A)Date of Accident: 06 / 05 / 2018 (dd/mm/yy) Time of Accident: 14 : 15 (24-HR-FORMAT)Vehicle No.: SDB1368A Vehicle Make & Model: Toyota Sienta 1.5AExact location of Accident: Ang Mo Kio Ave 8 slip road to Ave 1Policyholder's Name / IC No.: Chan Weng Seng / S7260199EDriver's Name / IC No.: Lim Siew Cheng / S76033261 (As Above) ☐Driver's Contact No.: 97657201 Company Contact No.: _____Driver's Address: Blk 312 Serangoon Ave 2 #10-174 S (550312

Insurance Company: _____ Email address (if any): _____

Relationship between Owner & Driver: (Please **CIRCLE** one only)Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: _____**What do you wish to claim?** (Please **TICK** one only)☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)**Exact purpose for which the vehicle was being used at time of accident?**☒ Private use / ☐ Work purpose**Occupation (nature of job)** ☒ Indoor / ☐ Outdoor**No. of Passengers (Including Driver):** 3**Passenger Name :** _____**Gender :** Male / Female**Passenger Name :** _____**Gender :** Male / Female**Weather condition & Road conditions?** (On the day of accident)☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____**Was there any video captured by your Car Camera?** ☐ Yes / ☒ No**Any Injuries:** ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☐ Yes / ☐ No (If YES) Which Police Station: _____**The Other Party(s) Details:**1. Driver's Name / IC No.: Ryan Chan Yu Jun / S9341735F Vehicle No.: Nissan NV200 GBD135ADriver's Contact No.: 96906601 Insurance Company (If any): _____

2. Driver's Name / IC No.: _____ Vehicle No.: _____

Driver's Contact No.: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No.: _____

Preferred Workshop Name: _____ Contact No.: _____

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7605532G**

Name: **LIM SIEW CHENG (LIN XIUZHEN)**

Birth Date: **24 Feb 1976**

Issue Date: **04 Jan 2003**

000086274E

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7605532G**



Name: **LIM SIEW CHENG
(LIN XIUZHEN)**
林秀貞

Race: **CHINESE**

Date of birth: **24-02-1976** Sex: **F**

Country of birth: **SINGAPORE**

Driver

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	09 Jan 1998

NP 428A



3861636

ID Card No. **S7605532G**



Date of issue
27-03-2006

Address:
**APT BLK 312 SERANGOON AVENUE 2
#10-174
SINGAPORE 550312**

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7210199E



CHAN WENG SENG
(CHEN YONGCHENG)

陈永成

Race:

CHINESE

Date of Birth:

20-03-1972

Sex:

M

Country of Birth:

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7210199E

Name:

CHAN WENG SENG
(CHEN YONGCHENG)

Birth Date: 20 Mar 1972

Issue Date: 21 Feb 2018



owner

0390692



NRIC No: S7210199E



Blood Group: (Date of issue)

AB+ 19-06-1992

APT BLK 312 SERANGOON AVENUE 2 #10-174
SINGAPORE 550312

NRIC No: S7210199E

Date: 16-10-2001 No: 4043800

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg 08 Jan 2002



NP 428A



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

AUTOPLUS

CERTIFICATE NO. 2100415943-02000

OWN DAMAGE EXCESS S\$600.00 (1)
WINDSCREEN EXCESS S\$100.00
(for policies with effect from 1st November 2002)

SUM INSURED Market Value
INSURING WITH COE/PARF Yes
SDB1368A

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

CHAN WENG SENG

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

4 Jun 2017

4) DATE OF EXPIRY OF INSURANCE

3 Jun 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, pace-making, 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.

SOLE AGENT'S WORKSHOP : For new vehicles less than 3 years from initial registration, you have the option for claims-related repairs to be done at Sole Agent's workshop.

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

1. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118)
2. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only
3. Ethos - 30 Bukit Batok Crest (Tel: 66547777)
4. DPS Body & Paint (Subsidiary of C & C) - 209 Pandan Gardens (Tel: 65684501)
5. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560)
6. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)
7. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892)
8. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)
9. SME Motor - 1 Kaki Bukit Ave 6 Bld D (Tel: 67476106)

LOSS OF USE Loss of Use 10 Days (1600cc) - Refer to policy wordings for details

NAMED DRIVER NA

HIRE PURCHASE COMPANY NA
/ 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 At Singapore 5 May 2017

AIG Asia Pacific Insurance Pte. Ltd.

000064-000
DIRECT CLIENTS 01.4.95
AIG BUILDING
78 SHENTON WAY #07-16
SINGAPORE 079120

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPLUS