

NATIONAL Assessment Centre Services [Ref: Jan 03] MA918072203			
Date In: 04/06/2018 15:22	Job description:	Date & Time Completed	Done by
Ref No: NBA/019780/00534	SAS e-filing		
Veh No: SLQ 4321R	E-mail (w/ thin 8hrs, A/C 2hrs)		
DOA: 04/06/2018 22:00	i-Motor Claim Form		
OD: TP 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: CCP 5415	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

MA91803507	Invoice Preparation Checklist		Am't (\$) 1st Bill	Am't (\$) Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);			
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30			
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)			
Cat 1:	6) TR: Re-inspection \$75			
Cat 2 / 3:	7) N1: Idac 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 (N/n INC) against INC \$20			
	9) N12: Idac 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	04/06/2018 15:22
Date Of Accident	02/06/2018 22:00
Exact Location Of Accident	TAMPINES AVENUE 10 SLIP ROAD TOWARDS TPE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ4321R
Insured/Policyholder	
Name Of Registered Owner	CAR COVE LEASING PTE LTD
Co Reg No.	-
Email Address	EDWIN@CARCOVE.COM.SG
Mobile Phone No	(LOCAL) +65-91085842
Alternative Phone No	OFFICE-91085842

Vehicle Particulars

Manufacturer	BMW
Model	320I
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY HOME
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 HIRE

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	999994935/100835161-00024
Cover Note Number	

Driver

Name of Driver	MOHAMMAD ZULHILMI BIN NOOR MOHAMMAD
NRIC No	S9722144H
Date Of Birth	02/07/1997
Occupation	OUTDOOR
Date Of Driving Pass	23/11/2017
Driving Experience	0 YEAR AND 6 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91085842
Fax Number	
Contact Number	OTHERS-91085842
Email Address	EDWIN@CARCOVE.COM.SG

Address	BLK 232 COMPASSVALE WALK #02-468
Postcode	540232
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?	YES
Foreign Vehicle Registration Number	CCP5415 (COMMERCIAL VEHICLE)
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX BLOCK A , POSTCODE: 088762 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2369999 - FAX NO: 62268438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180604/2035

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	CCP5415
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MUHAMMAD AIZUDDIN BIN MUHAMMAD PIAH
NRIC/Passport Number	A41224320
Contact Number	+601110626217
Address	
Postcode	
Insurance Company Name	

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:

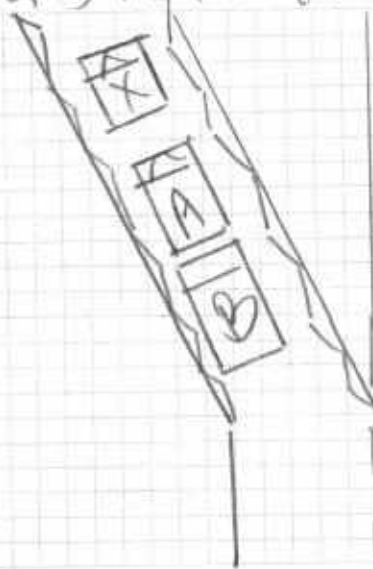
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:

SKETCH PLAN

Along TANJUNPURA AVENUE 10 TOWARDS IPE

A) SLQ 4321 R

B) CCP 5415



TANJUNPURA AVENUE 10

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
T/20180604/2035

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: 04/06/2018
NRIC/FIN No.: 1081 111113



SINGAPORE POLICE FORCE



T/20180604/2035

1 of 3

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

Report No. T/20180604/2035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/06/2018 11:16	Vide Report No.:	Station Diary No.: 34
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Informant's Particulars

Name of Informant: MOHAMMAD ZULHILMI BIN NOOR MOHAMMAD			Address: APT BLK 232 COMPASSVALE WALK #02-468 SINGAPORE 540232	
ID Type / ID No.: NRIC NO / S9722144H			Contact No.: Home/Office:	Mobile: 91085842
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 20	Date of Birth: 02/07/1997	Type of Informant: Driver	
Race: Malay			Language:	Institution / School Name:
Occupation: CISCO officer			Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 02/06/2018 10:00	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 TAMPINES AVENUE 10 TAMPINES EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
CCP5415	Lorry			Green	No Damage	0
SLQ4321R	Car	BMW	320I	Blue	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



**SINGAPORE
POLICE FORCE**



T/20180604/2035

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

2 of 3

Report No: T/20180604/2035

CONTINUATION OF REPORT

Driver			
Name	MOHAMMAD ZULHILMI BIN NOOR MOHAMMAD	ID No.	S9722144H
Related Vehicle	NIL	Contact No.	91085842
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 02/06/2018 at about 1000hrs, I was driving my rental car (SLQ4321R) along Tampines Ave 10 towards TPE. While travelling towards TPE, the traffic of the road was jammed, the lorry (CCP5415) right behind me could not able to stop in time and collision onto my rental car's back bumper. After which I tried to stop by to take a picture of the damages caused but the driver moved forward and bang onto my car's back bumper again. Both of us was then stopped by at the side to exchange particulars (Muhamad Aizuddin Bin Muhammad Piaah, A41224320, +601110626217), he told me that he does not have money to pay and asked me to drive my rental car back to Malaysia so he can repair it for me for free. After which I drove my rental car back to the car company and I was told to lodged a traffic accident report on 04/06/2018.



**SINGAPORE
POLICE FORCE**



T/20180604/2035

3 of 3

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

Report No. T/20180604/2035

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

A /

Sgt 2 CHERN YAN NI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 YEO KIA HUAT

Contact No.: 65476325



Authentication Stamp

NP168

Signature

Singapore Police Force

Signature Of Informant:

Date/Time:

04/06/2018 11:16

Classification Of Case:

ACCIDENT STATEMENT

ACCIDENT DATE: (7 / 6 / 2018) (DD/MM/YYYY), TIME: (22 : 00) (HH:MM)

LOCATION: Tampines Ave 10 Tampines Expressway

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLQ 9321R
 b) INSURANCE COMPANY: ALY
 c) POLICY NUMBER: 1
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: BMW
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: ON THE WAY BACK HOME
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY).

2. INSURED / POLICY HOLDER

- a) NAME: COR CEVE (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

3. DRIVER

- a) NAME: md zulkilmin (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S9722147H CONTACT: 91085847
 c) ADDRESS: Blk 232 Compassvale walk #02-968 S(540232)

*d) DATE OF BIRTH: (02 / 07 / 1997) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING: PASSE :: 23/11/2017

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Bukit Merah East N.P.C

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: CCP5415 MODEL: _____
 b) DRIVER'S NAME: Muhammad Arzuddin Bin Muhammad Pich
 c) NRIC/FIN/PASSPORT: A41224320 CONTACT: +60110626217

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: CCP5415 MODEL: _____
 b) DRIVER'S NAME: Muhammad Arzuddin Bin Muhammad Pich
 c) NRIC/FIN/PASSPORT: A41224320 CONTACT: +60110626217

()
 NUMBER OF
 PASSENGER
 INCLUDING DRIVER

()
 NUMBER OF
 PASSENGER
 INCLUDING DRIVER
 ()
 NUMBER OF
 PASSENGER
 INCLUDING DRIVER

1) EMAIL : zulkilminim47@gmail.com

2) VIDEO :



TRAFFIC POLICE DEPARTMENT
SINGAPORE POLICE FORCE
10, UBI AVENUE 3
SINGAPORE 408865

23/11/2017

Private & Confidential

MOHAMMAD ZULHILMI BIN NOOR MOHAMMAD

NO.15 JLN HARMONI 5/5, TAMAN DAMANSARA
ALIF, 81200 JB, JOHOR MALAYSIA

You will receive your photocard licence by registered mail within 1 month from date of application unless you made a special request to collect at Traffic Police Department at time of application.

S9722144H
(3A)

0001305057


\$50/-

23/11/2017

(Please do not detach)

YOU CAN DRIVE WHILE AWAITING THE
DELIVERY OF YOUR PHOTOCARD
DRIVING LICENCE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9722144H



Name
MOHAMMAD ZULHILMI BIN
NOOR MOHAMMAD

Race
MALAY

Date of birth
02-07-1997

Country of birth
SINGAPORE

Sex
M

4821903



NRIC No: S9722144H



Date of issue
02-02-2012

APT BLK 232 COMPASSVALE WALK #02-488
SINGAPORE 540232

NRIC No: S9722144H Date: 11/03/2018



HOTLINE TEL (65) 6410-3000
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, 1968
ROAD TRANSPORT ACT, 1967 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

TPFT COMMERCIAL MOTOR

CERTIFICATE NO. 999994935/100635161-00024

OWN DAMAGE EXCESS S\$2,000.00 (I & II)
WINDSCREEN EXCES N/A

(for policies with effect from 1st November 2002)

SUM INSURED S\$1.00

INSURING WITH COE/PARF YES

1) VEHICLE REGISTRATION NO.

SLQ4321R

2) NAME OF INSURED

Car Cove Leasing Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 28 Dec 2017

4) DATE OF EXPIRY OF INSURANCE 28 Sep 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any person who is driving on the Insured's order or with their permission.

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 for the carriage of passengers or goods in connection with the Insured's business.

Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.

The Policy does not cover

1) Use for 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 the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

LOSS OF USE NOT INCLUDED

* NAMED DRIVER N/A

HIRE PURCHASE COMPANY Heritage Auto Enterprise Pte Ltd

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 65 of the Road Transport Act, 1967 (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, 1967 (Malaysia).

Issued in Singapore 26 Jan 2018

AIG ASIA PACIFIC INSURANCE PTE. LTD

691901-000

MOH KOK HENG

AIG BUILDING 78 SHENTON WAY #07-16 SINGAPORE 079120 SP-MQH

Authorized Representative

ORIGINAL

6SCD5K