

NATIONAL Assessment Centre Services

(wef 1 Jan'05) MNA118035017

| | | | |
|-------------------------|------------------------------------------|-----------------------|---------|
| Date In: 9/6/18-14:05 | Job description | Date & Time Completed | Done by |
| Ref No: NA/A18010547/24 | SAS e-filing | | |
| Veh No: SK08551H | E-mail (within 8hrs, AIC 2hrs) | | |
| D.O.A: 6/6/18 - 18:45 | 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: SKH7113E | 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 |
|-----------|---------|
| | |
| | |
| | |
| | |
| | |

NA1803648

| Claimant's Particulars | Invoice Preparation Checklist | Am't (\$) Int Bill | Am't (\$) 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 | | |
| | 4) FT: Follow-Through Survey \$120 | | |
| | 5) FT: Follow-Through Survey (Resurvey) \$30 | | |
| | For claiming against INC Only (wef 10 Jan 2005) | | |
| | 6) TR: Re-inspection \$75 | | |
| | 7) N1: Idao DA + SMRT Survey \$160 | | |
| | 8) NTUC Additional Services: | | |
| | QD: | | |
| | *N5: Courtesy Car / Tpl 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: Idao Mobile 30 | | |
| QC Checked by (Engr-In-Charge): | Invoice dated | Fee Charged | |
| | Invoice dated | Fee Charged | |

Auditors' Comments:

Pat 1:

Pat 2 / 3:

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 | 09/06/2018 14:05 |
| Date Of Accident | 06/06/2018 18:45 |
| Exact Location Of Accident | MARINE PARADE ROAD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SKU8551H |
| Insured/Policyholder | |
| Name Of Registered Owner | ASSET LIMO |
| Co Reg No | 53309913K |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-93885966 |
| Alternative Phone No | OFFICE-93885966 |

Vehicle Particulars

| | |
|------------------------------------------------------------------------------|---------------------|
| Manufacturer | HYUNDAI |
| Model | HD AVANTE 1.6 A S/R |
| Exact Purpose for which vehicle was being used at time of accident | WORKING |
| 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 | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 999994656 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | CHEW KOK FAI |
| NRIC No | S1523006A |
| Date Of Birth | 03/06/1962 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 29/03/1990 |
| Driving Experience | 28 YEARS AND 2 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-88262938 |
| Fax Number | |
| Contact Number | OFFICE-88262938 |
| Email Address | NOEMAIL |

| | |
|-----------------------------------------------------|----------------------------------|
| Address | BLK 47 MARINE CRESCENT #07-78 |
| Postcode | 440047 |
| 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 | 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? | |
| 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 | MARINE PARADE NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 300 MARINE PARADE ROAD , POSTCODE: 449296 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-4428999 - FAX NO: 62447678 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO POLICE REPORT - T/20180606/2225.

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 | SKH7113E |
| 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)

1

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:

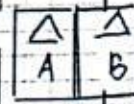
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

VEHICLE A: SKU 8551H

VEHICLE B: SKH 7113E

Marine Parade



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report.

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 POLICE FORCE



T/20180606/2225

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

1 of 3

Report No. T/20180606/2225

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--------------------------------------------|------------------|--------------------------|
| Date/Time Report Made: 06/06/2018 22:18 | Vide Report No.: | Station Diary No.: 42 |
|--------------------------------------------|------------------|--------------------------|

Informant's Particulars

| | | | |
|------------------------------------------|------------|-------------------------------------------------------------------|------------------------------|
| Name of Informant: CHEW KOK FAI | | Address: APT BLK 47 MARINE CRESCENT #07-78 SINGAPORE 440047 | |
| ID Type / ID No.: NRIC NO / S1523006A | | Contact No.: Home/Office: Mobile: 93885966 | |
| Nationality: SINGAPORE CITIZEN | | Email: | |
| Sex: Male | Age: 56 | Date of Birth: 03/06/1962 | Type of Informant: Driver |
| Race: Chinese | | Language: English | Institution / School Name: |
| Occupation: PRIVATE HIRE DRIVER | | Driving Licence Information: Class: 3 Date of Expiry: | |

General Information

| | | | |
|-------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------|-------------------------------------|
| Type of Accident: Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 06/06/2018 18:45 | Type of Location: |
| Location: Along Road 1 MARINE PARADE ROAD Marine Parade Road towards Amber Road, near 83 Marine Parade Central | | | |
| Weather: Clear | Road Surface: Dry | Road Speed Limit: | |
| Traffic Flow: | Traffic Control: | Traffic Volume: | |
| Type of Collision: | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Vehicle Type | Make | Model | Color | Condition | No. of Passenger |
|-------------|--------------|---------|---------------------|-------|------------------|------------------|
| SKU8551H | Car | HYUNDAI | HD AVANTE 1.6 A S/R | Red | Slightly Damaged | 0 |

Details of Pedestrian

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



**SINGAPORE
POLICE FORCE**



Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

Report No. T/20180606

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|----------------|----------------------------------------|---------------------------------|
| Driver | | | |
| Name | CHEW KOK FAI | ID No. | S1523006A |
| Related Vehicle | SKU8551H (Car) | Contact No. | 93885966 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 06/06/2018, at about 6.45pm, I was driving my vehicle, a maroon Hyundai Avante bearing plate number SKU8551H, along Marine Parade Central, intending to turn left onto Marine Parade Road. I wish to state that I was driving on the 2nd lane of 3 lanes along moderate traffic. After I had just cleared the cross junction of Marine Parade Road and Marine Parade Central, I noticed that a vehicle had just made a U-turn from the opposite direction of Marine Parade Road.

The vehicle, a grey Saloon vehicle of plate number SKH7113, then drove alongside me. I could not recall the exact plate number as it was either SKH7113E or SKH7113F. The vehicle hit on the right wing vehicle of my vehicle. I tried to signal to the driver of the Grey vehicle to stop his vehicle so that we could exchange particulars. However, the driver, a Chinese male in his 40s to 50s, then drove away and turned left into Parkway Parade carpark.

I did not attempt to follow him as I was running errands at that point of time. I have lodged a report with my insurance company. I was also advised to lodge a police report.



**SINGAPORE
POLICE FORCE**



T/20180606/2225

3 of 3

Report No. T/20180606/2225

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

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:
G /
Sgt 3 MUHAMMAD FARIHIN BIN RAHIM

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt TAN JEOK LENG
Contact No.: 65476144

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
06/06/2018 22:18

Classification Of Case:



SINGAPORE
POLICE FORCE

SIGNATURE

Scanned by CamScanner

ACCIDENT STATEMENT

ACCIDENT DATE: (06/06/2018) (DD/MM/YYYY), TIME: (18:45) (HH:MM)

LOCATION: Marine Parade Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SF4855TH
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER:
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Hyundai Avante
 f) TYPE: (SEDAN / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: WORK
 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: Asset Limco (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 93885966 CONTACT: 5(440047)
 c) ADDRESS: 47 Marine Crescent #07-78

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Chew Koe Fai (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1523006A CONTACT: 88262938
 c) ADDRESS:

*d) DATE OF BIRTH: (03/06/1965) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 28

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HIRER

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: Marine Parade NPL

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SFH 7113E MODEL:
 b) DRIVER'S NAME:
 c) NRIC/FIN/PASSPORT: CONTACT:

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: MODEL:
 e) DRIVER'S NAME:
 f) NRIC/FIN/PASSPORT: CONTACT:

email =

fax =

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S 1523006 A**
Name:

CHEW KOK FAI

Birth Date: **03 Jun 1962**

Issue Date: **08 Feb 2004**



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1523006A**



Name

CHEW KOK FAI



周 奇 輝

Race

CHINESE

Date of Birth

03-06-1962

Country of Birth

SINGAPORE

Sex

M



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

29 Mar 1990

NP 428A



Licence No: S1523006A

2641181



NRIC No. **S1523006A**



Blood Group Date of issue

B+ **06-06-1995**

APT BLK 47 MARINE CRESCENT #07-78
SINGAPORE 440047

NRIC No: **S1523008A**

Date: **18-04-2001** No: **3814930**

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.Z.400

| | | | |
|----------------------------------------------------|------------------|--------------------------------------|----------------------|
| THIRD PARTY | COMMERCIAL MOTOR | (The below excess is subject to GST) | |
| CERTIFICATE NO. | SKU8551H | POLICY EXCESS | S\$1500.00 (Sect II) |
| POLICY NO. | 999994656 | WINDSCREEN EXCESS | NA |
| 1) VEHICLE REGISTRATION NO. | | SUM INSURED | NA |
| 2) NAME OF INSURED | | INSURING WITH COE/PARF | NA |
| 3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE | | SKU8551H | |
| FOR THE PURPOSES OF THE ACT | | ASSET LIMO | |
| 4) DATE OF EXPIRY OF INSURANCE | | 25 May 2018 | |
| 5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE* | | 09 March 2019 | |

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

S\$1,500.00 Section II Excess is applicable for driver who is above 22 years old and/or with minimum 2 years driving experience.

The policy does not cover drivers who are below 22 years old with less than 2 year driving experience.

Intended usage is for limousine/ rental purposes.

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*

- 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.

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.

LOSS OF USE Not Included

HIRE PURCHASE COMPANY NA

*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 25 May 2018

AIG Asia Pacific Insurance Pte. Ltd.

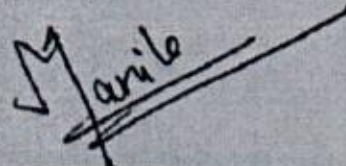
503052-000

HUND

55 Lorong L Telok Kurau

#02-59 Bright Centre

Singapore 425500



ORIGINAL

AUTHORISED REPRESENTATIVE

SSPOEC