

NATIONAL Assessment Centre Services

(wef 1 Jan 05) MNA118 09946

Date In: 21/6/18-11:41	Job description	Date & Time Completed	Done by
Ref No: NA/A1801321/24	SAS e-filing		
Veh No: SLA3J8X	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 20/6/18-19:25	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: SLP54J0A	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

NA1803930.

Claimant's Particulars:	Invoice Preparation Checklist	Am't (\$) Inc 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: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
	*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 (Non INC) against INC \$20		
	9) N12: Idac Mobile \$0		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	
Auditors' Comments:-			
Ref 1:			
Ref 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	21/06/2018 11:41
Date Of Accident	20/06/2018 19:25
Exact Location Of Accident	BKE (WOODLANDS) BEFORE DAIRY FARM RD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA358X
Insured/Policyholder	
Name Of Registered Owner	JAFNI DENNIS LIEW YONG QIANG
NRIC No	S9248057G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97884683
Alternative Phone No	OFFICE-97884683
Vehicle Particulars	
Manufacturer	RENAULT
Model	KADJAR 1.5 DCI EDC 6AT S&S EU6
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	1800067165
Cover Note Number	
Driver	
Name of Driver	JAFNI DENNIS LIEW YONG QIANG
NRIC No	S9248057G
Date Of Birth	24/11/1992
Occupation	OUTDOOR
Date Of Driving Pass	03/01/2013
Driving Experience	5 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97884683
Fax Number	
Contact Number	OFFICE-97884683
Email Address	NOEMAIL

Address	BLK 122 YISHUN STREET 11 #02-491
Postcode	760122
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	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO STATEMENT.

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	SLP5450A
Vehicle Make/Model/Colour	SEAT LEON
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBG1580A
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Vehicle Make/Model/Colour

TOYOTA DYNA

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

BKE (woodlands) before Dairy farm Rd exit.



veh A : SLA 358X
veh B : SLP 5450A
veh C : GBG 1580A.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along BKE (woodland) on the first lane of a 4-lane expressway. Somewhere before dairy farm rd exit, I saw vehicles ahead slowing down, as such I also slowed down. I managed to stop behind vehicles ahead of me when suddenly I felt a strong impact from the rear portion of my vehicle. After the accident, I alighted to see that I am the first vehicle of a 3-car collision.

veh A SLA 358X
veh B SLP 5450A.
veh C GBG 1580A.

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.:

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.:

Date of Accident : 20-6-18 Accident Time: 1925hrs. (24-HR-Format)
 Accident Place : BKE (woodland) before Dairy farm Rd exit.
 Vehicle No. (Car Plate No.) : SLA 358X Make/Model: Renault Kadjar 1.5.
 Insurance Company : AIG. Policy No: 1800067165.
 Owner or Company Name / IC No. : Jafni Dennis Liew Yong Qiang .592480576
 Owner or Company Contact No. : _____ Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : Jafni Dennis Liew Yong Qiang 392480576
 DRIVER'S Date Of Birth : 24 Nov 1992 DRIVER'S License Pass Date 03 Jan 2013.
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Owner.
 DRIVER'S Address : Blk 122 Yishun St 11 # 02-491 S(760122).
 DRIVER'S Contact No./ Alt No. : 1) 97884683. 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR sales. (e.g. working inside or outside office)
 Email Address : sales@mia.com.sg.
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 01 - Driver.
 Was there any video Captured by car camera: YES NO (did not capture).
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): _____

Other Party Driver's Particular (if any)

Vehicle No: SLP 5450A.
 Vehicle Make/Model: Seat Leon.
 Name Driver: _____
 IC No. Driver/Contact: _____

Vehicle No: GRG 1580A.
 Vehicle Make/Model: Toyota Dyna.
 Name Driver: _____
 IC No. Driver/Contact: _____

*** NEW - Passenger's name & gender:**

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

EFFECTIVE DATE

Class 3 Motor Cars - < 3000kg with < 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg

03 Jan 2013



Licence No. S9248057G

NP 428A

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9248057G**

Name: **JAFNI DENNIS LIEW YONG QIANG**

Birth Date: **24 Nov 1992**

Issue Date: **03 Jan 2013**

002137529C

4 6 6 0 2 1 8



LIC No. S9248057G



Date of Issue: **03-12-2010**

Address: **APT BLK 122 YISHUN STREET 11 #02-491 SINGAPORE 760122**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9248057G**

Name

JAFNI DENNIS LIEW YONG QIANG

刘勇强

Race

CHINESE

Date of birth

24-11-1992

Sex

M

Country of birth

SINGAPORE

CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : JAFNI DENNIS LIEW YONG QIANG
 Period of Insurance : 06 Jun 2018 To 05 Jun 2019
 Engine No. : K9KF647D013785
 Chassis No. : VF1RFE00554465181

Vehicle No. : SLA358X
 Policy No. : 1800067165
 Endorsement No. :
 Issued Date : 06 Jun 2018

ABOUT THE COVER

Make/Model	RENAULT Kadjar 1.5T dCi	Sum Insured	Market Value	First Year of Registration	2016
Engine Capacity/Tonnage	1,461.00 CC	Off Peak Car	No	Insuring with COEP-ARF	Yes
Driver Restriction	NA				

Person or Classes of Persons Entitled to Drive*

at The Policyholder's discretion or with his/her permission.
 * Any other person who is driving on the Policyholder's order or with his/her permission.
 This policy will indemnify the Policyholder or any authorized 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" ("YGE") if You are of Your Authorized 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 local, 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 imperative by Section 2 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

JAFNI DENNIS LIEW YONG QIANG - \$800 (Own Damage)

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

Approved Reporting Centres/ AIG Authorized Repairers (For claims related repairs)
 Any accident repairs to the Vehicle must be carried out by one of our Authorized 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 Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 6326 5200. Alternatively, You may refer to AIG website www.aig.com.sg or AIG 90 Mobile App. Simply search and download "AIG 90" from iTunes or Google Play.

IMPORTANT NOTES

e Purchase Company/Employer's Loan: KENSO LEASING PTE LTD

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 1 of the Road Transport Act, 1967 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

M. J. J. J.