NATIONAL Assessment Centre	Services 1949 SAUCEL
Date In 16/07/18	Jcb description Date & Time Completed Done by
Ref No NA/AIG 18012884/13	SAS e-filing
Veh No Sym47544	E-mail (within Stars, AIC 2hrs)
DOA 15/07/18 1715	i-Motor Claim Form
00 (5)	i-Motor W/O (Within: OD 2hrs. TP 4hrs)
OD (IP)' Peporting Only	i-Photo Uploaded
TP Insurer	Assessment/Survey Report
1 F Insurer	Ass't Report by Fax / Hand to Owner/Wksp
Preferred Wksp / INC Assign Wksp / QW: (TORQUE 5 Tel: Fax:
TP Particulars: Veh No:	CKL 79JJL INC()/Non-INC()
Owner / Driver: (Tel:)
Policy No: () Perio	od: () Cover Type: ()
Confirmed by : (Date: Time:)
	ote-Est. Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]
	arranty: YES ()/NO()
Excess: (\$) Loading: \$1,000	0 ()/\$2,000 ()
General Remarks:-	
QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > \$30]	00] ()
Injury:	
Date/Time Actions	
	Invoice Preparation Checklist Ant (\$) Ant (
NA1804 US9	1) AR: Accident Reporting (\$30);
laimant's Particulars :-	2) DA : Damage Assessment (\$100); INC (\$80) 3) TF : Towing Fee \$40/\$45
river/Owner:	4) FT : Follow-Through Survey \$120
ontact No:	5) FT : Follow-Through Survey (Resurvey) \$30 For claiming against INC Only (wef 10 Jan 2005)
amäged Portion:	6) TR : Re-inspection
C Checked by (Engr-In-Charge):	OD* *N5: Courtesy Car / Tpt Allowance \$5 *N6: Repair Co-ordination \$10
uditors' Comments :-	*N7: Post Repair Inspection \$25
<u> 1. 1:</u>	*N8: DV / Collect Excess Coordination \$5 TP (N11): TP (Non INC) against INC \$20
1. 2 / 3;	9) N12: Idac Mobile 30 Invoice dated Fee Charged
1. 4.1 3.	Invoice dated ree 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 witholding 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.
- Any false reporting may be referred to the Police for investigation.
- 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,	g p and to appropriate and a seminary
	ACCIDENT STATEMENT
Date Of Report	16/07/2018 17:29
Date Of Accident	15/07/2018 17:15
Exact Location Of Accident	LENTOR AVE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJM4754U
Insured/Policyholder	
Name Of Registered Owner	MARIC MARKETING PTE LTD
Co Reg No	201620700D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64524300
Vehicle Particulars	
Manufacturer	KIA
Model	CERATO
Exact Purpose for which vehicle was being used at time of accident	WORK
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 999994659

Cover Note Number

Driver

Name of Driver ERMAN BIN HAMIN

NRIC No S8813487G Date Of Birth 18/04/1988 Occupation OUTDOOR Date Of Driving Pass 05/12/2012

Driving Experience 5 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87993401

Fax Number Contact Number

EMail Address NOEMAIL Address

BLK 224 ANG MO KIO AVE 1

#04-543

Postcode

560224

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?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

5

Passenger 1

NAME:

: QUAH YI SHIN EASON

GENDER:

: MALE

Passenger 2

NAME:

: NOR FIRMAN ASHAR

GENDER:

: MALE

Passenger 3

NAME:

: NOR IMAN RAMADHANI

GENDER:

: MALE

Passenger 4

NAME:

: NURABDAH BTE MOHAMED

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TECK GHEE NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 321 ANG MO KIO STREET 31, POSTCODE: 560321,

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-4599999 - FAX NO: 64574478

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20180715/2087

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH WORKSHOP FILE TOO BIG

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKL7927L

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)

DETAILS OF INJURED PERSON 1

Name

ERMAN BIN HAMIN

Approximate Age

Injuries Sustain

SLIGHT

Injured person in which vehicle?

SJM4754U

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

DETAILS OF INJURED PERSON 2

Name

QUAH YI SHIN EASON

Approximate Age

Injuries Sustain

SLIGHT

Injured person in which vehicle?

SJM4754U

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

DETAILS OF INJURED PERSON 3

Name

NOR FIRMAN ASHAR

Approximate Age

Injuries Sustain

SLIGHT

Injured person in which vehicle?

SJM4754U

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 4

Name

NOR IMAN RAMADHANI

Approximate Age

Injuries Sustain

SLIGHT

Injured person in which vehicle?

SJM4754U

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

DETAILS OF INJURED PERSON 5

NURABDAH BTE MOHAMED Name

Approximate Age

Injuries Sustain

SJM4754U Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address

Postcode

SLIGHT

YES

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:
 - 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.

Maric Marketing Pte Ltd Co Reg No 201620700D

Policylore Lane #03-04 patrigapore 787472

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

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

ESCRIBE CIRCUMSTANCES OF THE ACCIDENT ESCRIBE CIRCUMSTANCES OF THE ACCIDENT THE POPULATION AVE. THE POPULATION AVE.	SKETCH PLAN			
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT		B2	Vehule Yshuk	B/SEL7927
refort.	ESCRIBE CIRCUMSTANCES OF 1	THE ACCIDENT	Lentor	Ave.
THOM:	1	LEW to	police	
		1 Klov		
THE PERSON OF TH	Passeuge 4 ECLARATION We declare the foregoing particulars Pric Marketing Pte Ltd Reg No 2016207000 ICHARET SIDE W03-04 RE EMPIRE 787472			16/07/18 tre Personnel's Signature

Date & Time:

NRIC/FIN No.:





1 of 3

Report No. T/20180715/2087

Police Station Of Origin: Teck Ghee NPP 321 Ang Mo Kio Street 31 SINGAPORE 560321

Tel No: 1800-4599999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/07/2018 17:46		Made:	Vide Report No.:	Station Diary No.:
Informa	ent's Partic	ulars		THE PERSON NAMED OF THE PARTY OF
ERMAN	f Informant: I BIN HAMII		Address: APT BLK 224 ANG MO KIO 560224	AVENUE 1 #04-543 SINGAPORE
	/ ID No.: O / S88134	87G	Contact No.: Home/Office:	Mobile: 87993401
Nationa SINGAF	lity: PORE CITIZ	'EN	Email:	
Sex: Male	Age: 30	Date of Birth: 18/04/1988	Type of Informant:	
Race: Javanes	e	10	Language:	Institution / School Name:
Occupat GRAB C	ion: AR DRIVE	R	Driving Licence Information: Class: 3	Date of Evology

General Infor	mation of the Accide	ent		STATE OF THE PARTY	
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/07/2018 17:	15	Type of Location: Straight Road
		35			
Weather: Clear		Road Surface: Dry		Road	Speed Limit:
Traffic Flow: Traffic Control: One Way Traffic Light - Working		orking	Traffi	c Volume:	
Type of Collis Between Mov	ion: ing Vehicles - Head T	o Rear	5	Anyo	ne conveyed by llance:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJM4754U	Car				Slightly Damaged	4
SKL7927L					Damagou	0

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





T/20180715/2087

2 of 3

Report No. T/20180715/2087

Police Station Of Origin: Teck Ghee NPP 321 Ang Mo Kio Street 31 SINGAPORE 560321

Tel No: 1800-4599999

CONTINUATION OF REPORT

Driver						
Name	ERMAN BIN HAMIN			ID No	c	S8813487G
Related Vehicle	SJM4754U (Car)	rando de Primario de Arte de Primario de Arte d	tion and the terminal and debugs of the	Conta	ct No.	87993401
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL Date Disc		harge	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of			
Driver					100	
Name	MALE DRIVER			ID No		NIL
Related Vehicle	SKL7927L		Contact No.		NIL	
Hospital/Clinic	NIL.		Class Driving Licence Expiry	g e &	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disch	nerge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 15/07/2018 at about 1713hrs, I was driving vehicle bearing SJM4754U along Lentor Avenue towards Yio Chu Kang and there was one vehicle bearing SKL7927L. We were approaching a traffic junction and when the traffic turns green, I horned at him and he suddenly reversed back and rammed onto the front of my vehicle.

After which he drove off and pointed middle finger. Subsequently, when we reached another traffic junction, he opened up his driver door and pointed middle finger at us as well. After which he drove off.

I wish to state that I have a in-car camera and this is the first time such incident had happened. There is a small scratch at the front of my vehicle.





Report No. T/20180715/2087

3 of 3

Police Station Of Origin: Teck Ghee NPP 321 Ang Mo Kio Street 31 SINGAPORE 560321 Tel No: 1800-4599999

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.

F / Sgt 1 YEE JIA WEI JONATHAN	е кероп:	Signature Of Informant:	
Signature Of Interpreter: Not applicable		Date/Time: 15/07/2018 17:46	
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt TAN JEOK LENG Contact No.: 65476144		Classification Of Case: .	
Authentication Stamp	Singapor	e Police Force	

ACCIDENT STATEMENT

ACCIDENT DATE: 15 / 07 / 2018 HOD/MM/Y	YYY), TIME: (17 . 15)(HH:MM
LOCATION: Lentor AVE	
1. DETAILS OF VEHICLE a) VEHICLE NUMBER: SAM 475	44
DJINSURANCE COMPANY: A 16 CJPOLICY NUMBER:	
G)POLICY TYPE: (COMPREHENSIVE / THIRD F	1.6 AT
f)TYPE:(SALON / COUPE / MPV /V AN / LO g)VEHICLE CATEGORY:(PROATE / COMMER h)PURPOSE OF USING AT ACCIDENT TIME:	RCIAL / MOTORCYCLE)
1) ARE YOU CLAIMING UNDER YOUR OWN IN IF NO, PLEASE STATE (THIRD PARTY CLAIM /	
2. INSURED / POLICY HOLDER ANAME: MARKETININ P	
C)ADDRESS: 9 Tayore Lane	CONTACT:
* CONTINUE TO 3.d IF DRIVER ALSO POLICY H	HOLDER
Conduding driver) DRIVER ODS ODS ODS ODS ODS ODS ODS OD	(MQDE/FEMALE) CONTACT: 87993401
5 56 0224	101 -345
*d) DATE OF BIRTH: (18 / 04/ 1988) (DE	/MM/YYYY)
eloccupation: (INDOOR / OUTDOOR)	
f) YEARS OF DRIVING EXPRERIENCE: 5 9	avs
4. WAS DRIVER AN EMPLOYEE OF THE INSU	RED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WI	
5. a) WEATHER CONDITION: (CLEAR / RAINING /	OTHERS
6. WAS ANYBODY INJURED (YES / NO) DIVIL	+ Passeyo
7. a) REPORTED TO POLICE (ES / NO) IF YES, PLEASE STATE WHICH POLICE STATION	vi teck wher
# No of passenger a) VEHICLE NUMBER: SKL 7927L (Including driver) b) DRIVER'S NAME:	MODEL:
c) NRIC/FIN/PASSPORT:	CONTACT:
HIND PARTY VEHICLE WHO OF DESCRIPTION OF VEHICLE NUMBER:	MODEL:
(Including driver) f) DRIVER'S NAME:	CONTACT::-
rayor Ubi Industrial park 2. Charl = REPORTING TOPQUES	
11-25,51UL AVE 1 Pax = 6452 458	
D1* 72	0
DRIVE	
5 (408 933) VIDEO: WITH W	

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8813487G

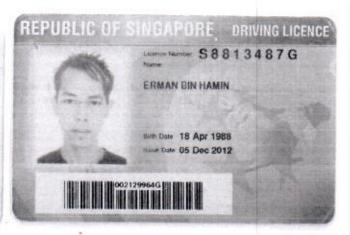


ERMAN BIN HAMIN

ايرون بن حامين JAVANESE Date of Birth 18-04-1988

SINGAPORE







YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class 3 Motor Cars =< 3000 kg with =<7 passengers, exclusive 05 Dec 2012 of the driver, and other motor vehicles =< 2500 kg

NP 428A



HOTLINE TEL 1011 6419-3000 FAX (65) 0416-3723

CERTIFICATE OF INSURANCE

OTOR YENCLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THRID-PARTY RISKS AND COMPENSATION) BULES, 1943 ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES [THIRD-PARTY RISKS] RILES, 1939 [MALAYSIA]

THIRD PARTY CERTIFICATE NO. POLICY NO.

COMMERCIAL MOTOR

SJM4754U 999994659

(The below excess is subject to GST).

POLICY EXCESS S\$1000.00 (Sect II)

WINDSCREEN EXCESS

NA

SUM INSURED INSURING WITH COE/PARF NA SJM4754U

MARIC MARKETING PTE LTD

25 April 2018

24 April 2019

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE"

Any person who is driving on this indured's order or with their points

351,000.00 Section It Excess is applicable for shiver who is above 22 years old and/or with minimum 2 years driving experience

552,000.00 Section II Expess is applicable for shivers who is 21 years old with minimum 1 year driving experience.

The policy does not cover drivers who are below 21 years old or less than 1 year driving experience.

Provided that the person driving is permitted in accordance with the licensing or other lews or requisions to drive the by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Venda

6) LIMITATION AS TO USE"

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

- Use for social, domestic pleasure purposes and business purposes of tricined
 Use for social, domestic pleasure purposes and business purposes of any person whom the w
- 3) Use for the carriage of passengers for rive or reward by any person to wham the vehicle is hired

LOSS OF USE

Not included

HIRE PURCHASE COMPANY

Limitations rendered inoparative by Section 8 of the Moor Vehicles (Third-Party Risks and Correct Melaysia), are not to be included under these headings. abon) Act (Chapter 199) and Section 45 of the Road Transport Act, 1987

If two hereby Centry that the policy to which this Centricate relates is issued in accordance with the provisions of the Motor Vic Therd-Party Risks and Compensation; Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Issued in Singapore 25 Apr 2018

500656-000 Cowell Insurance (Agency) Pte. Ltd. & Burn Road gog-09 Trives Singapore 369977

AIG Asia Pacific Insurance Pter Ltd.

SSPORC

ORIGINAL

Enquire Vehicle Information

Vehicle No.

Vehicle No.:

SJM4754U

Vehicle Details

Vehicle Type:

Private Hire (Chauffeur) Motor Car

Vehicle Attachment 1:

No Attachment

Make / Model:

KIA / CERATO 1.6 AT ABS AIRBAG 2WD 4DR

Primary Colour:

Blue

Year of Manufacture:

2008

Maximum Laden Weight:

1720 kg

Unladen Weight:

1290 kg

No. Of Axles:

2

Engine No.:

G4FC8H014550

Chassis No.:

KNAFE227395637841

Engine Capacity:

1591 cc

Maximum Power Output:

89.7 kW (120 bhp)

IU Label No.:

1122665293

Propellant:

Petrol

Passenger Capacity:

4

Original Registration Date

05 Jan 2009

:

First Registration Date:

05 Jan 2009

Open Market Value:

\$11,118.00

Additional Registration

100.00 %

Fee Rate:

Actual ARF Paid:

\$11,118.00

PARF Eligibility:

Yes

Minimum PARF Benefit:

\$5,559.00

PARF Eligibility Expiry

04 Jan 2019

Date:

COE No.:

2009010101001747K

COE Category:

A - Car (1600cc & below)

COE Expiry Date:

04 Jan 2019

Quota Premium (QP):

\$7,721.00

QP Paid:

\$7,721.00

OPC Cash Rebate

No

Eligibility:

QP during COE Bidding

\$7,721.00

Exercise:

CO2 Emission:

10.00

CO Emission:

.

HC Emission:

NOx Emission:

1

PM Emission:

-