

NATIONAL Assessment Centre Services

[wef 1 Jan'05] MNA18096314

Date In: 25/7/18 - 17:33	Job description	Date & Time Completed	Done by
Ref No: NA/18096314	SAS e-filing		
Veh No: JM2832R	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 21/7/18 - 07:50	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: FBM7098E

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%; P: 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

NA1804690	Invoice Preparation Checklist	Am't (\$) Inc 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		
	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:-		
	QD*		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
Auditors' Comments:-	*N8: DV / Collect Excess Coordination \$5		
Dat. 1:	TP (N11): TP (Non INC) against INC \$20		
Dat. 2 / 3:	9) N12: Idac Mobile 30		
	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 25/07/2018 17:33
 Date Of Accident 24/07/2018 07:50
 Exact Location Of Accident ALONG PIE (TUAS)
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJM2832R
Insured/Policyholder
 Name Of Registered Owner MARIC MARKETING PTE LTD
 Co Reg No 201620700D
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-89999999

Vehicle Particulars

Manufacturer HYUNDAI
 Model HD AVANTE 1.6 A
 Exact Purpose for which vehicle was being used at time of accident COMMERCIAL 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 HIRE

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number 999994660
 Cover Note Number

Driver

Name of Driver MUHAMMAD 'IDIL REDZHAR BIN MAS'AD
 NRIC No S8919637Z
 Date Of Birth 15/06/1989
 Occupation INDOOR
 Date Of Driving Pass 09/12/2011
 Driving Experience 6 YEARS AND 7 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-91456950
 Fax Number
 Contact Number OFFICE-91456950
 Email Address NOEMAIL

Address	BLK 691D WOODLANDS DRIVE 73 #04-59
Postcode	734691
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	SIDE SWIPE
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?	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	FBM7098E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.

Maric Marketing Pte Ltd
Co Reg No 201620700D
9 Tagore Lane #03-04

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

PIE Tuas

Vehicle A: SJM 2832R

Vehicle B: FBH 7098E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle A was stationary as the traffic is heavy. Suddenly vehicle B hit my right rear portion.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Maric Marketing Pte Ltd
 Co Reg No 201620700D
 90 Telok Ayer St #03-04
 Singapore 787472


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


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

ACCIDENT STATEMENT

ACCIDENT DATE: (24 / 07 / 2018) (DD/MM/YYYY), TIME: (07: 50) (HH:MM)

LOCATION: PIE Tuas

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJM 2832R
 b) INSURANCE COMPANY: _____
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE) / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: Hyundai Avante
 f) TYPE: (SALOON) / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS
 g) VEHICLE CATEGORY: (PRIVATE) / (COMMERCIAL) / MOTORCYCLE
 h) PURPOSE OF USING AT ACCIDENT TIME: Private
 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: Manic Marketing Pte Ltd (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 201620700D CONTACT: _____
 c) ADDRESS: 9 Tagore Lane #03-04 S (787472)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Muhamad Idris Redzhan Bin Mas AD (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S89196372 CONTACT: 9145 6950
 c) ADDRESS: B1K 691 D Woodlands Drive 73 #04-59
 S89196372

* d) DATE OF BIRTH: (15 / 06 / 1989) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR) / (OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 7 years

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hired

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: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: FBM 7098E 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: _____

LKK

Paya Ubi Industrial Park 3

#01-25, 51 Ubi Ave 1


S(408933)

Email = REPORTINS@

TOPQUE5.com

fax = 6452 4584


REPUBLIC OF SINGAPORE DRIVING LICENCE



 Licence Number: **S8919637Z**
 Name: **MUHAMMAD 'IDIL REDZHAR BIN MAS'AD**
 Birth Date: **15 Jun 1989**
 Issue Date: **30 Mar 2015**


002411179A

SG

REPUBLIC OF SINGAPORE


 IDENTITY CARD NO. **S8919637Z**


 Name: **MUHAMMAD 'IDIL REDZHAR BIN MAS'AD**


 Race: **BOYANESE**
 Date of birth: **15-06-1989**
 Country/Place of birth: **SINGAPORE**

Sex: **M** S8919637Z

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	09 Dec 2011
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	03 May 2013

NP 42BA

Licence No: S8919637Z

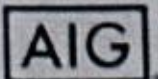
5537846


 NRIC No: **S8919637Z**


 Date of Issue: **17-11-2015**

APT BLK 691D WOODLANDS DRIVE 73 #04-59
SINGAPORE 734691

NRIC No: **S8919637Z** Date: **28/02/2018**



HOTLINE TEL: (65) 6412 0000
FAX: (65) 6412 9723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 188)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1987

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1988 (MALAYSIA)

(The Insured Amount is subject to GST)

COMPREHENSIVE
CERTIFICATE NO.
POLICY NO.

COMMERCIAL MOTOR
SJM2832R
999994660

POLICY EXCESS \$51000.00 (Sect 1)
WINDSCREEN EXCESS \$5100.00

SUM INSURED Market Value
INSURING WITH COE/PARF Yes
SJM2832R
MARIC MARKETING PTE LTD

- 1) VEHICLE REGISTRATION NO.
- 2) NAME OF INSURED
- 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*

25 April 2018
24 April 2019

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

\$51,000.00 Section I Excess and \$51,000.00 Section II Excess is applicable for driver who is above 21 years old and/or with minimum 2 years driving experience.

\$52,000.00 Section I Excess and \$52,000.00 Section II Excess is applicable for drivers 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 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 driving 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 TAI THONG LEE TRADING

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 188) and Section 55 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 188) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 06 Apr 2018

500656-000
Cowell Insurance (Agency) Pte. Ltd.
8 Burn Road
#09-09 Trivex
Singapore 369977

AIG Asia Pacific Insurance Pte. Ltd.


AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL