

NATIONAL Assessment Centre Services (wef 1 Jan 05)

Date In: 31/08/18	Job description	Date & Time Completed	Done by
Ref No: NA/AIG18015937/13	SAS e-filing		
Veh No: SLR7499L	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 30/08/18 1745	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: (**MASSIVE**) Tel: Fax:)

TP Particulars: Veh No: **SLU2458Y** 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

NA1805542	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) 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:-		
	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 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	31/08/2018 16:26
Date Of Accident	30/08/2018 17:45
Exact Location Of Accident	CHOA CHU KANG AVE 3 JUNC OF CCK CENTRAL RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR7499L
Insured/Policyholder	
Name Of Registered Owner	VC CONSULTANCY PTE LTD
Co Reg No	201437078D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90469296

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ATTRAGE
Exact Purpose for which vehicle was being used at time of accident	GOING 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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	170004528-01
Cover Note Number	

Driver

Name of Driver	CHENG SIEW HUI
NRIC No	S8313009A
Date Of Birth	12/04/1983
Occupation	OUTDOOR
Date Of Driving Pass	15/11/2013
Driving Experience	4 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90469296
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 596B AMK ST 52 #18-329
Postcode	562596
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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?	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)	2
Passenger 1	NAME: : IRWIN CHIANG YU CHEN GENDER: : MALE

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

PLS REFER TO THE ATTACHED 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	SLU2458Y
Vehicle Make/Model/Colour	BMW
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	AUGUSTINE
NRIC/Passport Number	
Contact Number	94277771
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:

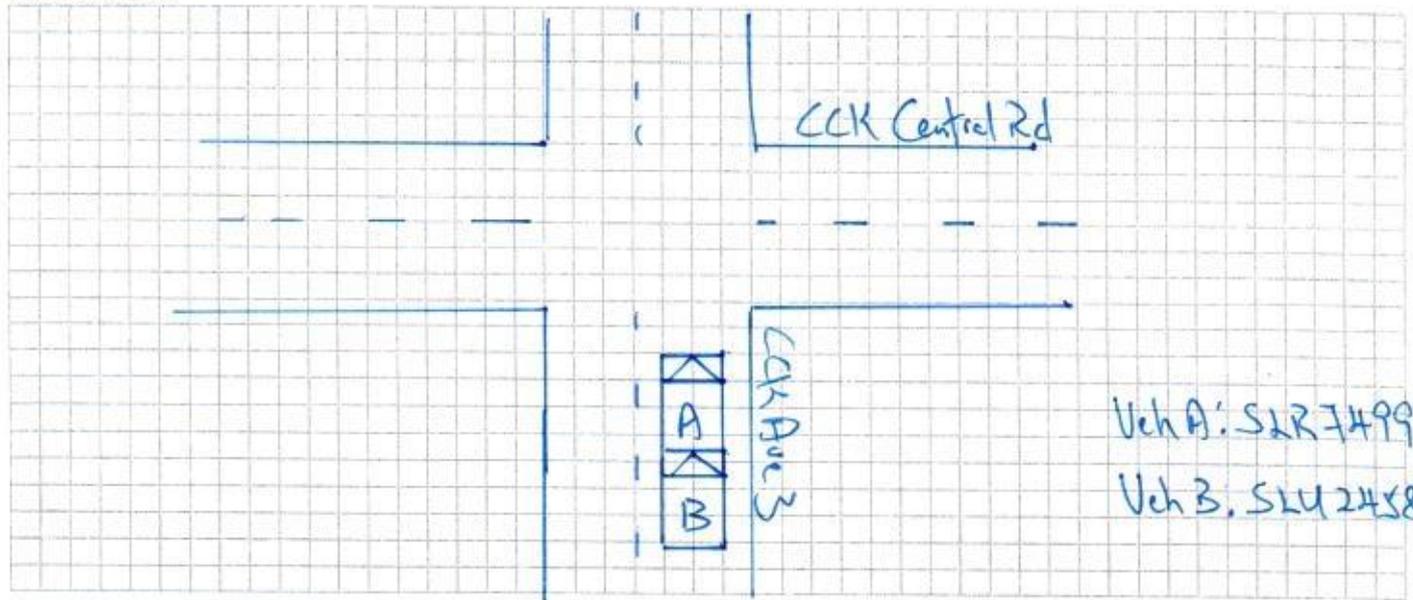


Driver's Signature
(If driver is not the policyholder)
Date & Time:

 31/08/18

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30/8/2018 @ about 1745hrs. I was travelling along Choa Chu Kang Ave 3. Just before the junction of CCK Central Rd, due to heavy traffic thus I slowed down my vehicle. Suddenly, I felt an strong impact from the rear of vehicle. I got out and realised veh B (SLU2458Y) had collided into my vehicle rear portion.

Passenger : Irwin Chiang Yu Chen, T15060823

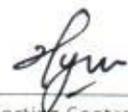
DECLARATION

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



Policyholder's Signature
Date & Time:


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

 31/08/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: 30/08/2018 (DD/MM/YYYY), TIME: 17:45 (HH:MM)

LOCATION: Choa Chu Kang Ave 3 Junction CCK Central Rd.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLR 7499L
- b) INSURANCE COMPANY: AIG
- c) POLICY NUMBER: 1700045281-01
- d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
- e) MAKE & MODEL: Mit Attrage
- f) TYPE: SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS
- g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
- h) PURPOSE OF USING AT ACCIDENT TIME: Going home
- i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
IF NO, PLEASE STATE THIRD PARTY CLAIM / REPORTING ONLY

2. INSURED / POLICY HOLDER

- a) NAME: VC Consultancy Pte Ltd *Email address:* _____ (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: 201434078D CONTACT: _____
- c) ADDRESS: 469 Choa Chu Kang Ave 3
#06-475 (680469)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

3. DRIVER

- a) NAME: Cheng Siew Hui *Email address:* _____ (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: 58313009A CONTACT: 90469296
- c) ADDRESS: 31K 5963 Ang Mo Kio St 52
#18-329
s(562596)

*d) DATE OF BIRTH: 12/04/1983 (DD/MM/YYYY)

- e) OCCUPATION: (INDOOR / OUTDOOR)
- f) YEARS OF DRIVING EXPERIENCE: 15 / 11/2013 *Car Camera (Yes/No)* NO

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) *No. of passenger incl driver* 02
Name Irwin Chiang *Gender* M

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLU2458Y MODEL: BMW
- b) DRIVER'S NAME: Augustine
- c) NRIC/FIN/PASSPORT: _____ CONTACT: 94277771

9. THIRD PARTY VEHICLE

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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8313009A



Name
CHENG SIEW HUI
陈秀慧

Race
CHINESE

Date of birth
12-04-1983

Country/Place of birth
SINGAPORE

Sex
F

W S8313009A




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8313009A
Name
CHENG SIEW HUI

Birth Date: 12 Apr 1983
Issue Date: 07 Mar 2016




5499425



NRIC No. S8313009A



Date of issue
01-07-2015

APT BLK 596B ANG MO KIO STREET 52 #18-329
SINGAPORE 562596

NRIC No. S8313009A Date: 09/01/2016

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

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	15 Nov 2013

NP 428A

Licence No: S8313009A





CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : VC CONSULTANCY PTE LTD
Period of Insurance : 28 Aug 2018 To 27 Aug 2019
Engine No. : 3A92UGB5987
Chassis No. : MMBSTA13AHH006355

Vehicle No. : SLR7499L
Policy No. : 1700045281-01
Endorsement No. :
Issued Date : 02 Aug 2018

ABOUT THE COVER

Make/Model : MITSUBISHI Attrage 1.2 CVT
Engine Capacity/Tonnage : 1193 Tonnage **Sum Insured** : Market Value **First Year of Registration** : 2017
Driver Restriction : NA **Off Peak Car** : No **Insuring with COE/PARF** : Yes

Person or Classes of Persons Entitled to Drive* :

Any person who is driving on the Policyholder's order or with their permission.
 This Policy will indemnify the Policyholder or any authorised 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" ("YIDR") if You are or Your Authorised 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 for the carriage of passengers or goods in connection with the Policyholder's business. Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired. This Policy does not cover

- 1) use for driving 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 anyone disabled using a mechanically propelled vehicle; and
- 3) use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired; c) use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
 Fire - \$0 Own Damage - \$2000 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$2000

Windscreen : \$100

Named Driver and Excess (where applicable)

ERIC CHENG SHUN LOONG (CHEN SHUNLONG) - \$2000 (Own Damage) \$2000 (Property Damage), CHENG SIEW HUI - \$2000 (Own Damage) \$2000 (Property Damage)

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

1. Cycle & Carriage Authorised Service Centre (For windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708800
2. Cycle & Carriage Authorised Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
3. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 608339 65684501

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

If the vehicle is hired for the carriage of passenger for hire or reward, such driver must be named under the Policy and registered with the service operator. Should you decide to include any other driver, please indicate. (Company reserves the right to accept/reject the inclusion of any Named Drivers).

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

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 IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500720785

CYCLE & CARRIAGE - BEVERW(MIT)
 239 ALEXANDRA ROAD
 SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

SSPUBO

1001386441/ACI