

NATIONAL Assessment Centre Services

Date In: 10/09/18	Job description	Date & Time Completed	Done by
Ref No: NA/A 1418016407/13	SAS e-filing		
Veh No: SJX6634L	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 08/09/18 0905	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: (SK)	Tel: ()	Fax: ()
TP Particulars:	Veh No: SLF3914B	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

NA1805730		Invoice Preparation Checklist		Amt (\$)	Amt (\$)
				1st Bill	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	10/09/2018 11:08
Date Of Accident	08/09/2018 09:05
Exact Location Of Accident	PIE TWDS CHANGI NEAR EUNOS EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX6634L
Insured/Policyholder	
Name Of Registered Owner	TAN KA KI
NRIC No	S2503111C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96875397
Alternative Phone No	OTHERS-96875397

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA
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	2100216338-08
Cover Note Number	

Driver

Name of Driver	TAN GUAN YIH(CHEN GUANYU)
NRIC No	S7970272B
Date Of Birth	16/07/1979
Occupation	INDOOR
Date Of Driving Pass	02/05/2007
Driving Experience	11 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96875397
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	3 FLORA DRIVE #06-16
Postcode	507010
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	RAINING
Road Surface	WET

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 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)	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

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	SLF2914B
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	TAN GUAN YIH(CHEN GUANYU)
------	---------------------------

Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SJX6634L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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

PIE TOWNS CHANGI
NEAR EUNOS EXIT



A SX 6634L

B SLE 2914B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING ALONG PIE TOWARDS CHANGI WHEN THE FRONT VEHICLE STOPPED 2 FOLLOW SUIT, WHEN SUDDENLY VEHICLE B COLLIDED INTO ME.

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 ACCIDENT STATEMENT

ACCIDENT DATE: 08 SEPT 2018		TIME: 0905 HRS		(hh:mm) 24 hrs Format
LOCATION PIE TWOJ CHANGI NEAR EUNUS EXIT.				
VEHICLE NUMBER SJX6634L.				
INSURED NAME TAN KA KI				
NRIC / FIN S2503111C		CONTACT:		
MAKE TOYOTA		MODEL COROLLA ALTIS 1.6		
Are you claiming under your own insurance policy for repair to your vehicle?				
() Yes, If No, Pls Select : (/) Third Party () Reporting Only				
INSURANCE COMPANY AIG.				
TYPE OF POLICY (/) COMPREHENSIVE () THIRD PARTY () TPFT				
POLICY NUMBER : 2100216338-08				
NAME DRIVER : TAN GUAN YIH (CHEN GUAN YU) () SAME AS INSURED				
NRIC / FIN S7970272B		CONTACT: 96875397		
DATE OF BIRTH: 16 JUL 1976				
DRIVING PASS DATE : 02 MAY 2007				
OCCUPATION : (/) INDOOR () OUTDOOR				
GENDER : (/) MALE () FEMALE				
EMAIL ADDRESS:				() NO EMAIL
ADDRESS OF DRIVER: 3 FLORA DRIVE #06-16 S(507010)				
Number Of Passenger Include Driver: 01 DRIVER				
Was driver an employee of the Insured's Company? () YES (/) NO				
If No, Relationship Of The Driver With The Insured				
() Owner () Spouse () Friend () Relative (/) Children () Sibling () Others				
Does The Driver Own Any Other Vehicle? : () YES () NO				
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:				
Insurance Company Of Driver's Own Vehicle				
Weather Conditions: () Clear (/) Raining () Drizzling () Others				
Road Surface : () Dry (/) Wet () Others				
Was Any Foreign Vehicle Involved In This Accident? () YES (/) NO				
Was Anybody Injured In The Accident? () YES (/) NO				
If YES, Injured details : NIL.				
Convey By Ambulance: () YES (/) NO				
Was There Any Video Capture By Car Camera? () YES (/) NO				
Was There Accident Reported To The Police? () YES (/) NO If Yes Attach Police Report				
Police Report Number (if any)				
Details Of 3rd Party		Name / NRIC		Contact
Veh B SLF 2914B		(EQ INS)		
Veh C				
Veh D				
Veh E				
Veh F				
Veh G				

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2503111C



Name

TAN KA KI



陈巧枝

Race

CHINESE

Date of Birth

23-12-1954

Sex

F

Country of Birth

JOHORE



0214868



NRIC No. S2503111C

Blood Group

A+

Date of issue

02-01-1992

Address

3 FLORA DRIVE #08-16
SINGAPORE 507010

NRIC No. S2503111C

Date: 03-11-2003 (R) No: 4786709

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7970272B**

Name: **TAN GUAN YIH (CHEN GUANYU)**

Birth Date: **16 Jul 1979**

Issue Date: **02 May 2006**

001416097F




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7970272B**

Name: **TAN GUAN YIH (CHEN GUANYU)**

陈冠誉

Race: **CHINESE**

Date of birth: **16-07-1979**

Country/Place of birth: **MALAYSIA**

Sex: **M**

S-7970272B





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

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg

PASS DATE: **02 May**

NP 428A

Licence No. S7970272B



5276894

NRIC No. **S7970272B**

Date of issue: **17-02-2014**

Address: **3 FLORA DRIVE #06-16 SINGAPORE 507010**






CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Tan Ka Ki
Period of Insurance : 30 Jun 2018 To 29 Jun 2019
Engine No. : 3ZZ4989631
Chassis No. : MR053ZEE106172093

Vehicle No. : SJX6634L
Policy No. : 2100216338-08
Endorsement No. :
Issued Date : 16 Jun 2018

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2010
Insuring with COE/PARF : No

Person or Classes of Persons Entitled to Drive* :

a) The Policyholder

b) Any other person who is driving on the Policyholder's order or with his/her 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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 30 years old and above

Limitation as to use* :

Use only for social, 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 - 1600cc Optional

* 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 - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Tan Ka Ki - \$600 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised 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 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

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE 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 IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0502881000

TAN THIAM POH JOSEPH
BLK 127 TAMPINES STREET 11 #06-442
SINGAPORE 521127

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Thiam Poh Joseph

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

THIAM POH JOSEPH

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	3111C
Vehicle Details	
Vehicle No.:	SJX6634L
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Sep 2018
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Silver
Manufacturing Year:	2010
Engine No.:	3ZZ4989631
Chassis No.:	MR053ZEE106172093
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$16,716.00
Original Registration Date:	30 Jun 2010
First Registration Date:	30 Jun 2010
Transfer Count:	0
Actual ARF Paid:	\$16,716.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Jun 2020
PARF Rebate Amount:	\$9,193.00
Intended COE Rebate Details	
COE Expiry Date:	29 Jun 2020
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$30,051.00
COE Rebate Amount:	\$5,250.00
Total Rebate Amount:	\$14,443.00

The information contained herein is correct as at 10 Sep 2018

OK