

**NATIONAL Assessment Centre Services** (wef 1 Jan 2005)

Date In: <b>18/09/08</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA/AIG18016963/13</b>	SAS e-filing		
Veh No: <b>SJX8546U</b>	E-mail (within 8hrs, AIC 2hrs)		
DOA: <b>17/09/08</b> <b>1330</b>	i-Motor Claim Form		
OD: <b>(IP)</b> Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: ( **MASSIVE** ) Tel: Fax: )

TP Particulars:	Veh No: <b>SBS8865U</b>	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. ( )

<b>Remarks:-</b> (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

<b>NA1805930</b>	<b>Invoice Preparation Checklist</b>		Amt (\$) 1st Bill	Amt (\$) Add Bill
<b>Claimant's Particulars :-</b>	1) AR : Accident Reporting (\$30);			
<b>Driver/Owner:</b>	2) DA : Damage Assessment (\$100);      INC (\$80)			
<b>Contact No:</b>	3) TF : Towing Fee      \$40/\$45			
<b>Damaged Portion:</b>	4) FT : Follow-Through Survey      \$120			
<b>QC Checked by (Engr-In-Charge):</b>	5) iT : Follow-Through Survey (Resurvey)      \$30			
<b>Auditors' Comments :-</b>	For claiming against INC Only (wef 10 Jan 2005)			
<b>Cat. 1:</b>	6) TR : Re-inspection      \$75			
<b>Cat. 2 / 3:</b>	7) NI : Idac DA + SMRT Survey      \$160			
	8) NTUC Additional Services:-			
	<b>OP:</b>			
	*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	18/09/2018 11:50
Date Of Accident	17/09/2018 13:30
Exact Location Of Accident	PIE TWDS CHANGI AIRPORT B4 CTE/SLE EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX8546U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHEW CHIN HUI(ZHOU ZHENGHUI)
NRIC No	S7802279E
Email Address	CKLEY79@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81854447
Alternative Phone No	OTHERS-81854447

### Vehicle Particulars

Manufacturer	KIA
Model	CERATO
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	1800012419
Cover Note Number	

### Driver

Name of Driver	JOVISON LIM CHOONG KIE(LIN JUNQI)
NRIC No	S7927218C
Date Of Birth	19/09/1979
Occupation	OUTDOOR
Date Of Driving Pass	08/04/2000
Driving Experience	18 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81854447
Fax Number	
Contact Number	
EEmail Address	CKLEY79@GMAIL.COM

Address	BLK 538 ANG MO KIO AVE 5 #04-4016
Postcode	560538
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - COUSIN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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 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?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SBS8865U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	NG LIP YOON
NRIC/Passport Number	G6735981Q
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	JOVISON LIM CHOONG KIE(LIN JUNQI)
------	-----------------------------------

Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SJX8546U
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## SKETCH PLAN

### IMPORTANT NOTICE

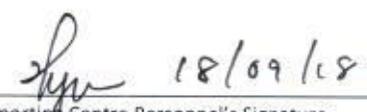
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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.

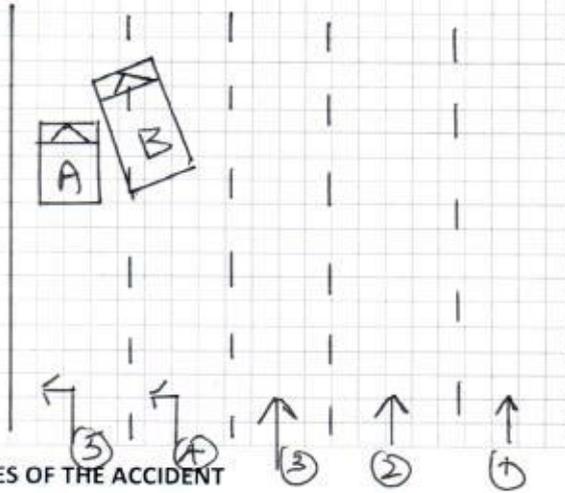
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN

PIE TOWDS CHANGI  
B4 CTE/SLE EXIT



Veh A: SJX8546U  
Veh B: SBS8865U

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17/9/2018 @ ard 1330hrs, I was travelling along PIE towards Changi Airport. I was travelling in the most left lane. Just before CTE/SLE exit, suddenly there was a SBS Bus swerve into my lane and collided into my vehicle right front side portion.

DECLARATION

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

Policyholder's Signature  
Date & Time:

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

*[Signature]* 18/09/18  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

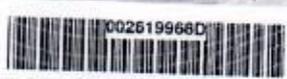
REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7927218C**

JOVISON LIM CHOONG KIE  
(LIN JUNQI)

Birth Date: 19 Sep 1979  
Issue Date: 15 Oct 2016

002619968D

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S7927218C**

Name: **JOVISON LIM CHOONG KIE  
(LIN JUNQI)**  
**林俊旗**

Race: **CHINESE**

Date of birth: **19-09-1979** Sex: **M**

Country of birth: **SINGAPORE**






**YOU ARE LICENCED 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	08 Apr 2000
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 or passengers and the unladen weight $\leq$ 7250kg	22 Aug 2003

Licence No: S7927218C



NP 428A

3673070

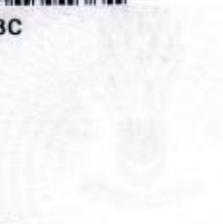


NRIC No. **S7927218C**



Date of issue: **08-02-2005**

Address:  
**APT BLK 538 ANG MO KIO AVENUE 5  
#04-4016  
SINGAPORE 560538**





# CERTIFICATE OF INSURANCE

## AUTOVALUE PRIVATE VEHICLE

**Name of Policyholder** : CHEW CHIN HUI (ZHOU ZHENGHUI)  
**Period of Insurance** : 02 Feb 2018 To 01 Feb 2019  
**Engine No.** : G4FCAH206074  
**Chassis No.** : KNAFW411MA5255178  
**Vehicle No.** : SJX8546U  
**Policy No.** : 1800012419  
**Endorsement No.** :  
**Issued Date** : 02 Feb 2018

### ABOUT THE COVER

**Make/Model** : KIA CERATO FORTE 1.6  
**Engine Capacity/Tonnage** : 1,591.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2010  
**Insuring with COE/PARF** : Yes

#### 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 "Young and/or Inexperienced Driver Excess" ("YIDER") 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 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.

\* 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 - \$600. Theft - \$0. Flood Cover - \$0

**Section 2**  
 Property Damage - \$0

Windscreen - \$100

#### Named Driver and Excess (where applicable)

CHEW CHIN HUI - \$600 (Own Damage)

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers.  
 For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6336 5200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://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: *Asia Carz Holding 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 IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysia).

0601295000

INSURE LINK PTE LTD  
 2 KALLANG AVE #06-16 CT HUB  
 SINGAPORE 339407

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.



Insure Link Pte Ltd  
 2 Kallang Avenue #06-16  
 CT Hub S(339407)  
 Fax: 6336 0040

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE