

NATIONAL Assessment Centre Services

[wef 1 Jan'05] **MA118125929**

Date In: 28/9/18-13:50	Job description	Date & Time Completed	Done by
Ref No: NA1181807679/24	SAS e-filing		
Veh No: JKAS8078K	E-mail (within 8hrs, AIC 2hrs)		
D.O.A : 22/9/18-14:55	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 <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: JKAS8078K	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

NA1806223	Invoice Preparation Checklist	Ant (\$) Int Bill	Ant (\$) 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:-		
QC Checked by (Engr-In-Charge):	QD*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments :-	TP (N11) : TP (Non INC) against INC \$20		
Dat. 1:	9) N12: Idac Mobile \$0		
Dat. 2 / 3:	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	28/09/2018 13:50
Date Of Accident	22/09/2018 11:55
Exact Location Of Accident	TPE (SLE) BEFORE JALAN KAYU EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGA8078K
Insured/Policyholder	
Name Of Registered Owner	DAWOOD BIN ABDUL KARIM
NRIC No	S0479463Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-85695148
Alternative Phone No	OFFICE-85695148

Vehicle Particulars

Manufacturer	VOLVO
Model	S80 T4 1.6 AT ABS D/AB 2WD 4DR TURBO
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	2100312178-06
Cover Note Number	

Driver

Name of Driver	FATIMA BEE BINTE ABDUL KADER
NRIC No	S1221457Z
Date Of Birth	14/04/1956
Occupation	INDOOR
Date Of Driving Pass	23/12/1988
Driving Experience	29 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94569394
Fax Number	
Contact Number	OFFICE-94569394
Email Address	NOEMAIL

Address	BLK 157 PASIR RIS STREET 13 #04-33
Postcode	510157
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	5
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)	2
Passenger 1	NAME: : DAWOOD BIN ABDUL KARIM GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SEBBAWANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 4 SEBBAWANG CRESCENT , POSTCODE: 757633 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5549999 - FAX NO: 68522499
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180922/2085.

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	SLQ4895B
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLZ638G
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 OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SMC5031H
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 OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SLU6933R
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)

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:

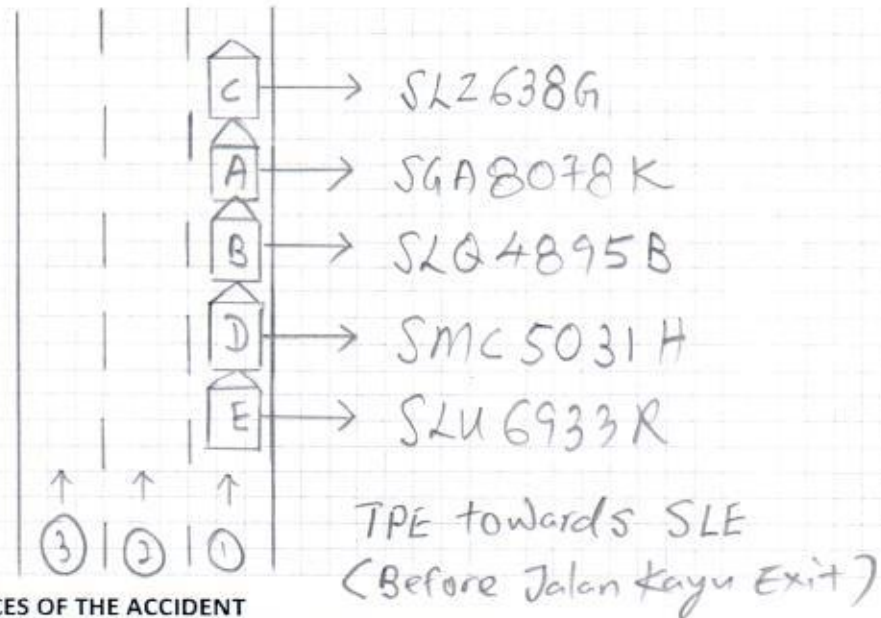


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

Report NO: T/20180922/2085

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:	22/09/18	Time:	11:55	(hh:mm) 24 hr format
Location	TPE towards SLE (Before Julian Kayu Exit)			
Vehicle Number	SGA8078K			
Insured Name	Dawood Bin Abdul Karim.			
NRIC / FIN	S04794632	Contact Number	85695148	
Make	Volvo	Model	S80	
Are you claiming under your own insurance policy for repair to your vehicle?				
() Yes If No, Pls select: (<input checked="" type="checkbox"/>) Third Party () Reporting				
Insurance Company	AIG			
Type of Policy (<input checked="" type="checkbox"/>) Comprehensive () Third Party Fire & Theft () TP Only				
Policy Number	2100312178 -06			
Name of Driver	Fatima Bee Binte Abdul Kader () Same as Insured			
NRIC / FIN	S12214572	Contact Number	94569394	
Date of Birth	14/04/1956			
Driving Pass Date	23/12/1988			
Occupation (<input checked="" type="checkbox"/>) Indoor () Outdoor				
Gender () Male (<input checked="" type="checkbox"/>) Female				
Email Address	Fatimakader@mr.com.		() NO EMAIL	
Address of Driver	BLK 157 Pasir Ris Street 13 #04-33 Singapore 510157.			
Was driver an employee of the Insured's Company? () Yes (<input checked="" type="checkbox"/>) No				
If No, Relationship of the Driver with the Insured				
() Owner (<input checked="" type="checkbox"/>) Spouse () Friend () Relative () Children () Sibling				
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 (<input checked="" type="checkbox"/>) Clear () Raining () Others				
Road Surface (<input checked="" type="checkbox"/>) Dry () Wet () Others				
Was any foreign vehicle involved in this accident? () Yes (<input checked="" type="checkbox"/>) No				
Was anybody injured in the accident? () Yes (<input checked="" type="checkbox"/>) No				
If yes, injured detail				
Was there any video captured by Car Camera? () Yes (<input checked="" type="checkbox"/>) No				
Was the Accident reported to the Police? (<input checked="" type="checkbox"/>) Yes () No If yes attach police report				
DETAILS OF 3 rd party	Name / Nric	Contact		
Veh B	SLQ4895B			
Veh C	SLZ638G			
Veh D	SMC5031H			
Veh E	SKU6933R			
Veh F				

Passenger = Dawood Bin Abdul Karim (M).



SINGAPORE POLICE FORCE



T/20180922/2085

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

1 of 3

Report No. T/20180922/2085

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/09/2018 14:16	Vide Report No.:	Station Diary No.: 94
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Informant's Particulars

Name of Informant: FATIMA BEE BINTE ABDUL KADER			Address: APT BLK 157 PASIR RIS STREET 13 #04-33 SINGAPORE 510157		
ID Type / ID No.: NRIC NO / S1221457Z			Contact No.: Home/Office: Mobile: 94569394		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 62	Date of Birth: 14/04/1956	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: SALES CONSULTANT			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 22/09/2018 11:55	Type of Location: Straight Road
Location: Along Road 1 TAMPINES EXPRESSWAY Towards SLE before Jalan Kayu Exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Chain Collision (5 vehicles)			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGA8078K	Car				Slightly Damaged	1
SLQ4895B	Car				Seriously Damaged	2
SLU6933R	Car				Seriously Damaged	0
SLZ638G	Car				Slightly Damaged	1
SMC5031H	Car				Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20180922/2085

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

2 of 3

Report No. T/20180922/2085

CONTINUATION OF REPORT

Brief Details.

On 22/09/2018 at about 1155hrs, while I was driving SGA8078K along TPE towards SLE before Jalan Kayu exit at the most extreme left lane, a vehicle SLZ638G driving in front of my vehicle had halted, as such I stepped on my brake. Subsequently, I felt an impact from the rear of my vehicle and it caused my vehicle to hit onto the rear of SLZ638G. I came out from my vehicle and discovered that the impact from the rear of my vehicle was caused from vehicle SLQ4895B which had collided to my vehicle. There was a 5 chain collision vehicle. Behind vehicle SLQ4895B, was vehicle SMC5031H and followed by SLU6933R. Driver of SLU6933R was conveyed by the ambulance.

Traffic Police was at the accident location and advised to me to lodge a Traffic Police report reference to report F/20180922/0151.



**SINGAPORE
POLICE FORCE**



T/20180922/2085

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

3 of 3

Report No. T/20180922/2085

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.

Signature Of Officer Recording The Report:

F /
Staff Sgt ISZAD BIN ISHAK

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
22/09/2018 14:16

Officer In Charge Of Case:
TP / GIT /
Insp MOHAMMED FADZLY BIN ABDUL AZIZ
Contact No.: 65476355

Classification Of Case:

Authentication Stamp
NP168



Signature:

SN 086

Singapore Police Force

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0479463Z



Name

DAWOOD BIN ABDUL KARIM

Race

JAVANESE

Date of birth

25-10-1948

Sex

M

S0479463Z

Country of birth

SINGAPORE

SGA8078K

owner.

4175537



NRIC No. S0479463Z



Date of issue

28-01-2008

APT BLK 157 PASIR RIS STREET 13 #04-33
SINGAPORE 610157

NRIC No: S0479463Z

Date: 28/09/2009

No: 6230645

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1221457Z



Name



FATIMA BEE BINTE ABDUL
KADER

Race

INDIAN

Date of Birth

14-04-1956

Sex

F

Country of Birth

SINGAPORE



SGA807BK

Driver

1070806



NRIC No. S1221457Z



Blood Group: Date of Issue

AB+

28-06-1993

APT BLK 157 PASIR RIS STREET 13 #04-33
SINGAPORE 510157

NRIC No: S1221457Z

Date: 28/09/2009

No: 6230646

REPUBLIC OF SINGAPORE DRIVING LICENCE

S1221457Z



KATMA BEE BINTE ABDUL
KADER

Birth Date: 14 Apr 1956
Issue Date: 23 Dec 2011

002030201A

SGA8078K

Driver.

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 23 Dec 1988

NP 428A





CERTIFICATE OF INSURANCE

WEARNES AUTO PROTECTOR (VOLVO) PRIVATE VEHICLE

Name of Policyholder : Dawood Bin Abdul Karim
Period of Insurance : 22 Aug 2018 To 21 Aug 2019
Engine No. : B4164T4121391
Chassis No. : YV1AS48HBD1165768

Vehicle No. : SGA8078K
Policy No. : 2100312178-06
Endorsement No. :
Issued Date : 13 Aug 2018

ABOUT THE COVER

Make/Model : VOLVO S80 T4

Engine Capacity/Tonnage : 1,596.00 CC

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2012

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" ("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 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 2000cc

* 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 - \$1400 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Dawood Bin Abdul Karim - \$1400 (Own Damage)

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

1, Wearn's Automotive Pte Ltd Add: 249 Alexandra Road Singapore 159935 64304890 63789350

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: MayBank

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).

0503485716

WEARNES AUTOMOTIVE - RL (V)

45 LENG KEE ROAD

SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSPNEA