

Date In	5/10/18 14:31	Job description	Date & Time Completed	Done by
Ref No	MNA 118129332	SAS e-filing		
Veh No	884 34385	E-mail (within 5hrs, APC 2hrs)		
DOA	5/10/18 10:10.	i-Motor Claim Form		
Off	TP / Repairing Only	i-Motor W/O (Within, OD 2hrs, TP 4hrs)		
TP Insurer		i-Photo Uploaded		
		Assessment/Survey Report		
		Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / HRC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Vch No. 560 98730. 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:	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

Claimant's Particulars :- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge): Auditors' Comments :- Sat. 1: Sat. 2 / 3:	Invoice Preparation Checklist		Amt (\$) Est Bill	Amt (\$) Add Bill
	1) AR : Accident Reporting (\$30);		3000	
	2) DA : Damage Assessment (\$100); INC (\$80)			
	3) TP : Towing Fee \$40/\$45			
	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 : Idan DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	OD:			
	*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: Idan 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 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. 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	05/10/2018 14:31
Date Of Accident	05/10/2018 10:10
Exact Location Of Accident	2 MACKENZIE RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV3438S
Insured/Policyholder	
Name Of Registered Owner	MARIC CAR RENTAL PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81183080

Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	999994658
Cover Note Number	-

Driver

Name of Driver	CHENG SZE FOONG
NRIC No	S0179757C
Date Of Birth	14/11/1952
Occupation	OUTDOOR
Date Of Driving Pass	04/09/1974
Driving Experience	44 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81183080
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 727 YISHUN ST 71 #12-87
Postcode	760727
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	COLLISION - MAJOR/MINOR RD
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?	
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

PLEASE REFER TO 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	SGU9873U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	S THANALETCHIMI D/O V S MANIAM
NRIC/Passport Number	S1849169I
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.
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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 Car Rental Pte Ltd
Co. Reg. No.: 201620648G
9 Tagore Lane #03-04
Singapore 787472

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.:

car park

DD →

A
B

V. A) SJV34383

V. B) SGU9873U.

V. A) 57434385
V. B) 564498734.

I was travelling straight in my lane and slowly turning left into the car park. Suddenly vehicle 'B' still came along and hit onto my vehicle right portion. Both of my vehicle right door were damage.

DECLARATION
I/We declare the foregoing particulars are true and correct.
Co. Reg. No.: 201620648G
9 Tagore Lane #03-04
Singapore 787472

宋子文

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



ACCIDENT STATEMENT

ACCIDENT DATE: (05 / 10 / 2018) (DD/MM/YYYY). TIME: (10 : 10) (HH:MM)

LOCATION: 2 Mackenzie Rd

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJV34388
b) INSURANCE COMPANY: AIG
c) POLICY NUMBER: 999994658
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: work purpose
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: Maric Car Rental Pte Ltd (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 2016206486 CONTACT: -
c) ADDRESS: 9 Tagore lane #03-04

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Cheng Sze Fong (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S0179757C CONTACT: 8118 3080
c) ADDRESS: 727 yushun Street 71
#12-87 S760727

*d) DATE OF BIRTH: (14 / 11 / 1952) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 44

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HIRER

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: SHU 98734 MODEL: Toyota
b) DRIVER'S NAME: S Thangatchimi D/O V S maniam
c) NRIC/FIN/PASSPORT: S18491691 CONTACT:

9. THIRD PARTY VEHICLE

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

Email = REPORTINS@
TOPQUE5.com
Fax = 6452 4584

51 UBI AVE 1

#01-25 Paya ubi Industrial Park

S408433

* No of passenger
(Including driver)
(01)

* No of passenger
(Including driver)
(02)

* No of passenger
(Including driver)
()

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0179757C



Name
CHENG SZE FOONG

Race
CHINESE

Date of birth
14-11-1952

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number
S0179757C

Name
CHENG SZE FOONG

Birth Date
14 Nov 1952

Issue Date
06 May 2003



4935702



NRIC No. S0179757C



Date of issue
13-02-2013

Address
APT BLK 727 YISHUN STREET 71
#12-87
SINGAPORE 760727

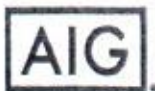
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	08 Jan 1983
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	04 Sep 1974

NP 428A

Licence No: S0179757C





HOTLINE TEL (65) 6419-3000
FAX (65) 6415-3723

CERTIFICATE OF INSURANCE



MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1966

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M 2 400

COMPREHENSIVE CERTIFICATE NO.		COMMERCIAL MOTOR	(The below excess is subject to GST)	
POLICY NO.		SJV3438S	POLICY EXCESS	S\$1000.00 (Sect I)
		999994658	WINDSCREEN EXCESS	S\$100.00
1) VEHICLE REGISTRATION NO.			SUM INSURED	Market Value
2) NAME OF INSURED			INSURING WITH COE/PARF	Yes
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT			SJV3438S	
4) DATE OF EXPIRY OF INSURANCE			MARIC CAR RENTAL PTE LTD	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*			25 April 2018	
			24 April 2019	
<p>Any person who is driving on the Insured's order or with their permission.</p> <p>S\$1,000.00 Section I Excess and S\$1,000.00 Section II Excess is applicable for driver who is above 22 years old and/or with minimum 2 years driving experience.</p> <p>S\$2,000.00 Section I Excess and S\$2,000.00 Section II Excess is applicable for drivers who is 21 years old with minimum 1 year driving experience.</p> <p>The policy does not cover drivers who are below 21 years old or less than 1 year driving experience.</p>				
<p>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.</p>				
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.				
<p>The Policy does not cover: 1) Use for 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 any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.</p>				
LOSS OF USE		Not Included		
HIRE PURCHASE COMPANY		TAI THONG LEE TRADING PTE LTD		
<p>*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</p>				

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 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Issued in Singapore 10 Apr 2018

AIG Asia Pacific Insurance Pte. Ltd.

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

Maric

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL