

NATIONAL Assessment Centre Services

[wef 1 Jan'05] **MA118137201**

Date In: 22/10/18 18:00	Job description	Date & Time Completed	Done by
Ref No: 4A/116/2019/190/24	SAS e-filing		
Veh No: 441C8327	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 21/10/18-18:00	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: (Tel: (Fax: (
TP Particulars:	Veh No: 4416380R	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

NA 1806769	Invoice Preparation Checklist		Am't (\$) In Bill	Am't (\$) 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)			
Ref 1:	6) TR: Re-inspection \$75			
Ref 2 / 3:	7) N1: Idac 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: 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 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 22/10/2018 18:00
 Date Of Accident 21/10/2018 18:00
 Exact Location Of Accident TELOK BLANGAH RD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGK8132J
Insured/Policyholder
 Name Of Registered Owner TAN LIAN AIK
 NRIC No S7109176G
 Email Address NOEMAIL
 Mobile Phone No (LOCAL) +65-97697411
 Alternative Phone No OFFICE-97697411

Vehicle Particulars

Manufacturer KIA
 Model FORTE K3 1.6A
 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 2100396563-03
 Cover Note Number

Driver

Name of Driver TAN LIAN AIK
 NRIC No S7109176G
 Date Of Birth 21/03/1971
 Occupation INDOOR
 Date Of Driving Pass 27/04/1990
 Driving Experience 28 YEARS AND 5 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-97697411
 Fax Number
 Contact Number OFFICE-97697411
 Email Address NOEMAIL

Address	BLK 517E JURONG WEST STREET 52 #14-591
Postcode	645517
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	3
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)	4
Passenger 1	NAME: : LOKE SOW KHENG GENDER: : FEMALE
Passenger 2	NAME: : TAN KAI JIE GENDER: : MALE
Passenger 3	NAME: : TAN KAI JUN 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

REFER TO 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	SLT6380R
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

SLP4969C

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

my van was stationary out of sudden i felt an impact from my van rear portion.

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.:



HS AUTOMOTIVE SERVICES

Blk 2 KAKI BUKIT AVE 2 @ KAKI BUKIT AUTOHUB #02-25 SINGAPORE 417921.

TEL: 6538 1368 FAX: 6538 1367 Email add: hsautomotives@yahoo.com

VEHICLE NO: SGK 8132J

MAKE/MODEL: KIA K3

DATE OF ACCIDENT

21/10/2018
DAY/MONTH/YEAR

TIME

18 HR

00 MIN

AM/PM (PM)

LOCATION OF ACCIDENT

760K BLANGHAT ROAD

EXACT PURPOSE USE DURING ACCIDENT

SPONGY HOUR

CAR OWNER

NAME OF CAR OWNER

TAN LIAN AIK

CONTACT NO

9769 7111

NRIC

S7109176G

CLAIM TYPE

☐ OD

☒ THIRD PARTY

☐ REPORTING ONLY

INSURANCE COMPANY

AIG

TYPE OF COVERAGE

☒ COMPREHENSIVE

☐ THIRD PARTY

☐ THIRD PARTY FIRE & THEFT

POLICY NO

ACCIDENT DRIVER

☐ AS ABOVE

☐ IF NOT- KINDLY FILL IN BELOW

NAME OF DRIVER

As Above.

NRIC

S7109176G

DATE OF BIRTH

21-03-1971

OCCUPATION

STAFF

DATE OF DRIVING PASS

27 APR 1990

GENDER

☒ MALE

☐ FEMALE

CONTACT NO

ADDRESS

BLK 57E JURONG WEST 8752 #14-591(8) 645517

DRIVER OWN ANY VEHIC

NO/ IF YES- REGISTRATION NO

RELATIONSHIP

EMPLOYEE/

IF NOT:

OWNER.

WEATHER CONDITION

☒ CLEAR

☐ RAINING

OTHER: _____

ROAD SURFACE

☒ DRY

☐ WET

OTHER: _____

ANY INJURIES

NO/ IF YES- NAME: _____

CONTACT NO

POLICE REPORT

NO/ IF YES- LOCATION: _____

VIDEO FOOTAGE

NO/ YES

3RD PARTY INFO

VEHICLE B NO

SLT6380R

NO OF PASSENGER/S

UNKNOWN

NAME

CONTACT NO

VEHICLE C NO

SLP4969C

NO OF PASSENGER/S

UNKNOWN.

VEHICLE D NO

NO OF PASSENGER/S

VEHICLE E NO

NO OF PASSENGER/S

VEHICLE F NO

NO OF PASSENGER/S

ANY WITNESS

WITNESS CONTACT NO

REPUBLIC OF SINGAPORE DRIVING LICENCE

S7109176G

Name
TAN LIAN AIK

Birth Date: 21 Mar 1971

Valid Date: 30 May 2009

0006272538




REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7109176G



Name
TAN LIAN AIK

陳 連 益

Race
CHINESE

Date of birth
21-03-1971

Sex
M

Country of birth
SINGAPORE




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

Class	Description	Pass Date
Class 2B	Motorcycles not exceeding 200 cc	10 Jan 1994
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	27 Apr 1990

Licence No: S7109176G

NP 426A



4366749



NRIC No. S7109176G



Date of issue
09-03-2009

APT BLK 517E JURONG WEST STREET 52 #14-591
SINGAPORE 645517

NRIC No: S7109176G Date: 04/06/2012 No: 7078660



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tan Lian Aik
Period of Insurance : 26 Dec 2017 To 25 Dec 2018
Engine No. : G4FGEH749330
Chassis No. : KNAFZ411MF5350667

Vehicle No. : SGK8132J
Policy No. : 2100396563-03
Endorsement No. :
Issued Date : 30 Nov 2017

ABOUT THE COVER

Make/Model : KIA FORTE K3 1.6 A SX
Engine Capacity/Tonnage : 1,591.00 CC
Driver Restriction : NA

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2014
Insuring with CCE/PAIF : Yes

Person or Classes of Persons Entitled to Drive*

as the Policyholder;
to any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder or any authorized driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$1,000 as "Unauthorized Driver Excess" (UDE) if you are at your Authorized Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 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 school, racing, jockey training, velocity and speed testing, the transport of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Limit of Use : 1300cc - 1600cc

*Limitations imposed hereunder by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 180) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be implied under these headings.

EXCESS

Section 1

Fire - \$0; Own Damage - \$500; Theft - \$0; Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Tan Lian Aik : \$500 (Own Damage)

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

- 1 Cycle & Carriage Body & Paint Centre Add: 208 Pagar Road Singapore 690201 6944561
- 2 Cycle & Carriage Customer Service Centre (For Windscreen claim only) Add: 261 Alexandra Road Singapore 159631 6427890
- 3 Cycle & Carriage Customer Service Centre (For windscreen claim only) Add: 205 (B) Rd 1 Singapore 436330 67451067

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour accident emergency hotline at 465 6336 5200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG 365 Mobile App. Simply search and download "AIG 365" 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 refers is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 180), Part of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1982 (Malaysia).

0500709010

CYCLE & CARRIAGE - KEENSGRA

239 ALEXANDRA ROAD

SINGAPORE 159630 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. Anil

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

75 Shenton Way #01-19 AIG Building 0571129 / 7-45 6415 2000 / F+65 6415 3721 (weekend and public holidays)

AIG Asia Pacific Insurance Pte. Ltd.

2100396563-03