

NATIONAL Assessment Centre Services. [wef 1 Jan 2005]

Date In: 08/11/18	Job description	Date & Time Completed	Done by
Ref No: NA/A1618000001/13	SAS e-filing		
Veh No: GXC64904	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 07/11/18 1945	I-Motor Claim Form		
OD / TP: Reporting 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 / INC Assign Wksp / QW: (Tel: (Fax: (
TP Particulars:	Veh No: 5LM8043M	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

NA1807409	Invoice Preparation Checklist	Am (\$)	Am (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30);	Inc Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: 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)		
	6) TR: Re-inspection \$75		
	7) N1: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QD*		
	*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 (N-in INC) against INC \$20		
	9) N12: Idao 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	08/11/2018 12:21
Date Of Accident	07/11/2018 19:45
Exact Location Of Accident	NO 98 THE TERRACE CONDOMINIUM BASEMENT CARPARK 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX6490U
Insured/Policyholder	
Name Of Registered Owner	KST AUTO RENTAL PTE LTD
Co Reg No	-
Email Address	KSTTEAM@SINGNET.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67415808

Vehicle Particulars

Manufacturer	NISSAN
Model	URVAN
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994609/100865096-00022
Cover Note Number	

Driver

Name of Driver	ISMADI BIN ALI
NRIC No	S1691634Z
Date Of Birth	29/04/1965
Occupation	OUTDOOR
Date Of Driving Pass	19/01/1998
Driving Experience	20 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90075781
Fax Number	
Contact Number	
Email Address	ISMADIALI65@GMAIL.COM

Address	BLK 366 WOODLANDS AVE 5 #04-500
Postcode	730366
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER(COMPANY)
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	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

I WANTED TO PARK MY VEH AT NO 98 THE TERRACE CONDOMINIUM BASEMENT CARPARK 2 TO DO DELIVERY. I REVERSED MY VEH TO PARK AT THE CARPARK LOT, WHILE REVERSING MY VEH GRAZED ONTO VEH(B) BEARING REG NO SLM8043U THAT CAME DOWN FROM THE SLOPE AND AT THE MIDDLE OF THE LANE.

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	SLM8043U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SHARIMALA RASANAYAGAM
NRIC/Passport Number	S7347915J
Contact Number	93851827
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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

NIO 98 THE TERRACE
CONDOMINIUM BASEMENT
CARPARK 2

A-GX6490U
B-SLM8043M



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the statement.

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] 08/10/18

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

REPUBLIC OF SINGAPORE DRIVING LICENCE

ISMADI BIN ALI

Date of Birth: 29 Apr 1965
Issue Date: 03 Jan 2003

000086270A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1691634Z

ISMADI BIN ALI

Race: MALAY
Date of birth: 29-04-1965
Country/Place of birth: SINGAPORE

Sex: M

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CATEGORIES

Class	Description	Valid Until
Class 3	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	19 Jan 1998
Class 4A	Omni-buses	27 Jul 2005
Class 4	Heavy motor cars and motor tractors > 2500 kg	18 Oct 2010

S1691634Z

S/No. 8000131116

Licence No. S1691634Z

5405977

NRIC No. S1691634Z

Date of issue: 02-01-2015

Address: APT BLK 366 WOODLANDS AVENUE 5
#04-500
SINGAPORE 730366



HOTLINE TEL: (65) 6416-3000
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, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.301

THIRD PARTY COMMERCIAL MOTOR	
CERTIFICATE NO. 999994609/100865096-00022	OWN DAMAGE EXCESS S\$1,500.00 (II) WINDSCREEN EXCES N/A <small>(for policies with effect from 1st November 2002)</small> SUM INSURED S\$1.00 INSURING WITH COE/PARF YES
1) VEHICLE REGISTRATION NO.	GX6490U
2) NAME OF INSURED	KST Auto Rental Pte Ltd
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	2 Aug 2018
4) DATE OF EXPIRY OF INSURANCE	11 May 2019
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *	
Any person who is driving on the Insured's order or with their permission.	
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.	
6) LIMITATION AS TO USE *	
Use for the carriage of passengers or goods in connection with the Insured's business.	
Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.	
The Policy does not cover:	
1) Use for 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 the carriage of passengers for hire or reward by any person to whom the vehicle is hired.	
LOSS OF USE NOT INCLUDED	
* NAMED DRIVER N/A	
HIRE PURCHASE COMPANY NA	
* 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.	

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 24 Aug 2018

AIG ASIA PACIFIC INSURANCE PTE. LTD

155005-000

KOH TONG POH

AIG BUILDING 78 SHENTON WAY #07-16 SINGAPORE 079120 SP-LLL


Authorised Representative

ORIGINAL

SSCOSK

Transaction ref 20120306171139627779

The owner and vehicle particulars for Vehicle No. GX6490U as at 06 Mar 2012 are as follows:

1.	Name	: KST AUTO RENTAL PTE LTD
2.	Identification No. Type	: Company
3.	Identification No.	: 200806860W
4.	Place Of Passport Issue	: -
5.	Vehicle No.	: GX6490U
6.	Previous Vehicle No.	: -
7.	Effective Date of Ownership	: 06 Mar 2012
8.	Original Registration Date	: 02 Aug 2004
9.	First Registration Date	: 02 Aug 2004
10.	Vehicle Type	: A50 - Goods (Closed) Van/Van Panel (Delivery)
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: No Attachment
13.	Attachment 2	: -
14.	Attachment 3	: -
15.	Vehicle Make	: NISSAN
16.	Vehicle Model	: URVAN
17.	Year of Manufacture	: 2004
18.	Primary Colour	: Silver
19.	Secondary Colour	: -
20.	Passenger Capacity	: 1
21.	Chassis/Trailer Chassis No.	: JN1MG4E25Z0711469 / -
22.	Propellant	: Diesel
23.	Engine No./Motor No.	: ZD30041255 / -
24.	Engine Capacity(cc)/Power Rating(kw)	: 2953 / -
25.	Unladen Weight(kg)	: 1500
26.	Maximum Laden Weight(kg)	: 3100
27.	Open Market Value	: \$22,666.00
28.	PARF Eligibility	: No
29.	PARF Eligibility Expiry Date	: -
30.	Minimum PARF Benefit	: \$0.00
31.	No. of Transfers	: 1
32.	IU Label No.	: 1041937898
33.	COE No.	: 2004080105000274H
34.	COE Expiry Date	: 01 Aug 2014
35.	COE Category	: C - Goods Vehicle & Bus
36.	Quota Premium/Prevailing Quota Premium	: \$8,626.00 / -
37.	Actual Quota Premium/PQP Paid	: \$8,626.00
38.	Actual ARF Paid	: \$1,134.00
39.	Vehicle Lifespan Expiry Date	: 01 Aug 2024
40.	Road Tax Amount	: -
41.	Road Tax Start Date	: -
42.	Road Tax End Date	: -
43.	Remarks	: To renew the COE, the Prevailing Quota Premium payable is that of Category C.