

Date In: <b>10/11/2008 11:50</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NBA/MG/18020380/Y</b>	SAS e-filing		
Veh No: <b>SME 2955B</b>	E-mail (w/in 8hrs, AIC 2hrs)		
DOA: <b>08/11/2008 20:20</b>	I-Motor Claim Form		
OD: <b>TP</b> Reporting Only	I-Motor W/O (W/in: 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: Vch No: **GBF 267C** 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

<b>NA1807285</b> Claimant's Particulars: Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge): Auditors' Comments: Sat. 1: 2/3:	Invoice Preparation Charge		
	1) AR: Accident Reporting (\$30)		
	2) DA: Damage Assessment (\$100); INC (\$80)		
	3) TP: Towing Fee \$40/345		
	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) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	* N5: Courtesy Car / Tpl 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: Idao Mobile \$0		
	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	10/11/2018 11:50
Date Of Accident	08/11/2018 20:20
Exact Location Of Accident	X-JUNCTION OF WOODLANDS AVE 12/WOODLANDS LANE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME2955B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KHOR LEE LING
NRIC No	S7180806H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98218998
Alternative Phone No	OTHERS-98218998

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA-1.6 AD GLS (A)
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	1800109804
Cover Note Number	

### Driver

Name of Driver	LEONG YEE MING
NRIC No	S7279329C
Date Of Birth	22/05/1972
Occupation	INDOOR
Date Of Driving Pass	03/02/2006
Driving Experience	12 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98218998
Fax Number	
Contact Number	OTHERS-98218998
Email Address	NOEMAIL

Address	BLK 304 CANBERRA ROAD #15-49
Postcode	750304
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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?	YES
If Yes, Please state which Police Station	
Police Station Name	SEMBAWANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 4 SEMBAWANG CRESCENT , <b>POSTCODE:</b> 757633 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-5549999 - <b>FAX NO:</b> 68522499
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181109/2027

#### 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	GBF2617C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	LEONG YEE MING
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SME2955B
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:

  
10/4/2018

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

SKETCH PLAN

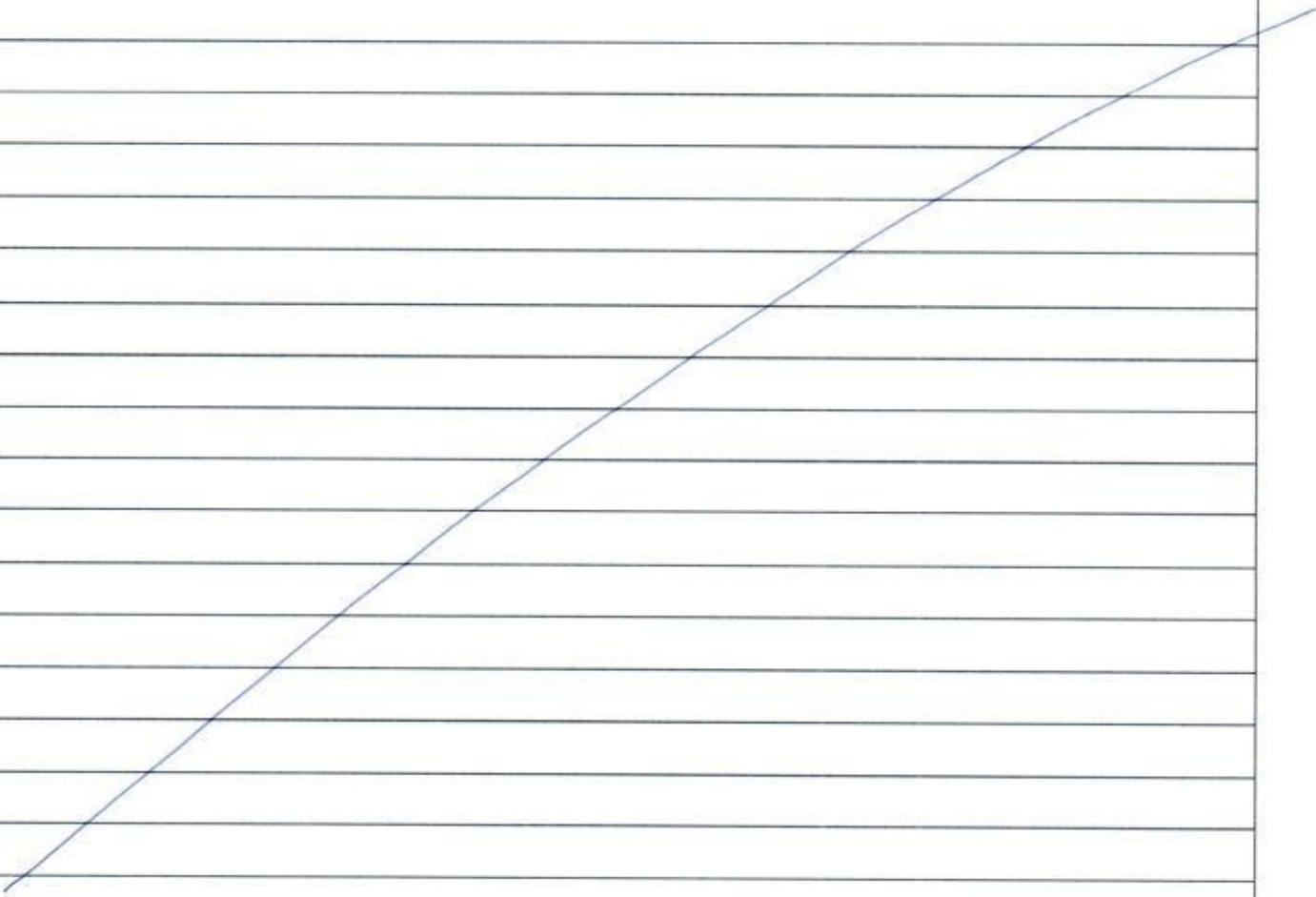
(A) SME 2955B  
(B) SBF 2617C



X-JUNCTION OF WOODLANDS AVENUE 12/  
WOODLAND LANE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No: P/2018/109/2027

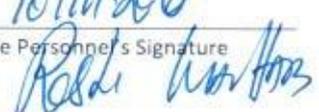


DECLARATION

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:

 10/10/2018  
Reporting Centre Personnel's Signature  
Name:   
NRIC/FIN No.:





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

CONTINUATION OF REPORT

Driver			
Name	LEONG YEE MING	ID No.	S7279329C
Related Vehicle	SME2955B (Car)	Contact No.	98218998
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 08/09/2018 at about 2020hrs I was travelling along Woodlands Ave 12 towards Gambas Avenue on the most right lane. Subsequently junction of Woodlands Ave 12 and Woodlands Lane, the traffic turn amber as such I apply my brakes and came to a complete stop. After I had stopped I felt a collision from the rear and cause my vehicle to slide forward. The backlash that I received cause me to have released my brakes causing my vehicle to move forward even more. I then came out of my vehicle after realizing that I was involve in an accident and saw that there was a van GBF2617C was behind my vehicle and had hit my vehicle. I also saw a motorcyclist lying down on the floor next to the van. We immediately check if any one was injured and subsequently proceed to take photos. The traffic police then came shortly after.



**SINGAPORE  
POLICE FORCE**



T/20181109/2027

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

3 of 3

Report No. T/20181109/2027

**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 / Sgt 3 ERIC TAN BING XIANG 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 09/11/2018 10:13
Officer In Charge Of Case: TP / GIT / Insp TAN CHIN YONG Contact No.: 65476178	Classification Of Case:  SN 085

Authentication Stamp  
NP168

 Signature:   
Singapore Police Force

# SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 09.11.2018		TIME: 20:20hrs. (hh:mm) 24 hrs Format	
LOCATION: X-Junction of Woodlands Ave 12 & Woodlands Lane			
VEHICLE NUMBER: SME 2955B			
INSURED NAME: Khor Lee Ling			
NRIC / FIN: S7190806H		CONTACT:	
MAKE: Hyundai Elantra		MODEL: 1.6 AD GLS (H)	
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 Only			
INSURANCE COMPANY:			
TYPE OF POLICY ( ) COMPREHENSIVE ( ) THIRD PARTY ( ) TPFT			
POLICY NUMBER: 1800109804			
NAME DRIVER: Leong Yee Ming		( ) SAME AS INSURED	
NRIC / FIN: S727929C		CONTACT: 98218998	
DATE OF BIRTH: 22.05.1972			
DRIVING PASS DATE: 05.02.2006			
OCCUPATION: ( <input checked="" type="checkbox"/> ) INDOOR ( ) OUTDOOR			
GENDER: ( ) MALE ( ) FEMALE			
EMAIL ADDRESS: ( ) NO EMAIL			
ADDRESS OF DRIVER: 304 Canberra Rd #15-49 S(750304)			
Number Of Passenger Include Driver: driver only			
Was driver an employee of the Insured's Company? ( ) YES ( <input checked="" type="checkbox"/> ) NO			
<b>If No, Relationship Of The Driver With The Insured</b>			
( ) Owner ( <input checked="" type="checkbox"/> ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling ( ) Others			
Does The Driver Own Any Other Vehicle? : ( ) YES ( <input checked="" type="checkbox"/> ) NO			
If Yes, Vehicle Registration Number Of Driver's Own Vehicle: <del>                    </del>			
Insurance Company Of Driver's Own Vehicle: <del>                    </del>			
Weather Conditions: ( <input checked="" type="checkbox"/> ) Clear ( ) Raining ( ) Drizzling ( ) 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? ( <input checked="" type="checkbox"/> ) YES ( ) NO			
If YES, Injured details :			
Convey By Ambulance: ( ) YES ( <input checked="" type="checkbox"/> ) NO			
Was There Any Video Capture By Car Camera? ( ) YES ( <input checked="" type="checkbox"/> ) NO			
Was There Accident Reported To The Police? ( <input checked="" type="checkbox"/> ) YES ( ) NO If Yes Attach Police Report			
Police Report Number (if any)			
Details Of 3rd Party		Name / NRIC	No.of Paxs (incl'driver) Contact
Veh B	68F 2617C	NWC	( ) / Not Sure ( )
Veh C			( ) / Not Sure ( )
Veh D			( ) / Not Sure ( )
Veh E			( ) / Not Sure ( )
Veh F			( ) / Not Sure ( )
Veh G			( ) / Not Sure ( )

REPUBLIC OF SINGAPORE  
 IDENTITY CARD NO. S7279329C



Name  
**LEONG YEE MING**  
 梁 毅 敏



Race  
**CHINESE**

Date of Birth      Sex  
 22-05-1972      M

Country of Birth  
**MALAYSIA**

8311887



IC No. S7279329C



Nationality  
**MALAYSIAN**

Blood Group      Date of Issue  
 O+      25-05-1999

APT BLK 304 CANGERRA ROAD #15-49  
 SINGAPORE 750304      Date: 23-06-2005      No: 5132848  
 NRIC No: S7279329C

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S7279329C**

Name:

**LEONG YEE MING**

Birth Date: **22 May 1972**

Issue Date: **03 Feb 2006**

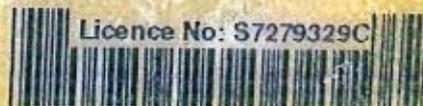


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

**Class 3** Motor Cars  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of the driver; and other motor vehicles  $\leq$  2500kg

PASS DATE

03 Feb 2006



NP 428A

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7180806H



Name

KHOR LEE LING

许 莉 玲

Race

CHINESE

Date of birth

20-01-1971

Sex

F

Country of birth

MALAYSIA



4280733



NRIC No. S7180806H

Date of issue

17-09-2008

Address

APT BLK 304 CANBERRA ROAD  
#15-49  
SINGAPORE 750304



# CERTIFICATE OF INSURANCE

## HYUNDAI AUTO PROTECTOR (DELUXE) PRIVATE VEHICLE

Name of Policyholder : Khor Lee Ling  
 Period of Insurance : 26 Sep 2018 To 25 Sep 2019  
 Engine No. : G4FGJU254506  
 Chassis No. : KMHD841CMJU745654

Vehicle No. : SME2955B  
 Policy No. : 1800109804  
 Endorsement No. :  
 Issued Date : 26 Sep 2018

### ABOUT THE COVER

Make/Model : HYUNDAI ELANTRA S  
 Engine Capacity/Tonnage : 1,591.00 CC  
 Driver Restriction : NA  
 Person or Classes of Persons Entitled to Drive\* :  
 Sum Insured : Market Value  
 Cff Peak Car : No  
 First Year of Registration : 2018  
 Insuring with COE/PARF : Yes

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 1500cc - 1600cc

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 169) 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 - \$200 Theft - \$0 Flood Cover - \$0

Section 2  
 Property Damage - \$0

Windscreen : \$0

Named Driver and Excess (where applicable)

Khor Lee Ling - \$200 (Own Damage), Leong Yee Ming - \$200 (Own Damage)

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

1. Komoco Motors Pte Ltd Add: 253 Alexandra Road Singapore 159936 64735588

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](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: NA

I/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. 169), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500581590

KOMOCO TRADING PTE LTD - GYN  
 253 ALEXANDRA ROAD,  
 SINGAPORE 159936

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Manik*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

88P8LD

> **Back to OneMotoring**

**Enquire PARF/COE Rebate for Registered Vehicle**

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	0806H
<b>Vehicle Details</b>	
Vehicle No.:	SME2955B
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Nov 2018
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA AD 1.6 GLS AT (AMS)
Primary Colour:	Red
Manufacturing Year:	2018
Engine No.:	G4FGJU254506
Chassis No.:	KMHD841CMJU745654
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	\$12,535.00
Original Registration Date:	26 Sep 2018
First Registration Date:	26 Sep 2018
Transfer Count:	0
Actual ARF Paid:	\$12,535.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Sep 2028
PARF Rebate Amount:	\$9,401.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	25 Sep 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$30,209.00
COE Rebate Amount:	\$29,663.00
<b>Total Rebate Amount:</b>	<b>\$39,064.00</b>

The information contained herein is correct as at 09 Nov 2018

OK