

MNA41814784

Preferred Wksp / INC Assign Wksp / QW: (

Tot:

Fax:

General Remarks: _____
 () Walk-In Customer : Customer's Information strictly Confidential & Strictly NO refer of repeller.
 () Total Loss Case : to e-mail Insurer URGENTLY.
 Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks	Date	Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()			
2) QC Check / Post Repair Inspection ()			
3) Upload Resurvey Photo [Repair Cost > \$3000] ()			

Injury :

[illegible]

NA1807477

NA807477	Invoice Preparation Checklist	27 Jan 2009	27 Jan 2009
Claimant's Particulars:	1) AR: Accident Reporting (\$30)		
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		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2009)		
	6) TR: Re-inspection \$75		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OR:		
	*NS: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (NI): TP (N-1) INC against INC \$20		
	9) NI: Idao Mobile \$0		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	
Auditors' Comments:			
Ref: 1:			
2/3:			

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	15/11/2018 10:06
Date Of Accident	13/11/2018 19:10
Exact Location Of Accident	X- JUNCTION CHOA CHU KANG NORTH 6/CHOA CHU KANG DR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV5560H
Insured/Policyholder	
Name Of Registered Owner	ASSET LIMO
Co Reg No	53309913K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82235504
Alternative Phone No	OFFICE-82235504

Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	THIRD PARTY
Fleet Policy	NO
Policy Number	999994656
Cover Note Number	

Driver

Name of Driver	SAPARUDIN B SAHIR
NRIC No	S2007736J
Date Of Birth	21/11/1951
Occupation	OUTDOOR
Date Of Driving Pass	22/09/1976
Driving Experience	42 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-82235504
Fax Number	
Contact Number	OTHERS-82235504
EMail Address	NOEMAIL

Address	BLK 511 JURONG WEST STREET 52 #16-84
Postcode	640511
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	COLLIDED INTO PEDESTRIAN
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?	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)	2
Passenger 1	NAME: : PASSENGER GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181114/7008

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	
Vehicle Make/Model/Colour	
Details Of Properties	PEDESTRIAN
Vehicle Category	NA/UNKNOWN
Name of Driver	WONG
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

WONG

Approximate Age

Injuries Sustain

SERIOUS INJURY

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by
ambulance?

YES

Address

Postcode

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.

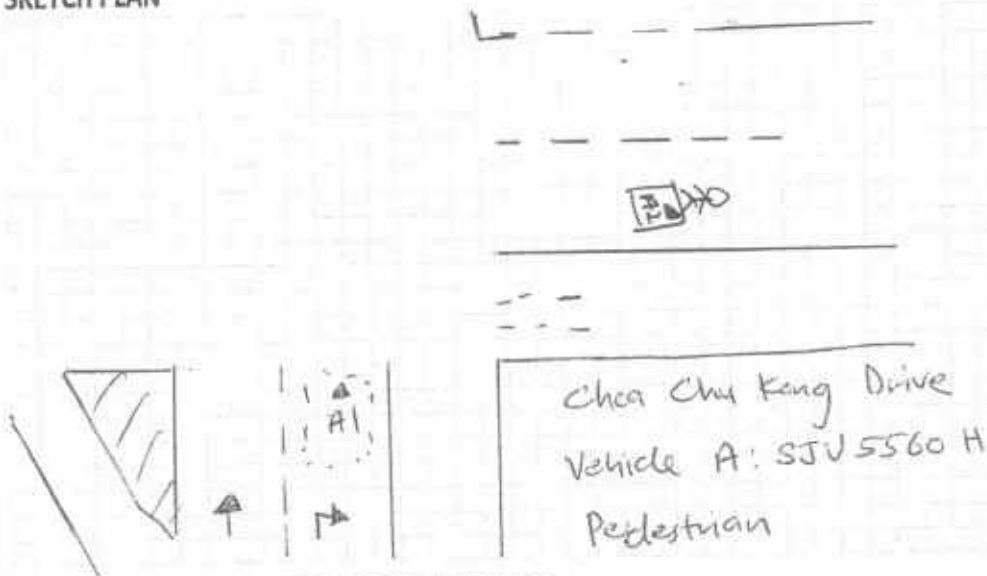


Policyholder's Signature
Date & Time:


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


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report T/2018/114/7008

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: 15/11/2018
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20181114/7008

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20181114/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/11/2018 13:21	Vide Report No.: J/20181113/0173	Station Diary No.:
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Informant's Particulars

Name of Informant: SAPARUDIN B SAHIR			Address: APT BLK 511 JURONG WEST STREET 52 #16-84 SINGAPORE 640511		
ID Type / ID No.: NRIC NO / S2007736J			Contact No.: Home/Office: Mobile: 82235504		
Nationality: SINGAPORE CITIZEN			Email: saparudin1951@gmail.com		
Sex: Male	Age: 66	Date of Birth: 21/11/1951	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: Private security officer			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

General information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/11/2018 19:10	Type of Location: X-Junction
Location: CHOA CHU KANG DRIVE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Pedestrian				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJV5560H	Car	KIA	Cerato+Fort e			2

Details of Person Involved

Any Pedestrian Involved: Yes	
No. of Pedestrians Injured: 1	Use of Pedestrian Crossing: Not Used



**SINGAPORE
POLICE FORCE**



T/20181114/7008

2 of 3

Report No. T/20181114/7008

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Driver			
Name	SAPARUDIN B SAHIR		ID No. S2007736J
Related Vehicle	SJV5560H (Car)		Contact No. 82235504
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Pedestrian			
Name	Wong		ID No. NIL
Related Vehicle	NIL		Contact No. NIL
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	13/11/2018	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Serious

Brief Details.

On the stated date & time, i turned right. Suddenly a pedestrian dashed out of the road, i braked hard but still hit onto the pedestrian slightly.

Would like to state that green arrow is in my favor when i turn. Pedestrian cross the road abruptly.



**SINGAPORE
POLICE FORCE**



T/20181114/7008

3 of 3

Report No. T/20181114/7008

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
SUFIYAN BIN KHAIRI
Contact No.: 65476390

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
14/11/2018 13:21

Classification Of Case:

Email: sm@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 13/11/2018 (dd/mm/yy) Time of Accident: 19:11 (24-HR-FORMAT)
Vehicle No.: SJV 5560 H Vehicle Make & Model: Kia Cerato Forte
Exact location of Accident: Choa Chu Kang North 6 x Choa Chu Kang Drive
Policyholder's Name / IC No.: Asset Limo 53309913K
Driver's Name / IC No.: Saparudin B Sahir S2007736J (As Above) ☐
Driver's Contact No.: 8223 5504 Company Contact No.: _____
Driver's Address: 18 Sin Ming Lane #06-31 Midview City Singapore 573960
Insurance Company: AIG Email address (if any): _____

Relationship between Owner & Driver: Hirer or Others specify: _____

What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☐ Other Vehicle (The one you want to claim against) / ☒ Reporting (For Record Purpose)

**Exact purpose for which the vehicle
Was being used at time of accident?**

Occupation (nature of job) ☐ Indoor/ ☒ Outdoor

☐ Private use / ☒ Work purpose

No. of Passengers (Including Driver): 02

Passenger Name : Grab Passenger

Gender : Female

Passenger Name : _____

Gender : _____

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☒ Yes / ☐ No (If YES) Injured Person's Name: Wong

Injuries Sustain: _____ Injured Person in Which Vehicle: Pedestrian

Police Report filed: ☒ Yes / ☐ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No: _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company (If any): _____

2. Driver's Name / IC No: _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence No. S2007736J

Name: SAPARUDIN B SAHIR

Date of Birth: 21 Nov 1951

Issue Date: 17 May 2016



REPUBLIC OF SINGAPORE IDENTITY CARD NO. S2007736J



Name

SAPARUDIN B SAHIR

ملقود بن ساحير

Race

MALAY

Date of birth

21-11-1951

Country/Place of birth

MALAYSIA

Sex

M

S2007736J

Land Transport Authority



VOCATIONAL LICENCE

Licence No. S2007736J

Name: SAPARUDIN B SAHIR

Please visit www.lta.gov.sg to check the status of this vocational licence

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

EFFECTIVE DATE

Class 2B	Motorcycles <= 200 cc	06 Feb 1973
Class 2A	Motorcycles between 201 cc and 400 cc	06 Feb 1973
Class 2	Motorcycles > 400 cc	06 Feb 1973
Class 3	Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	22 Sep 1978



Licence No. S2007736J

NP 428A

5881828



NRIC No. S2007736J



Date of issue

01-03-2018

Address

APT BLK 511 JURONG WEST STREET 52
#16-84
SINGAPORE 640511

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	07/06/2018





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, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1989 (MALAYSIA)

M.Z.400

THIRD PARTY		COMMERCIAL MOTOR		(The below excess is subject to GST)	
CERTIFICATE NO.	SJV5560H	POLICY EXCESS		S\$1500.00 (Sect II)	
POLICY NO.	999994856	WINDSCREEN EXCESS		NA	
		SUM INSURED		NA	
		INSURING WITH COE/PARF		NA	
		SJV5560H			
		ASSET LIMO			
1) VEHICLE REGISTRATION NO.					
2) NAME OF INSURED					
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT					
4) DATE OF EXPIRY OF INSURANCE				02 May 2018	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*				09 March 2019	
<small>Any person who is driving on the insured's order or with their permission. S\$1,500.00 Section II Excess is applicable for driver who is above 22 years old and/or with minimum 2 years driving experience. The policy does not cover drivers who are below 22 years old with less than 2 year driving experience. Intended usage is for limousine/ rental purposes.</small>					
<small>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.</small>					
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.					
<small>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.</small>					
LOSS OF USE		Not Included			
HIRE PURCHASE COMPANY		NA			
<small>*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.</small>					

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 26 Apr 2018

AIG Asia Pacific Insurance Pte. Ltd.

503052-000
HUND
55 Lorong L Telok Kurau
#02-59 Bright Centre
Singapore 425500


AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL