

# NTUC Assessment Centre Services

Date In: 19/11/2018 14:05	Job description	Date & Time Completed	Done by
Ref No: NA/AIG18020871/K4	SAS e-filing		
SLQ 3850L	E-mail (within 8hrs, AIC 2hrs)		
19/11/2018 10:05	i-Motor Claim Form		
TP: Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Referred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

Particulars:

Veh No: SMC 6038H 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:-

1 Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

2 Total Loss Case: to e-mail Insurer URGENTLY.

3 Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Remarks: (INC hotline: 6788 6616)

Date & Time Completed

Done by

4 Apply for Transport Allowance ( ) / Courtesy Car ( )

5 QC Check / Post Repair Inspection ( )

6 Upload Resurvey Photo [Repair Cost > \$3000] ( )

Injury:

Off Time

Actions

NA1807547

Insured's Particulars:-

Owner:

Veh No:

Insured Portion:

Checked by (Engr-In-Charge):

Insurers' Comments:-

## Invoice Preparation Checklist

Am't (\$)

Am't (\$)

1st Bill

Add Bill

1) AR: Accident Reporting (\$30);		
2) DA: Damage Assessment (\$100); INC (\$50)		
3) TF: Towing Fee \$40/\$45		
4) FT: Follow-Through Survey \$120		
5) FT: Follow-Through Survey (Resurvey) \$30		
For claiming against JNC Only (wef 10 Jan 2005)		
6) TR: Re-inspection \$75		
7) N1: Idao DA + SMRT Survey \$160		
8) NTUC Additional Services:-		
On:		
*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: Idao Mobile	\$0	

Invoice dated

Fee Charged

NA1807547



## 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	19/11/2018 14:05
Date Of Accident	19/11/2018 10:05
Exact Location Of Accident	CRAWFORD STREET TWDS BEACH ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ3850L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ALBERT SPEED ENTERPRISE
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92279818
Alternative Phone No	OFFICE-92279818

### Vehicle Particulars

Manufacturer	CITROEN
Model	-
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	THIRD PARTY
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	1700025106-01
Cover Note Number	

### Driver

Name of Driver	HOE CHEE KHIONG
NRIC No	S1591114Z
Date Of Birth	18/10/1963
Occupation	OUTDOOR
Date Of Driving Pass	02/11/1989
Driving Experience	29 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92279818
Fax Number	
Contact Number	OTHERS-92279818
EMail Address	NOEMAIL

Address	BLK 623 WOODLANDS DRIVE 52 #07-16
Postcode	730623
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - CO OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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)	2
Passenger 1	NAME: : NIL GENDER: : FEMALE

#### 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

PLS REFER TO THE ATTACHED STATEMENT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REVERT
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMC6038H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN SIONG HOE ( CHEN XIANGHE )
NRIC/Passport Number	S7809478H
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.

**ALBERT SPEED  
ENTERPRISE  
53336036J**

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

Pls Refer to the Attached

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls Refer to the Attached

DECLARATION

I/We declare the foregoing particulars are true in every respect.

**ALBERT SPEED  
ENTERPRISE**

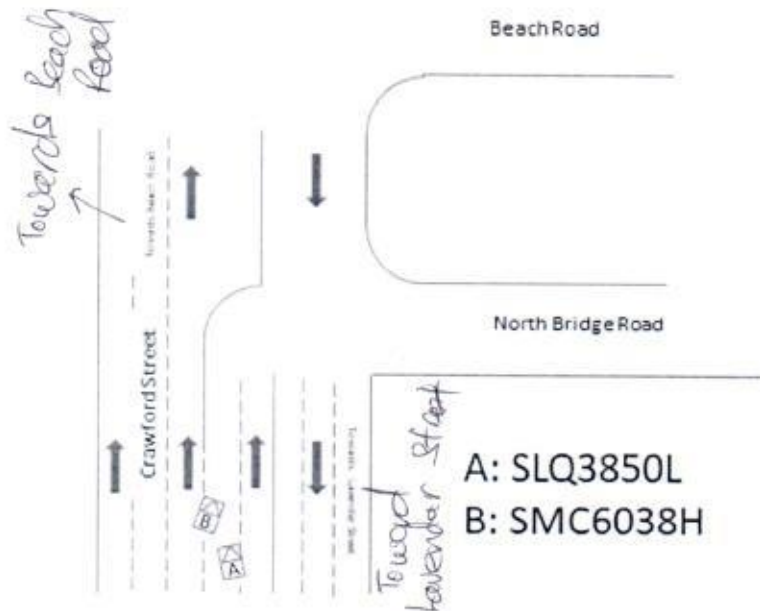
Policyholder's Signature  
Date & Time: 5/3/2018

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

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

19/11/2018

On 19 Nov 2018 at around 1009hrs, I was driving SLQ3850L (A) along Crawford Street towards Beach Road on the right lane. As there were road works and heavy traffic near the junction of North Bridge road, I decided to filter left. After checking my blind spot to ensure that I can change lane safely, I slowly turn from my lane. Suddenly vehicle (B) SMC6038H driven by Tan Siong Hoe bearing driving license S7809478H cut into my lane. This cause damages to the front of my vehicle. Vehicle (B) also sustained and damages to the right.





REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1591114Z



Name  
HOE CHEE KHIONG  
何志強  
Race  
CHINESE  
Date of birth  
18-10-1963  
Sex  
M  
Country of birth  
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S1591114Z

HOE CHEE KHIONG

Birth Date: 18 Oct 1963  
Issue Date: 09 May 2017

0026820648

3103553



NRIC No. S1591114Z



Blood Group Date of issue  
O+ 18-10-1999

Address  
APT BLK 623 WOODLANDS DRIVE 52  
#07-16  
SINGAPORE 730623

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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	10 Apr 1987
Class 3 Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	02 Nov 1989

NP 428A

Licence No: S1591114Z



FIATROEN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Vehicle No. : SLQ3850L  
Policy No. : 1700025106-01  
Endorsement No. :  
Issued Date : 21 Jun 2018

Make/Model	: CITROEN Grand C4 Picasso 1.6 BlueHDI	First Year of Registration	: 2017
Engine Capacity/Tonnage	: 1560 Tonnage	Sum Insured	: Market Value
Driver Restriction	: NA	Off Peak Car	: No
		Insuring with COE/PARF	: Yes

Any person who is driving on the Policyholder's order or with their permission.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDER") 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.

Limitation as to use\* : Use only for the Policyholder's business. Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is

1) use for driving 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 anyone disabled using a mechanically propelled vehicle; and  
3) use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired c) use for any purpose in connection with Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not included under these headings.

Section 1  
Fire - \$0 Own Damage - \$2000 Theft - \$0 Flood Cover - \$0

Section 2  
Property Damage - \$2000

Windscreen : \$100

Named Driver and Excess (where applicable)

HOE CHEE KHIONG - \$2000 (Own Damage) \$2000 (Property Damage)

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501  
2. Cycle & Carriage Authorised Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000  
3. Cycle & Carriage Authorised Service Centre Add: 20 Leng Kee Rd Singapore 159094 64708600

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 8338 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**

If the vehicle is hired for the carriage of passenger for hire or reward, such driver must be named under the Policy and registered with the service operator. Should you decide to include any other Named Drivers, please indicate. (Company reserves the right to accept/reject the inclusion of any Named Drivers).

Hire Purchase Company/Employer's Loan: MayBank

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. 119) and the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

CYCLE & CARRIAGE - EDMUND  
239 ALEXANDRA ROAD  
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance P**  
AUTHORISED REPRESENTATIVE