

NATIONAL Assessment Centre Services. [ver 1 Jan'03]

Date In	Job description	Date & Time Completed	Done by
04/12/18	SAS e-filing		
NA/A1618021824/13	E-mail (Within 3hrs, AIC 2hrs)		
5KZ5807P	I-Motor Claim Form		
02/12/18 1330	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
IP Reporting Only	I-Photo Uploaded		
IP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Controlled Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

Particulars: Vch No: YL9421X 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: ()

Contacts: (INC Hotline: 6788 6616) Date & Time Completed: Done by:

Apply for Transport Allowance () / Courtesy Car ()

C/C Check / Post Repair Inspection ()

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

Injury: ()

Date Time Actions

NA1808096

Insured's Particulars:

Insured/Owner:

Contact No:

Insured Portion:

Checked by (Eugr-In-Charge):

Insurers' Comments:

Invoice Preparation Checklist	Am't (\$)	Am't (\$)
	Tr. Bill	Adj. Bill
1) AR: Accident Reporting (\$30);		
2) DA: Damage Assessment (\$100); INC (\$80)		
3) TF: Towing Fee \$40/\$45		
4) FT: Follow-Through Survey \$120		
5) PT: Follow-Through Survey (Resurvey) \$30		
For claiming against INC Only (wef 10 Jan 2003)		
6) TR: Re-inspection \$75		
7) NI: Idno DA + SMRT Survey \$160		
8) NTUC Additional Services:-		
OD*		
*N5: Courtesy Car / Tpl Allowance \$3		
*N6: Repair Co-ordination \$10		
*N7: Post Repair Inspection \$23		
*N8: DV / Collect Excess Coordination \$3		
TP (N11): TP (Non INC) against INC \$20		
9) NI 2: Idno 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	04/12/2018 15:20
Date Of Accident	02/12/2018 13:30
Exact Location Of Accident	KEE SENG STREET LOADING & UNLOADING
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ5807P
Insured/Policyholder	
Name Of Registered Owner	TAN TEA KEOW
NRIC No	S1261822J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90590508
Alternative Phone No	OTHERS-96527670

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 3
Exact Purpose for which vehicle was being used at time of accident	PARKED VEH
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	2100449418-02
Cover Note Number	

Driver

Name of Driver	LEE MING HUI(LI MINGHUI)
NRIC No	S8409793D
Date Of Birth	05/04/1984
Occupation	INDOOR
Date Of Driving Pass	14/06/2004
Driving Experience	14 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96527670
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 287 BUKIT BATOK EAST AVE 3 #12-401
Postcode	650287
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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 PARKED VEHICLE
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)	0

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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YL9431X
Vehicle Make/Model/Colour	MINI
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	WANG FU
NRIC/Passport Number	
Contact Number	96363243
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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: 4/12/18

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

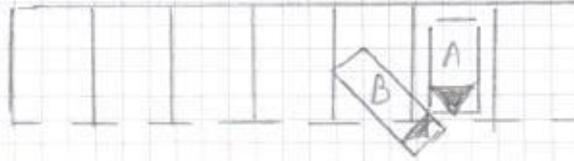
Name:

NRIC/FIN No.:

SKETCH PLAN

KEE SENG ST
LOADING & UNLOADING

A - SKZ5807P
B - YL9431X



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

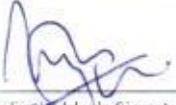
Both vehicles are parked at the parking lots. I was running errands. ~~At~~ when I came back, I see the truck very close to my car and the truck driver waiting there for me.

He confess that he hit my car as he was turning out of the parking lot. it hit the right front of my car causing part of the headlight to fall off and bumper to pop out and dents in the car.

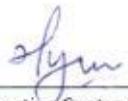
~~we~~ called this truck was company owned and he ~~was~~ ^{is} the company truck driver. We called his company to notify his boss and they will ~~was~~ ~~then~~ say they will wait for my report.

DECLARATION

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


 Policyholder's Signature
 Date & Time: 4/14/18

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

 04/10/18
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: (2 / 12 / 18) (DD/MM/YYYY), TIME: (13:30) (HH:MM)

LOCATION: Keo Seng Street

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SK2 5807 P
b) INSURANCE COMPANY: AIG
c) POLICY NUMBER: 2100449418-02 V1
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: MAZDA 3
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Private use PARKED VEH
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) (NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: Tan Tea Kiew (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 261822J CONTACT: 90590508
c) ADDRESS: Blok 287 #12-49 Bukit Bukit East Ave 5
S650287

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Lee Ming Hin (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 8409793D CONTACT: 96527270
c) ADDRESS: Blok 287 #12-49 Bukit Bukit East Ave 5
S650287

*d) DATE OF BIRTH: (5 / 4 / 86) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 13

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) (NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO) (NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: YL 9431 X MODEL: Mitsubishi truck

b) DRIVER'S NAME: Wang Fu

c) NRIC/FIN/PASSPORT: 078007311 CONTACT: 96363243

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____

e) DRIVER'S NAME: _____

f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
(including driver)
(0)

* No of passenger
(including driver)
()

* No of passenger
(including driver)
()

04/12/18
waiting for ci 3. d1

email =

fax =

video =

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8409793D



Name

LEE MING HUI
(LI MINGHUI)
李 铭 辉

Race

CHINESE

Date of birth

05-04-1984

Sex

M

Country/Place of birth

SINGAPORE



5295778



NRIC No. S8409793D



Date of issue

17-04-2014

Address

APT BLK 287 BUKIT BATOK EAST AVENUE 3
#12-401
SINGAPORE 650287

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8409793D**

Name:
**LEE MING HUI
(LI MINGHUI)**

Birth Date: **05 Apr 1964**
Issue Date: **14 Jun 2004**



001238076C



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

	PASS DATE
Class 3 Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg	14 Jun 2004

NP 428A





CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tan Tea Keow
 Period of Insurance : 27 Jan 2018 To 26 Jan 2019
 Engine No. : P520338547
 Chassis No. : JM6BM42A8G0329325

Vehicle No. : SKZ5807P
 Policy No. : 2100449418-02
 Endorsement No. :
 Issued Date : 21 Dec 2017

ABOUT THE COVER

Make/Model	MAZDA 3 1.5 SKYACTIV	Sum Insured	Market Value	First Year of Registration	2016
Engine Capacity/Tonnage	1,496.00 CC	Off Peak Car	No	Insuring with COE/PARF	Yes
Driver Restriction	NA				

Person or Classes of Persons Entitled to Drive*

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 authorized driver only if he/she meets the specified age condition.

The insured may be subjected to a \$1,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorized 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-driving, the carriage 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 Optional

* Limitations rendered operative by Section 3 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189) and Section 55 of the Road Transport Act, 1987 (Malaysia), are not to be invoked under these headings.

EXCESS

Section 1

Fire - \$0; Own Damage - \$600; Theft - \$0; Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen - \$100

Named Driver and Excess (where applicable)

Tan Tea Keow - \$600 (Own Damage)

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

1. Trans Eureka Pte Ltd, A01-5 Ubi Clover, Singapore 468603-63858899

For other Approved Reporting Centres/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 or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

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

0503899190

ARE (AP) PTE LTD - MAZDA

7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX

SINGAPORE 060111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSPMLU