

NATIONAL Assessment Centre Services

Date In <u>20/12/18</u>	Job description	Date & Time Completed	Done by
Ref No <u>NA/1418022872/13</u>	SAS e-filing		
Veh No <u>5KX21537</u>	E-mail (within 8hrs, A/C 2hrs)		
D.O.A <u>19/12/18</u>	i-Motor Claim Form		
OD <u>(TP)</u> Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (<u>N-51</u>)	Tel: ()	Fax: ()
TP Particulars:	Veh No: <u>SHAS981K</u>	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:-

- () 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

NA1808383

Invoice Preparation Checklist

Amt (\$) Amt (\$)
1st Bill Add Bill

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

- 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) FT : Follow-Through Survey (Resurvey) \$30
- 6) TR : Re-inspection \$75
- 7) N1 : Idac DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- 9) N12: Idac 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	20/12/2018 16:34
Date Of Accident	19/12/2018 09:40
Exact Location Of Accident	BELOW WOODSVILLE FLYOVER TURN TO JLN TOA PAYOH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX2153Y
Insured/Policyholder	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	201533046C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83802233

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	999994387
Cover Note Number	

Driver

Name of Driver	PUNG CHUN TIONG(FENG JUNZHONG)
NRIC No	S7110553I
Date Of Birth	22/03/1971
Occupation	OUTDOOR
Date Of Driving Pass	30/03/1994
Driving Experience	24 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93877599
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 307 CANBERRA ROAD #10-91
Postcode	750307
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) 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)	2
Passenger 1	NAME: : UNKNOWN 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:	WITH WORKSHOP
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA5981K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	PUNG CHUN TIONG(FENG JUNZHONG)
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SKX2153Y
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
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:

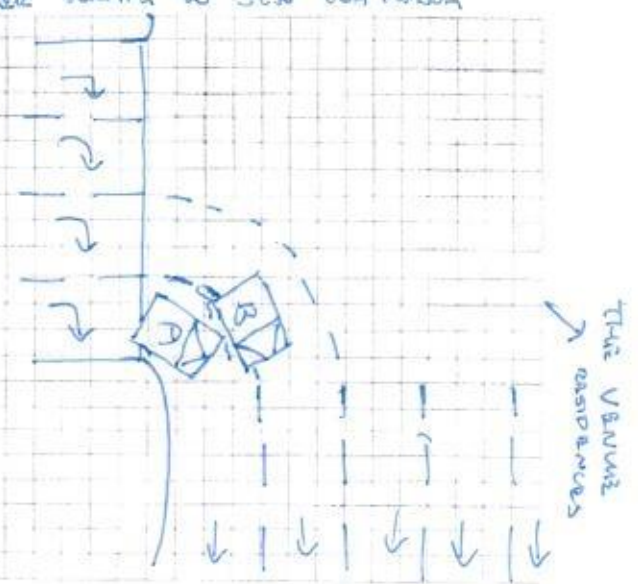
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN

Below Woodville Flyover Turnoff to Jln Toa Payoh

VEHICLE A - SKX 2153 Y
VEHICLE B - SHA 5981 K



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS MAKING A RIGHT TURN INTO JLN TOA PAYOH, WHILE
HAIL WAS COMING, SUDDENLY A VEHICLE SWERVED INTO MY LANE AND
HIT ONTO THE LEFT FRONT PORTION OF MY VEHICLE.

IT WAS A VEHICLE WITH LICENCE PLATE NUMBER (SHA 5981 K)
THAT MADE A EARLY TURN AND SWERVED INTO MY LANE AND CAUSED
THE COLLISION TO MY VEHICLE.

THE WHOLE ACCIDENT FOOTAGE WAS CAPTURED BY MY IN-CAR CAMERA.

VEHICLE A - SKX 2153 Y

VEHICLE B - SHA 5981 K

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:
NRIC/FIN No.:

Vehicle No.	SEX 2153 J	Model / Make	TOYOTA ALTO
Date of Accident	19/12/2018		
Time of Accident	09 40	HRS	
Location of Accident	BELOW WOODVILLE FLYOVER	TURNING TO SLN TOA PAHOM	
Exact purpose use during accident	WORKING HOUR	TOWARDS MACPHERSON RD	
Name of Owner	TWINCAR LEASING PTE LTD		
Telephone No.	H/P : 8380 2233	Home :	Office :
NRIC	2015 33046C		
Address	2 KARL BUKIT AVE 2 #01-17 KARL BUKIT AVE 2 S(417921)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	AIG		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	999994387		
Name of Driver	As Above If No, PUNH CHUN TIONG		
NRIC	S7110553-I	Any Passengers :	1 (FEMALE)
Date of birth	22 MAR 1971		
Occupation	Outdoor / Indoor		
Driving License Pass Date	30 MAR 1994		
Gender	Male / Female		
Contact No.	H/P : 9387 7599	Home :	Office :
Address	BLK 307 CANBERRA ROAD #10-91 S(750307)		
Driver have any own vehicle	No, If yes, Reg No.		
Relationship	Employee, If no, state	RENTAL / LEASE	
Weather condition	Clear	Raining	Other
Road Surface	Dry	Wet	Other
Any Injuries	No, If Yes, Who?		
Name And Contact No.			
Name And Contact No.			
Police Report	No, If Yes, Where?		
Vehicle B No.	SHA 5991 K	Any Passengers :	
Name of Driver	5981 K	Contact No. :	
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	LEFT FRONT		
Camera Recorder	Yes / No		
Email Address			
HAVE YOU BEEN APPROACH BY UNKNOWN PERSON SOLICITING / OFFERING ACCIDENT CLAIMS ASSISTANCE?		Yes / No	
PARTICULAR WORKSHOP	N51 AUTOMOTIVE PTE LTD		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	IAN		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	Sales@n51.com.sg		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7110553I



Name:

PUNG CHUN TIONG
(FENG JUNZHONG)

Race:

CHINESE

Date of birth:

22-03-1971

Sex:

M

S7110553I

Country/Place of birth:
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7110553I

Name:

PUNG CHUN TIONG
FENG JUNZHONG

Birth Date: 22 Mar 1971

Issue Date: 23 Sep 2015



002475969F

SG
50

Land Transport Authority



VOCATIONAL LICENCE

Licence No : S7110553I

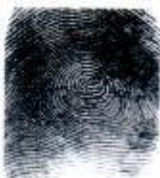
Name : PUNG CHUN TIONG

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

5966037



NRIC No. S7110553I



Date of issue:

28-06-2018

Address:

APT BLK 307 CANBERRA ROAD
#10-91
SINGAPORE 750307

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

EFFECTIVE DATE

Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive 30 Mar 1994
of the driver; and other motor vehicles =< 2500kg

NP 428A



Licence No: S7110553I

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	27/07/2018





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, 1959 (MALAYSIA)

M.Z.400

COMPREHENSIVE		COMMERCIAL MOTOR		(The below excess is subject to GST)	
CERTIFICATE NO.	SKX2153Y	POLICY EXCESS		S\$2000.00 (Sect I & II)	
POLICY NO.	999994387	WINDSCREEN EXCESS		S\$100.00	
1) VEHICLE REGISTRATION NO.		SUM INSURED	YES		
2) NAME OF INSURED		INSURING WITH COE/PARF	YES		
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		SKX2153Y			
4) DATE OF EXPIRY OF INSURANCE		Twincar Leasing Pte Ltd			
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*		19 October 2018			
		18 October 2019			
<p>Any person who is driving on the Insured's order or with their permission.</p> <p>S\$2,000.00 Section I & S\$2,000.00 Section II Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience in Singapore.</p> <p>Up to \$250.00 one-time waiver excess under section I for build in car camera and applicable on non at fault claim only. (Valid for 6 months).</p> <p>Accident repair can be carried out at any of your preferred workshop for repair subjected that all claim matters does not involved any lawyer services.</p> <p>An additional excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.</p> <p>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.</p>					
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.					
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.					
It is hereby agreed and acceptance that we would make special arrangement to this workshop known as N-51 Automotive Pte Ltd to be your accident claim reporting center based on the conditions below.					
LOSS OF USE		Not Included			
HIRE PURCHASE COMPANY		NIL			
*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 17 Oct 2018

AIG Asia Pacific Insurance Pte. Ltd.

Swift Link Insurance Agency - 502117

61 Ubi Avenue 2

#08-04A Automobile Megamart

Singapore 408898

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPOEC

0% 25% 50% 75% 100%

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	SKX2153Y		
Vehicle Type:	Z10 - Private Hire (Chauffeur) Motor Car	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	TOYOTA	Vehicle Model:	COROLLA ALTIS CLASSIC 1.6 CVT
Chassis No.:	MR053REH104538075	Engine No.:	1ZRY205202
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Petrol	Passenger Capacity:	4
Engine Capacity:	1598 cc	Power Rating:	-
Maximum Power Output:	90.0 kW (120 bhp)		
Unladen Weight:	1205 kg	Maximum Laden Weight:	1640 kg
Primary Colour:	Grey	Secondary Colour:	-
First Registration Date:	30 Nov 2015	Original Registration Date:	30 Nov 2015
Manufacturing Year:	2015	Open Market Value:	\$17,804.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$8,902.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$17,804.00 (100%)

Owner Particulars

Owner Name:	TWINCAR LEASING PTE LTD
Owner ID Type:	Company
Owner ID:	201533046C
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.:	2
Registered Street Name:	KAKI BUKIT AVENUE 2
Registered Unit No.:	# 01 - 17
Registered Building Name:	KAKI BUKIT AUTOHUB
Registered Postal Code:	417921
COE No. / Expiry Date:	2015120101001094Z / 29 Nov 2025
COE Bid Category:	A - Car (up to 1600cc & 97kW (130bhp))
QP Paid:	\$56,001.00

Transaction Details

Business Transaction Ref. No.:	20151130152838991003
Business Transaction Date:	30 Nov 2015
Business Transaction Time:	15:28:38

Message

The above vehicle has been successfully registered.

Please note that \$64,242.00 will be deducted from your GIRO account.

OK