

NATIONAL Assessment Centre Services

(wef 1 Jan'05) **NA118 16728**

| | | | |
|-----------------------------------|---|-----------------------|---------|
| Date In: 29/12/18-10:14 | Job description | Date & Time Completed | Done by |
| Ref No: HA/12/180 23303/24 | SAS e-filing | | |
| Veh No: ST96933 | E-mail (within 8hrs, AIC 2hrs) | | |
| D.O.A: 28/12/18-20:05 | i-Motor Claim Form | | |
| OD: (TP) Reporting Only | i-Motor W/O (Within: OD 2hrs, TP 4hrs) | | |
| | i-Photo Uploaded | | |
| TP Insurer: | Assessment/Survey Report | | |
| | Ass't Report by <u>Fax / Hand to Owner/Wksp</u> | | |

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

| | | |
|---|------------------------|-----------------------|
| TP Particulars: | Veh No: 11CWJSP | 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 |
|-----------|---------|
| | |
| | |
| | |
| | |
| | |
| | |

| | | | |
|---------------------------------|---|------------------------|------------------------|
| NA19 00024 | Invoice Preparation Checklist | Am't (\$) Est. Bill | Am't (\$) Add. Bill |
| Claimant's Particulars:- | 1) AR: Accident Reporting (\$30); | | |
| Driver/Owner: | 2) DA: Damage Assessment (\$100); INC (\$80) | | |
| Contact No: | 3) TF: Towing Fee \$40/\$45 | | |
| Damaged Portion: | 4) FT: Follow-Through Survey \$120 | | |
| QC Checked by (Engr-In-Charge): | 5) FT: Follow-Through Survey (Resurvey) \$30 | | |
| Auditors' Comments:- | For claiming against INC Only (wef 10 Jan 2005) | | |
| | 6) TR: Re-inspection \$75 | | |
| | 7) N1: Idao DA + SMRT Survey \$160 | | |
| | 8) NTUC Additional Services:- | | |
| | QD* | | |
| | *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 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 | 29/12/2018 12:14 |
| Date Of Accident | 28/12/2018 20:05 |
| Exact Location Of Accident | BEDOK NORTH RD |
| Country/State of Loss | SINGAPORE |
| DETAILS OF OWN VEHICLE | |
| Vehicle Registration Number | SJT9693S |
| Insured/Policyholder | |
| Name Of Registered Owner | MARIC MARKETING PTE LTD |
| Co Reg No | 201620700D |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-89999999 |
| Vehicle Particulars | |
| Manufacturer | NISSAN |
| Model | SYLPHY 1.5L 4AT ABS D/AB 2WD 4DR |
| Exact Purpose for which vehicle was being used at time of accident | COMMERCIAL 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 HIRE |
| Insurance Company | |
| Name of Insurance Company | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | 999994412 |
| Cover Note Number | |
| Driver | |
| Name of Driver | SOON WEI MING |
| NRIC No | S9318470Z |
| Date Of Birth | 27/05/1993 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 26/03/2013 |
| Driving Experience | 5 YEARS AND 9 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-98718077 |
| Fax Number | |
| Contact Number | OFFICE-98718077 |
| Email Address | NOEMAIL |

| | |
|---|------------------------------------|
| Address | BLK 77 BEDOK NORTH ROAD #13-220 |
| Postcode | 460077 |
| 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 | COLLISION - HEAD TO REAR |
| 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? | NO |
| Was any injured conveyed to hospital by ambulance? | |
| 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? | NO |
| If Yes, Please state which Police Station | |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO 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 | SKW555P |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | LIM SIANG HWA |
| NRIC/Passport Number | S1590500Z |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | 1 |

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.

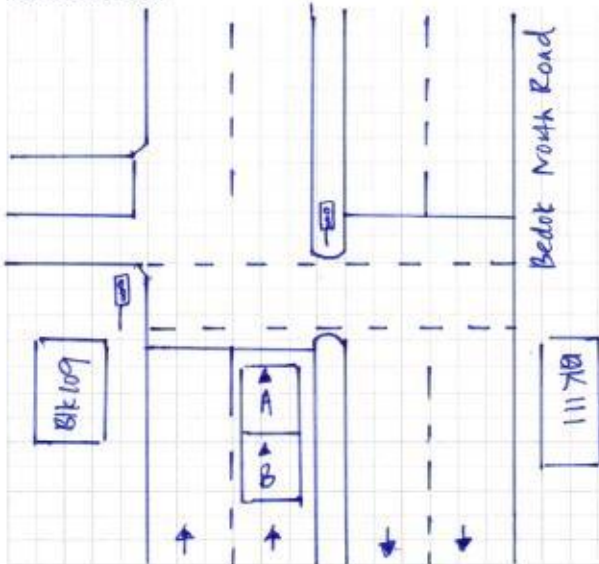
Maric Marketing Pte Ltd
Co Reg No 201620700D
5 Tampine Lane #03-04
Singapore 787472

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



Vehicle A : SJT9693S
Vehicle B : SKW555P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle 'A' was travelling

on the stated venue. I was stationary in my heavy traffic lane.

Suddenly, I felt an impact on my vehicle rear. I got down

shortly and then realised vehicle 'B' had hit onto my

stationary vehicle rear portion.

DECLARATION

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

Co. Reg. No. 20120700D
9 Tagore Lane #03-04
Singapore 787472

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.:

ACCIDENT STATEMENT

ACCIDENT DATE: (28 / 12 / 2018) (DD/MM/YYYY), TIME: (20 : 05) (HH:MM)

LOCATION: Bedok North Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJT 96935
 b) INSURANCE COMPANY: MG
 c) POLICY NUMBER: 999994412
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Nissan Sylphy
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME:
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Maric Marketing Pte Ltd (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 201620700D CONTACT:
 c) ADDRESS: 9 Tagore Lane #03-04 Singapore 787472

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Soon Wei Ming (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S93184702 CONTACT: 9871 8077
 c) ADDRESS: Blk 77 Bedok North Road #13-220
 S(460077)

*d) DATE OF BIRTH: (27 / 05 / 1993) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 5

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hired

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)

IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: SKW555P MODEL:

b) DRIVER'S NAME: Lim Siang Hwa

c) NRIC/FIN/PASSPORT: S15905002 CONTACT:

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: MODEL:

e) DRIVER'S NAME:

f) NRIC/FIN/PASSPORT: CONTACT:

* No of passenger
 (Including driver)
 (1)

* No of passenger
 (Including driver)
 (1)

* No of passenger
 (Including driver)
 ()

188
 1000000 Industrial Park 2
 1000000, 510000 Ave
 S(408933)

Email = REPORTINS@
 TOPQUE5.com
 Fax = 6452 4584

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9318470Z



Name
SOON WEI MING

孙 伟 明

Race
CHINESE

Date of birth
27-05-1993

Sex
M

Country of birth
SINGAPORE

4762640

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S9318470Z

Name
SOON WEI MING

Birth Date 27 May 1993

Issue Date 26 Mar 2013



002164744H

4762640




NRIC No. S9318470Z

Date of issue
04-08-2011

Address
APT BLK 77 BEDOK NORTH ROAD
#13-220
SINGAPORE 460077

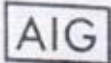
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

| Class | Vehicle Description | Effective Date |
|---------|--|----------------|
| Class 3 | MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN DOES NOT EXCEED 2500 KILOGRAMS | 26 Mar 2013 |
| Class 4 | HEAVY MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN EXCEEDS 2500 KILOGRAMS | 04 Jul 2014 |
| Class 5 | MOTOR VEHICLES WHICH ARE NOT CONSTRUCTED THEMSELVES TO CARRY ANY LOAD AND THE WEIGHT OF WHICH UNLADEN EXCEEDS 7250 KILOGRAMS | 11 Aug 2015 |

S9318470Z S / No. 9000250683

NP 428A

Licence No: S9318470Z



HOTLINE Tel: 65499911, 65499912
Fax: 65499913, 65499914

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT CHAPTER 199

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1988

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1988 (MALAYSIA)

W 2.40

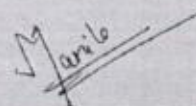
| | | | |
|---|-----------------|---|-----------------------------|
| THIRD PARTY FIRE & THEFT COMMERCIAL MOTOR | | <small>(The below excess is subject to 50%)</small> | |
| CERTIFICATE NO. | SJT96935 | POLICY EXCESS | S\$1000.00 (Bect II) |
| POLICY NO. | 99999412 | WINDSCREEN EXCESS | NA |
| 1) VEHICLE REGISTRATION NO. | | SUM INSURED | NA |
| 2) NAME OF INSURED | | INSURING WITH COE/PARF | NA |
| 3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT | | SJT96935 | |
| 4) DATE OF EXPIRY OF INSURANCE | | MARIC MARKETING PTE LTD | |
| 5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE* | | 09 October 2018 | |
| <small>Any person who is driving on the Insured's order or with their permission.</small> | | 24 April 2019 | |
| <small>(S1) 500.00 Section II Excess is applicable for driver who is above 21 years old with minimum 2 years driving experience.</small> | | | |
| <small>(S2) 800.00 Section II Excess is applicable for driver who is 21 years old with minimum 1 year driving experience.</small> | | | |
| <small>The policy does not cover drivers who are below 21 years old or less than 1 year driving experience.</small> | | | |
| <small>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle in this form as permitted and is not disqualified by order of a Court of Law or by reason of any endorsement 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 when the vehicle is hired. | | | |
| 3) Use for the carriage of passengers for hire or reward for any person to whom the vehicle is hired. | | | |
| <small>The Policy does not cover: 1) Use for racing, driving test, track, speed, reliability trial or speed testing; 2) Use of the driving a vehicle except the towing (other than for reward) of any other licensed mechanically propelled vehicle; 3) Use for any purpose in contravention with the Motor Trade.</small> | | | |
| LOSS OF USE | | Not included | |
| HIRE PURCHASE COMPANY | | Tai Thong lee Trading Pte Ltd | |
| <small>*Limitations mentioned above are in accordance with Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 199) and Section 96 of the Road Transport Act, 1987 (Malaysia), and not to be included under these headings.</small> | | | |

1. 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 199) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 09 Oct 2018

AIG Asia Pacific Insurance Pte. Ltd

500656-000
Cowell Insurance (Agency) Pte. Ltd.
8 Burn Road
#09-09 Trivex
Singapore 369977


AUTHORISED REPRESENTATIVE

ORIGINAL

SUPEC