

NATIONAL Assessment Centre Services. [ver 1 Jan 05] **NA1900108**

Date In: <b>05/01/2019 15:25</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA1900002764</b>	SAS e-filing		
Veh No: <b>SMC 1239 C</b>	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: <b>05/01/2019 12:05</b>	I-Motor Claim Form		
OD: <b>TP</b> Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whsp		

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

TP Particulars: Vch No: **SJS 4725Y** 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 6788 6616)

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

2) QC Check / Post Repair Inspection ( )

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

Injury: \_\_\_\_\_

Date/Time	Actions

Claimant's Particulars	Invoice/Repairation Charge	Amount	Responsible
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100)	INC (\$80)	
Damaged Portion:	3) TP: Towing Fee	\$40/\$45	
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey	\$120	
Auditors Comments:	5) PT: Follow-Through Survey (Resurvey)	\$30	
Date:	For claiming against INC Only (ver 10 Jan 2005)		
	6) TR: Re-inspection	\$75	
	7) NI: Idao DA + SMRT Survey	\$160	
	8) NTUC Additional Services:		
	OD:		
	*N5: Courtesy Car / Tpl Allowance	\$3	
	*N6: Repair Co-ordination	\$10	
	*N7: Post Repair Inspection	\$25	
	*N8: DV / Collect Excess Coordination	\$5	
	TP (N11): TP (via INC) against INC	\$20	
	9) N12: Idao 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	05/01/2019 15:25
Date Of Accident	05/01/2019 12:05
Exact Location Of Accident	ALONG JALAN EUNOS TOWARDS PIE JUNCTION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMC1239C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	BIS MOTORING PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91115992
Alternative Phone No	OFFICE-91115992

### Vehicle Particulars

Manufacturer	RENAULT
Model	SCENIC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994322
Cover Note Number	

### Driver

Name of Driver	CHER HENG HUI (XU XINGHUI)
NRIC No	S7401445C
Date Of Birth	27/01/1974
Occupation	OUTDOOR
Date Of Driving Pass	18/02/1997
Driving Experience	21 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91115992
Fax Number	
Contact Number	OTHERS-91115992
E-Mail Address	NOEMAIL

Address	BLK 122 LORONG 8 TOA PAYOH #06-683
Postcode	310221
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?	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)	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

PLEASE REFER TO SKETCH PLAN

#### 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	SJS4725Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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**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.



*[Handwritten Signature]*

Policyholder's Signature  
Date & Time:

*[Handwritten Signature]*

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

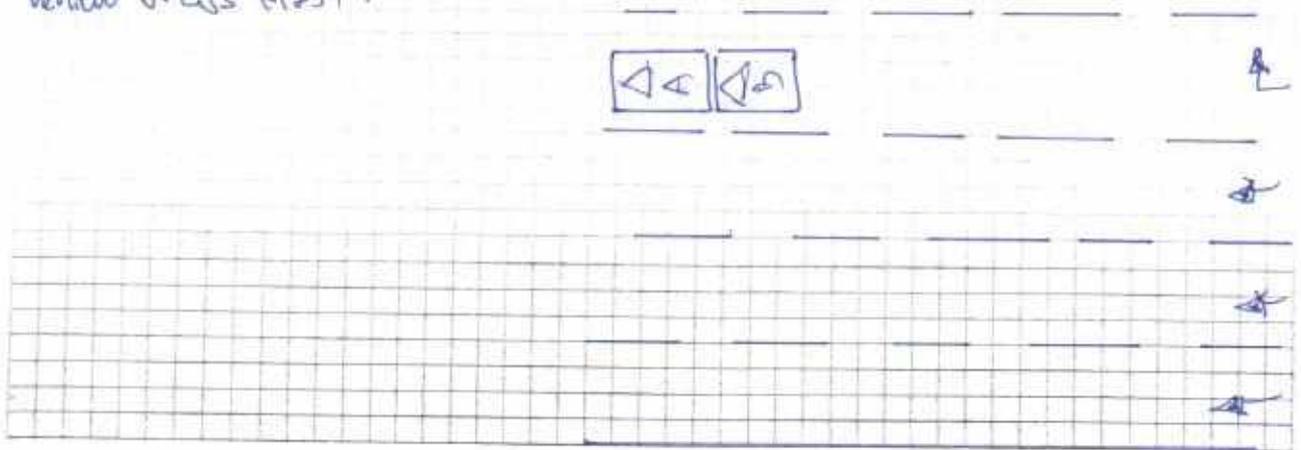
*[Handwritten Signature]* 05/01/2019

Reporting Centre Personnel's Signature  
Name: *[Handwritten Name]*  
NRIC/FIN No.:

SKETCH PLAN

John Eunan towards AIS Junction

Vehicle A: SMC1239 C  
Vehicle B: SJS 4725 Y



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time I, vehicle 'A' was stopped stationary  
 at the stated name due to <sup>waiting</sup> traffic clear to move. Suddenly vehicle  
 'B' hit into my vehicle rear garden

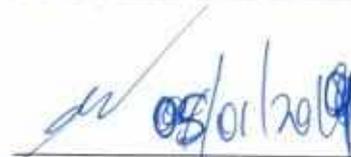
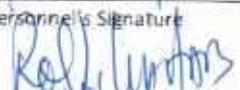
DECLARATION

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.:

Date of Accident: 5/1/19 Accident Time: 12:05 (24-HR-Format)

Accident Place: Along Jalan Tunas Tanah PIR Junction.

Vehicle No. (Car Plate No.): SWC1289C Make/Model: Renault Scener

Insurance Company: AIG Policy No. \_\_\_\_\_

Owner or Company Name / IC No.: BIS Motoring Pte Ltd.

Owner or Company Contact No.: \_\_\_\_\_ Owner's Hp: \_\_\_\_\_ Company Tel: \_\_\_\_\_

DRIVER'S Name / IC No.: Chew Henry Hui (Xu Yanghui)

DRIVER'S Date Of Birth: 27 Jan 1976 DRIVER'S License Pass Date: 18 Feb 1997

Relationship of Owner & Driver: Spouse | Parents | Children | Sibling | Employee | Others: None

DRIVER'S Address: Blk 221 Lanyang Rd, Lanyang Estate, S 310221.

DRIVER'S Contact No / Alt No.: 1) 91115992 2) \_\_\_\_\_

DRIVER'S Occupation: INDOOR | OUTDOOR (e.g. working inside or outside office)

Email Address: \_\_\_\_\_

Weather & Road Surface: CLEAR & DRY | RAINING & WET | AFTER RAIN & WET

Reporting Type: Reporting Only | Claim Other Party | Claim Own Insurance

Number of Passengers (Including Driver): 01

Was there any video Captured by car camera: YES | NO

Exact purpose for which vehicle was being used at the time of accident: Private use | Work purpose

Any Injury (If YES, Pls state): \_\_\_\_\_

**Other Party Driver's Particular (if any)**

Vehicle No: <u>SJS 6725 Y</u>	Vehicle No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7401445C



Name  
CHEB HENG HUI  
(XU XINGHUI)  
徐兴辉

Race  
CHINESE

Date of Birth: 27-01-1974 Sex: M

Country of Birth  
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

Identification Number: S7401445C

Name: CHEB HENG HUI (XU XINGHUI)

Birth Date: 27 Jan 1974

Valid Until: 08 Nov 2017




002741544C



2695044



NRIC No. S7401445C



Sexual Group: A+ Date of issue: 31-08-1995

Address  
APT BLK 221 LORONG B TOA PAYOH  
#06-683  
SINGAPORE 310221

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIFICATION

CLASSIFICATION	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	18 Feb 1997

NP 428A

Licence No: S7401445C



**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, 1939 (MALAYSIA)

M.2.400

		(The below excess is subject to GST)	
<b>COMPREHENSIVE</b>	<b>COMMERCIAL MOTOR</b>	<b>POLICY EXCESS</b>	<b>S\$1500.00 (Sect I &amp; Sect II)</b>
<b>CERTIFICATE NO.</b>	<b>SMC1239C</b>	<b>WINDSCREEN EXCESS</b>	<b>S\$100.00</b>
<b>POLICY NO.</b>	<b>999994322</b>	<b>SUM INSURED</b>	<b>Market Value</b>
<b>1 ) VEHICLE REGISTRATION NO.</b>		<b>INSURING WITH COE/PARF</b>	<b>YES</b>
<b>2 ) NAME OF INSURED</b>		SMC1239C	
<b>3 ) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT</b>		BIS MOTORING PTE LTD	
<b>4 ) DATE OF EXPIRY OF INSURANCE</b>		26 December 2018	
<b>5 ) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*</b>		25 December 2019	
Any person who is driving on the Insured's order or with their permission. Authorised driver must be between age 23 to 65 with at least 2 years driving experience. Accident repair can be carried out at Munich Auto Care in the condition that all repairs have to be surveyed, appointed by AIG surveyors before proceeding with repair.			
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.			
<b>6 ) LIMITATION AS TO USE*</b>			
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.			
<b>LOSS OF USE</b>	Not Included		
<b>HIRE PURCHASE COMPANY</b>	SING INVESTMENTS & FINANCE LIMITED		
*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 19 Dec 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

SSPOEC