

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: 08/01/19	Job description	Date & Time Completed	Done by
Ref No: NA/1619000441/13	SAS e-filing		
Veh No: SMG8534H	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 07/01/19 1015	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 Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (**N-51**) Tel: Fax:)

TP Particulars: Veh No: **SMG3551B** 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

NA1900257	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) 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)		
Cat. 1:	6) TR: Re-inspection \$75		
Cat. 2 / 3:	7) N1: Idac 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: 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	08/01/2019 14:58
Date Of Accident	07/01/2019 10:15
Exact Location Of Accident	NEW BRIDGE RD TWDS BUKIT MERAH
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMG8534H
Insured/Policyholder	
Name Of Registered Owner	JOEL CHUA HIANG YANG
NRIC No	S9104616D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98569162
Alternative Phone No	OTHERS-98335285
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA 2
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	3100030997
Driver	
Name of Driver	CHUA CHOON HONG
NRIC No	S2554709H
Date Of Birth	28/04/1950
Occupation	INDOOR
Date Of Driving Pass	24/08/2006
Driving Experience	12 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98335285
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 124 JURONG EAST ST 13 #02-09
Postcode	600124
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
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?	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: : 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

POLS 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:	FILE CORRUPTED
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME3551B
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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5. Any false reporting may be referred to the Police for investigation.
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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:

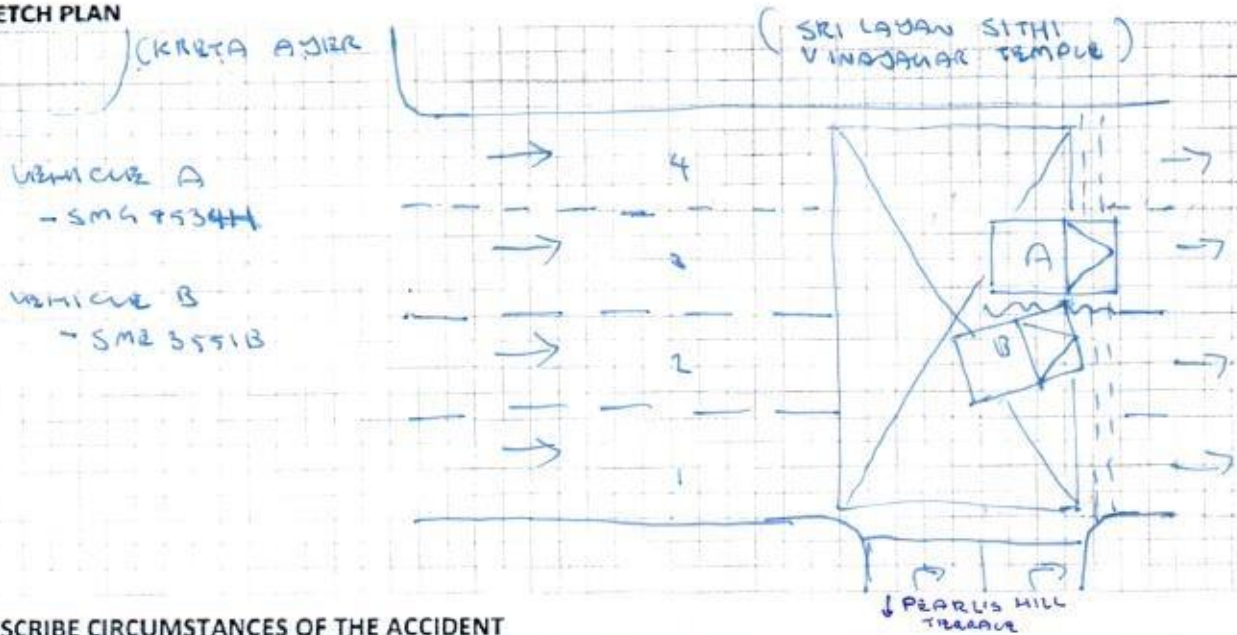
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 8/1/2019 10.20 am

Reporting Centre Personnel's Signature
Name: *[Signature]* 08/01/19
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING STRAIGHT ALONG NEW BRIDGE ROAD TOWARD BURIT MERAM DIRECTION. I WAS ON THE THIRD LANE.

WHILE TRAVELLING STRAIGHT, SOMEWHERE AT THE T-JUNCTION OF (PEARL'S HILL TERRACE / NEW BRIDGE ROAD) SUDDENLY I FELT A IMPACT FROM THE RIGHT SIDE OF MY VEHICLE.

ALIGHTED FROM MY VEHICLE AND REALIZED IT WAS A VEHICLE WITH LICENSE PLATE NUMBER (SMR 3551 B) THAT COLLIDED TO THE RIGHT SIDE OF MY VEHICLE WHILE SERVED AND CUT INTO MY LANE, FROM THE 2ND LANE.

VEHICLE A - SMR 8534 H

VEHICLE B - SMR 3551 B

DECLARATION

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

Policyholder's Signature
Date & Time:

CHUA CHUAN HONG
Driver's Signature
(If driver is not the policyholder)
Date & Time: 8/1/2019 10:30 AM

08/01/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Vehicle No.	SMG 8534H		Model / Make	Nazda
Date of Accident	7/1/19			
Time of Accident	10.15 pm		HRS	
Location of Accident	NEW BRIDGE ROAD TOWARD BUKIT MARAH			
Exact purpose use during accident	PRIVATE USE			
Name of Owner	JOEL CHUA HIAN YAN			
Telephone No.	H/P: 9856 9162		Home:	Office:
NRIC	S9104616D			
Address	BLK 124 JURONG EAST ST 13 #02-09 S(600124)			
Claim type	OD <u>THIRD PARTY</u> REPORTING ONLY			
Insurance Company	AIA			
Type of Coverage	Comprehensive Third Party Third Party / Fire / Theft			
Policy No.	3100030997			
Name of Driver	As Above If <u>No</u> , CHUA CHOON HONG			
NRIC	S2554709H		Any Passengers: 1 (FEMALE)	
Date of birth	28/04/1950			
Occupation	Outdoor / <u>Indoor</u>			
Driving License Pass Date	24 Aug 2006			
Gender	<u>Male</u> / Female			
Contact No.	H/P: 9833 5285		Home:	Office:
Address	BLK 124 JURONG EAST ST 13 #02-09 S(600124)			
Driver have any own vehicle	<u>No</u> If yes, Reg No.			
Relationship	Employee,		If no, state FATHER	
Weather condition	<u>Clear</u> Raining Other			
Road Surface	<u>Dry</u> Wet Other			
Any Injuries	<u>No</u> If Yes, Who?			
Name And Contact No.				
Name And Contact No.				
Police Report	<u>No</u> If Yes, Where?			
Vehicle B No.	SMG 3551B		Any Passengers:	
Name of Driver			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	RIGHT SIDE OF VEHICLE			
Camera Recorder	<u>Yes</u> / No FILE CORRUPTED			
Email Address				
PARTICULAR WORKSHOP	N-51 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. **S2554709H**



Name

CHUA CHOON HONG

蔡 俊 達

Race

CHINESE

Date of Birth

28-04-1950

Sex

M

Country of Birth

MALAYSIA





REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S 2554709H**
Name: **CHUA CHOON HONG**

Birth Date: **28 Apr 1950**
Issue Date: **24 Aug 2006**



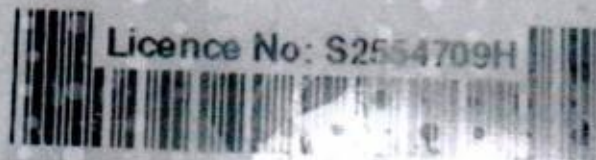
 **001440944B**

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

PASS DATE

Class 3 Motor Cars= \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg **24 Aug 2006**

NP 428A



Licence No: S2554709H

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S9104616D**

Name: **JOEL CHUA HIANG YANG**

Birth Date: **15 Feb 1991**

Issue Date: **26 May 2010**

 **001859888D**




OWNER

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

	EFFECTIVE DATE
Class 3 Motor Cars= \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	26 May 2010

NP 428A

Licence No: S9104616D



owner

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9104616D



Name

JOEL CHUA HIANG YANG

蔡 贤 扬

Race

CHINESE

Date of birth

15-02-1991

Sex

M

Country/Place of birth

SINGAPORE



owner

5448968



NRIC No. **S9104616D**



Date of issue

06-04-2015

Address

**APT BLK 124 JURONG EAST STREET 13
#02-09
SINGAPORE 600124**

owner

1 of 1

ORIGINAL

Co. Reg. No. 201009404M

Hotline: (65) 6419-3000 Fax: (65) 6415-3723

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.



Cover Note: 3100037997

The following risk described in the Schedule below is hereby covered subject to the applicable terms and conditions of AIG's policy issued to the Policyholder. The Policy to which this Cover Note relates to 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).

Schedule (please circle where applicable)

Policyholder/Insured: JOEL CITUA ITIANH YANG		Policy Period: 31/12/2018 to 30/12/2020 23:59
Age Condition	1 All Age	Registration Number
	2 30 Years Old and Above	Make/Model: MAZDA 3 1.5
	3 35 Years Old and Above	CC/Tonnage: 1496cc
	4 40 Years Old and Above	Engine Number: P520568074
	5 Named Driver Basis	Chassis Number: JM6A72HAA 01300213
Policy Type	Comprehensive	Year of Registration: 2018
	Third Party Fire and Theft	Hire Purchase Company: HONG LEONG FINANCE LTD
	Third Party only	Excess: ST 600 (Section I/II Both) ST 100 (Windscreen engine)

Please note that acceptance of the risk is subject to our final acceptance and the terms and conditions applicable to the policy. For important notes and applicable laws and regulations, please refer to the reverse page.

Issued in Singapore

27/12/2018

Date of issuance



Authorised Representative

504599-190

Agent Code

Manik Bucha, Personal Insurance

This insurance is underwritten by AIG Asia Pacific Insurance Pte. Ltd.