

NATIONAL Assessment Centre Services.

(ver 1 Jan'05)

MAH/9006/76

Date In: 15/01/2019 15:26	Job description	Date & Time Completed	Done by
Ref No: NRA/MAH/9000906/4	SAS e-filing		
Veh No: SFP 2782H	E-mail (Within 2hrs, AIC 2hrs)		
D.O.A: 12/01/2019 12:50	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: (Tel:	Fax:
TP Particulars:	Veh No: Ym 9682H	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: ()

General Remarks:	Date In:	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:	Signature:

NA/900423	Invoice Item	Rate	Amount	Remarks
Commitment Particulars:	1) AR: Accident Reporting (\$30)			
Driver/Owner:	2) DA: Damage Assessment (\$100)			INC (\$80)
Contact No:	3) TP: Towing Fee	\$40/\$45		
Damaged Portion:	4) PT: Follow-Through Survey	\$120		
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey)	\$30		
Auditors Comments:	Enrolment 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 / Tpt Allowance	\$3		
	*N6: Repair Co-ordination	\$10		
	*N7: Post Repair Inspection	\$25		
	*N8: DV / Collect Excess Coordination	\$5		
	TP (Nil); 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	15/01/2019 15:26
Date Of Accident	12/01/2019 12:50
Exact Location Of Accident	BLK 616 BEDOK RESERVOIR ROAD CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFP2782H
Insured/Policyholder	
Name Of Registered Owner	SIN YONG HUAT RENOVATION CONTRACTOR
Co Reg No	53042782J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96336977
Alternative Phone No	OFFICE-96336977

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ECLIPSE CROSS-1.5 CVT (A)
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	1800098806
Cover Note Number	

Driver

Name of Driver	KHAW SOON HUAT
NRIC No	S7561785B
Date Of Birth	23/12/1975
Occupation	INDOOR
Date Of Driving Pass	07/06/2005
Driving Experience	13 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96336977
Fax Number	
Contact Number	OTHERS-96336977
Email Address	NOEMAIL

Address	BLK 616 BEDOK RESERVOIR ROAD #09-1120
Postcode	470616
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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: : WONG LEE KWIN (WIFE)/KHAW CHENG SEN(SON) 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

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	YM9682H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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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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.:

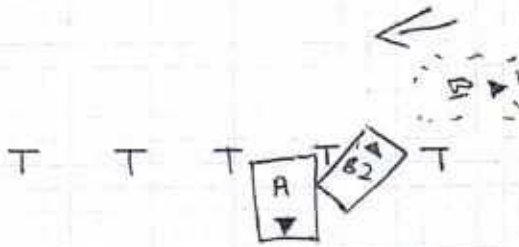
15/01/2019
Rohit Arora

SKETCH PLAN

616 Bedok Reservoir

Vehicle A: SFP2782H

Vehicle B: YM 9682H



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle A was parked stationary.
My wife and son is in the vehicle while I go to my house to
get some stuff. My wife called me and mentioned that Vehicle B
reversed and hit onto my vehicle left portion.

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.:

15/06/2019
Koshi Upthor

(Km 96824)

I, G2872967 M Lifei reverse and knock onto
SFB 27824 Rear Left portion of the Car. We are going
for insurance claim.

Lifei

G2872967m

李飞

80307641

Khaw Soonhuat

575617853

Khaw

96336977

an 15/01/2019
Rose Lim Hoo

Email: sm@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 12/1/2019 (dd/mm/yy) Time of Accident: 12:50 (24-HR-FORMAT)

Vehicle No.: SFP 2782 H Vehicle Make & Model: Mitsubishi ECLIPSE CROSS 1.5

Exact location of Accident: 616 Bedok Reservoir Road

Policyholder's Name / IC No.: SIN YONG HUAT RENOVATION CONTRACTOR 53042782J

Driver's Name / IC No.: Khaw Soon Huat S7561785B (As Above) ☐

Driver's Contact No.: 9633 6977 Company Contact No: _____

Driver's Address: 8 KAKI BUKIT AVENUE 4 #08-42 PREMIER@KAKI BUKIT Singapore 415875

Insurance Company: AIG Email address (if any): _____

Relationship between Owner & Driver: Owner

or Others specify: _____

What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

**Exact purpose for which the vehicle
Was being used at time of accident?**

☒ Private use / ☐ Work purpose

Occupation (nature of job) ☒ Indoor/ ☐ Outdoor

No. of Passengers (Including Driver): 02

Passenger Name : Wife (Wong Lee Kwin)

Gender : Female

Passenger Name : Son (Khaw Cheng Sen)

Gender : Male

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No: _____ Vehicle No: YM 9682 H

Driver's Contact No: _____ Insurance Company (If any): _____

2. Driver's Name / IC No: _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7561785B**




Name
KHAW SOON HUAT

許 順 發

Race
CHINESE

Date of birth
23-12-1975

Sex
M

Country of birth
MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE

IDENTITY CARD NO. **S7561785B**



Name
KHAW SOON HUAT

Birth Date: **23 Dec 1975**

Issue Date: **08 Feb 2012**




0020409338

8771239



NRIC No. **S7561785B**



Nationality
MALAYSIAN

Date of issue
24-04-2006

APT BLK 016 BEDOK RESERVOIR ROAD #09-1120
SINGAPORE 470616


S7561785B **20/09/2013 (R)**

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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	07 Jun 2005
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	07 Jun 2005

NP 428A

Licence No: **S7561785B**





CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Vehicle No. : SFP2762H
Policy No. : 1866096806
Endorsement No. :
Issued Date : 01 Sep 2018

ABOUT THE COVER

Vehicle Model	MITSUBISHI Eclipse Cross 1.5			
Engine Capacity (Litres)	1.499 00 CC	Sum Insured	Market Value	First Year of Registration
Driver Restriction	NA	Off Peak Car	No	2018
Period of Classes of Persons Entitled to Drive*			Insuring with COE/PARE	Yes
<p>* Mr. Pooja and Mr. A. K. are the only persons entitled to drive the vehicle with third party cover. The policy is not extended to the following persons or any authorized driver who is: (i) Under the age of 18 years (ii) Under the age of 25 years and has not attained a minimum sum of \$10,000 in Third Party and Comprehensive Motor Insurance (TP&C) in the previous 12 months (iii) Authorized Driver licensed at an earlier date than the age of 25 years and has not attained a minimum sum of \$10,000 in the previous 12 months.</p>				
Age Condition	All Age Condition			
Condition as to use*	<p>* Only for social, domestic and pleasure purposes and for the Policyholders (Insureds) only. It does not permit use for hire or reward, driving tuition, driving test, racing, state making, identity theft or speed testing. The coverage of goods other than contents is determined with a reference to the Motor Vehicle Policy and is subject to endorsement with Motor Trade.</p>			
Class of Use (ECCO) - Section	<p>Class of Use (ECCO) - Section</p>			
<p>* Insurance developed in compliance with Section 3 of the Motor Vehicle (Third Party Risk and Compensation) Act (No.) 1988 and Section 3 of the Motor Transport Act, 1988 (Malaysia) and not for re-insurance or other reasons.</p>				

EXCESS

Section 1
Frt \$7 Own Damage - \$255 Theft - \$0 Flood Cover - \$0
Section 2
Property Damage - \$0
Windscreen - \$100

Named Driver and Excess (where applicable)

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

On & Carriage Auctioneer Service Centre Add 20 Leng Kee Rd Singapore 159004 64718661
 7 System & Carriage Auctioneer Service Centre (for wine/beer/beer only) Add 339 Lor Pk 3 Singapore 408650 67443000
 7 Civil & Carriage Body & Panel Centre Add 208 Pandan Gardens Singapore 408310 65683501

For other AppleCare Reporting, Camera/iQ Authorized Repairs, please contact our 24-hour customer emergency hotline at +65 6338 4200. Alternatively, you may refer to iQ's website www.iq.com.sg or iQ 5G Mobile App. Simply search and download "iQ 5G" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

(We hereby certify that the policy to which this Certificate of Insurance refers is issued in accordance with the provisions of the Motor Vehicles/Third Party Insurance and Compensation Act (Cap. 180:11) Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicle (Third Party Insurance) Rules, 1959 (Malaysia).

0000-0001-9327-9118

FULCOMPT - SL
22 UBI ROAD 4 FULCO BUILDING
SINGAPORE 408117

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

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AID Act of 1961, Insurance No. 1-10