

# NATIONAL Assessment Centre Services.

(Part 1 Jan 2005)

MAA41900878

Date In: 18/01/2009 18:58	Job description	Date & Time Completed	Done by
Ref No: NBS/0190012491	SAS e-filing		
Veh No: SLH 71922	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 18/01/2009 0655	I-Motor Claim Form		
OD: (11) 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/Wh32		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SGM 1016L	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: ( )

Comments:	INC ( ) / Non-INC ( )	Date: ( )	Time: ( )	Done by:
1) Apply for Transport Allowance ( ) / Courtesy Car ( )				
2) QC Check / Post Repair Inspection ( )				
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )				

Injury:
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Date/Time	Actions

MAA41900610	Invoice for National Assessment Centre Services
Claimant's 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:	For claiming against INC Only (wef 10 Jan 2005)
	6) TR: Re-inspection \$75
	7) NI: Idao DA + SMRT Survey \$160
	8) NTUC Additional Services:-
	ON:
	*N5: Courtesy Car / Tpl Allowance \$35
	*N6: Repair Co-ordination \$10
	*N7: Post Repair Inspection \$25
	*N8: DV / Collect Excess Coordination \$35
	TP (N11): TP (N11) 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	18/01/2019 18:58
Date Of Accident	18/01/2019 06:55
Exact Location Of Accident	TPE TOWARDS CHANGI NEAR LORONG HALUS FLYOVER
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH7192Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HO LIK KOON, EDWIN (HE LIQUN, EDWIN)
NRIC No	S7440060D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96936039
Alternative Phone No	OTHERS-96936039

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	TUCSON-2.0 TL (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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	210091314-02
Cover Note Number	

### Driver

Name of Driver	HO LIK KOON, EDWIN (HE LIQUN, EDWIN)
NRIC No	S7440060D
Date Of Birth	13/12/1974
Occupation	INDOOR
Date Of Driving Pass	01/10/1996
Driving Experience	22 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96936039
Fax Number	
Contact Number	OTHERS-96936039
Email Address	NOEMAIL

Address	BLK 325B SENGKANG EASTWAY #12-651
Postcode	542325
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
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: : HO HENG LENG, CHERYL 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	SJM1016L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN BOON LENG
NRIC/Passport Number	
Contact Number	93260726
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SGJ6762J  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver MS ELLEEN AW  
NRIC/Passport Number  
Contact Number 88121812  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name HO LIK KOON, EDWIN (HE LIQUN, EDWIN)  
Approximate Age  
Injuries Sustain SLIGHT INJURY  
Injured person in which vehicle? SLH7192Z  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

#### DETAILS OF INJURED PERSON 2

Name HO HENG LENG, CHERYL  
Approximate Age  
Injuries Sustain SLIGHT INJURY  
Injured person in which vehicle? SLH7192Z  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode



## SKETCH PLAN


### IMPORTANT NOTICE

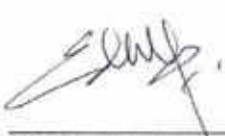
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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.

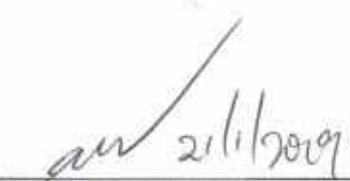
#### **8. Consent under the Personal Data Protection Act (PDPA)**

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.

  
\_\_\_\_\_  
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.:

TRE  
Towards  
Changi  
Near Lor  
Halus  
Flower

A  
C  
A  
A  
B

(A) SLH 71928  
(B) SJM 1016L  
(C) S6J 6762 J

On 18-01-2019 at about 06:55hrs, I was travelling along  
TPE Towards Changi Near Lons Hallus. The traffic was on slow moved.  
Ahead of me, there's a vehicle slow down & stop, I follow suit. While waiting  
all of a sudden I felt an hard impact from the rear. Then I realised  
a vehicle S0M 1016L had collided onto my rear. Due to the hard impact  
my vehicle had moved forward and collided onto S6J6762J. Total  
3 vehicles involved in the accident. That's all.

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

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



# SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 18-01-2019		TIME: 06:55hrs (hh:mm) 24 hrs Format	
LOCATION: TPE Towards Changi Near Loong-Halus Answer			
VEHICLE NUMBER: SLH 7192Z			
INSURED NAME: Ho Lik Koon, Edwin (He Liqun, Edwin)			
NRIC / FIN: S7440060N		CONTACT:	
MAKE: Hyundai TL Tucson		MODEL: 2.0 SLs AT 2ND SR (EPB)	
Are you claiming under your own insurance policy for repair to your vehicle?			
( ) Yes, If No, Pls Select : ( <input checked="" type="checkbox"/> ) Third Party ( ) Reporting Only			
INSURANCE COMPANY: AIG			
TYPE OF POLICY ( <input checked="" type="checkbox"/> ) COMPREHENSIVE ( ) THIRD PARTY ( ) TPFT			
POLICY NUMBER: 2100491314-02			
NAME DRIVER:		( <input checked="" type="checkbox"/> ) SAME AS INSURED	
NRIC / FIN:		CONTACT: 96936039	
DATE OF BIRTH: 13.12.1974			
DRIVING PASS DATE: 01-10-1996			
OCCUPATION: ( <input checked="" type="checkbox"/> ) INDOOR ( ) OUTDOOR			
GENDER: ( <input checked="" type="checkbox"/> ) MALE ( ) FEMALE			
EMAIL ADDRESS: ( ) NO EMAIL			
ADDRESS OF DRIVER: 325B Sengkang East Way #12-651 S(542325)			
Number Of Passenger Include Driver: 2pax include			
(1) Driver			
(2) Ho Heng Leng, Gwendolyn (female)			
Was driver an employee of the Insured's Company? ( ) YES ( ) NO			
If No, Relationship Of The Driver With The Insured			
( <input checked="" type="checkbox"/> ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling ( ) Others			
Does The Driver Own Any Other Vehicle? : ( ) YES ( <input checked="" type="checkbox"/> ) NO			
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:			
Insurance Company Of Driver's Own Vehicle			
Weather Conditions: ( ) Clear ( <input checked="" type="checkbox"/> ) Raining ( ) Drizzling ( ) Others			
Road Surface : ( ) Dry ( <input checked="" type="checkbox"/> ) Wet ( ) Others			
Was Any Foreign Vehicle Involved In This Accident? ( ) YES ( <input checked="" type="checkbox"/> ) NO			
Was Anybody Injured In The Accident? ( <input checked="" type="checkbox"/> ) YES ( ) NO			
If YES, Injured details :			
Convey By Ambulance: ( ) YES ( <input checked="" type="checkbox"/> ) NO			
Was There Any Video Capture By Car Camera? ( ) YES ( <input checked="" type="checkbox"/> ) NO			
Was There Accident Reported To The Police? ( ) YES ( <input checked="" type="checkbox"/> ) NO If Yes Attach Police Report			
Police Report Number (if any)			
Details Of 3rd Party			
	Name / NRIC	No. of Paxs (incl'driver)	Contact
Veh B	87M 1016L Tan Boon Leng	( ) / Not Sure ( )	9326 0726
Veh C	SGJ 6762J Ms Ellen Aw	( ) / Not Sure ( )	8812 1812
Veh D		( ) / Not Sure ( )	
Veh E		( ) / Not Sure ( )	
Veh F		( ) / Not Sure ( )	
Veh G		( ) / Not Sure ( )	

**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number: **S7440060D**  
 Name: **HO LIK KOON, EDWIN**  
 (HE LIQUN, EDWIN)

Birth Date: **13 Dec 1974**  
 Issue Date: **02 Oct 2003**

000884352F

**REPUBLIC OF SINGAPORE**  
 IDENTITY CARD NO. **S7440060D**



Name: **HO LIK KOON, EDWIN**  
 (HE LIQUN, EDWIN)  
 何立群

Race: **CHINESE**

Date of Birth: **13-12-1974** Sex: **M**

Country of Birth: **SINGAPORE**

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: **01 Oct 1996**

NP 428A

Licence No: **S7440060D**

2741227



NRIC No: **S7440060D**



Blood Group: **O+** Date of issue: **24-11-1995**

APT BLK 325B SENGKANG EAST WAY #12-B51  
 SINGAPORE 542325

NRIC No: **S7440060D** Date: **10-10-2004** (M) No: **5091319**





# CERTIFICATE OF INSURANCE

## HYUNDAI AUTO PROTECTOR (DELUXE) PRIVATE VEHICLE

Name of Policyholder : Ho Lik Koon Edwin  
Period of Insurance : 17 Nov 2018 To 16 Nov 2019  
Engine No. : G4NAGU239318  
Chassis No. : KMHJ3813MHU292815

Vehicle No. : SLH7192Z  
Policy No. : 2100491314-02  
Endorsement No. :  
Issued Date : 04 Oct 2018

### ABOUT THE COVER

Make/Model : HYUNDAI NEW TUCSON 2.0  
Engine Capacity/Tonnage : 1,998.00 CC  
Driver Restriction : NA  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2016  
Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive\* :

a) The Policyholder

b) Any other person who is driving on the Policyholder's order or with his/her permission.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 years old and above

Limitation as to use\* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

### EXCESS

#### Section 1

Fire - \$0 Own Damage - \$0 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$0

Named Driver and Excess (where applicable)

Ho Lik Koon Edwin

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

1. Kamoco Motors Pte Ltd Add: 253 Alexandra Road Singapore 159938 64735588.

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500706000

RTMT MOTOR PTE LTD

61 UBI AVENUE 2 #01-06 AUTOMOBILE MEGAMART

SINGAPORE 408898 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.  
AUTHORISED REPRESENTATIVE

SSP/MSA

## &gt; Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

## Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	0060D

## Vehicle Details

Vehicle No.:	SLH7192Z
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Jan 2019
Vehicle Make:	HYUNDAI
Vehicle Model:	TL TUCSON 2.0 GLS AT 2WD SR (EPB)
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	G4NAGU239318
Chassis No.:	KMHJ3813MHU292815
Maximum Power Output:	114.0 kW (152 bhp)
Open Market Value:	\$21,620.00
Original Registration Date:	17 Nov 2016
First Registration Date:	17 Nov 2016
Transfer Count:	0
Actual ARF Paid:	\$22,268.00

## Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Nov 2026
PARF Rebate Amount:	\$16,701.00

## Intended COE Rebate Details

COE Expiry Date:	16 Nov 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$56,206.00
COE Rebate Amount:	\$43,809.00
<b>Total Rebate Amount:</b>	<b>\$60,510.00</b>

The information contained herein is correct as at 18 Jan 2019

OK