

NATIONAL Assessment Centre Services.

(ref 1 Jan 09)

NA/190/12115

Date In: 25/01/2019 14:30	Job description	Date & Time Completed	Done by
Ref No: NA/190/12115	SAS e-filing		
Veh No: SM 8204K	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 24/01/2019 18:50	I-Motor Claim Form		
OD: TP 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/Whar		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SJB 5279B	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: ()

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NA/190/123	Invoice Particulars	Amount	Amount
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) FT: Follow-Through Survey \$120		
Auditors Comments:	5) FT: Follow-Through Survey (Resurvey) \$30		
Ref 1:	For claiming against INC Only (ref 10 Jan 2009)		
2/3:	6) TR: Re-inspection \$75		
	7) NI: Idas DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Coordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	*N9: TP (Nil) / TP (Nil) against INC \$20		
	9) N12: Idas 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	25/01/2019 14:20
Date Of Accident	24/01/2019 18:50
Exact Location Of Accident	ALONG DUNEARN ROAD BEFORE BALMORAL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM8304K
Insured/Policyholder	
Name Of Registered Owner	VINCAR LEASING AND RENTAL PTE LTD
Co Reg No	-
Email Address	ROCKERAJAK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91442523
Alternative Phone No	OFFICE-91442523

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	999994528
Cover Note Number	

Driver

Name of Driver	WAN AZAHARI BIN WAN ABU BAKAR
NRIC No	S7731250A
Date Of Birth	11/11/1977
Occupation	OUTDOOR
Date Of Driving Pass	30/11/2001
Driving Experience	17 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91442523
Fax Number	
Contact Number	OTHERS-91442523
Email Address	ROCKERAJAK@GMAIL.COM

Address	BLK 666 WOODLANDS RING ROAD #02-319
Postcode	730666
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	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: : PASSENGER GENDER: : MALE

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	SJB5279B
Vehicle Make/Model/Colour	BMW X4
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LAI LEE THENG
NRIC/Passport Number	S7771657B
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.

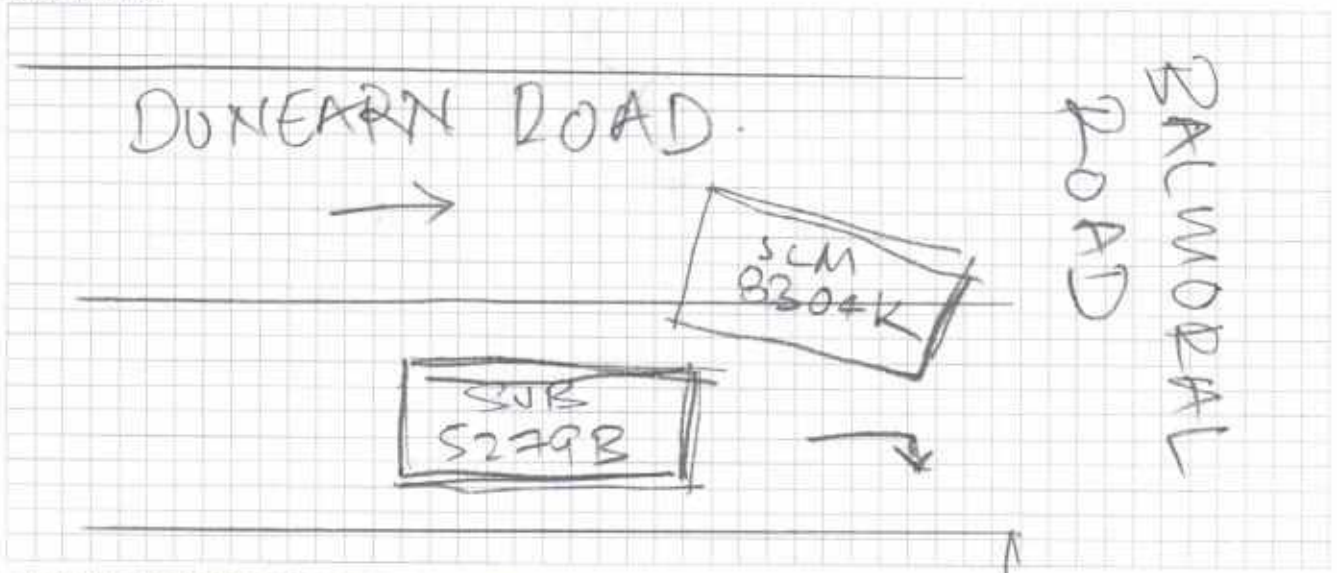


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Dunearn Road towards Newton Flyover and was approaching Balmoral Road junction, as I was in the middle lane and I want to turn right at Balmoral junction, I signal right to show my intention. After signalling and seeing that the car on my right is not moving, I proceed to filter into the right lane. Upon seeing me cutting into her lane, she speed up and hit the back of my car.

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: 25/01/2019
1138

Reporting Centre Personnel's Signature
Name: Roshni
NRIC/FIN No.: 25/01/2019

ACCIDENT STATEMENT

ACCIDENT DATE: (24/01/2019) (DD/MM/YYYY). TIME: (18:50) (HH:MM)

LOCATION: Dunearn Road. B/F Balmohan Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLM 8309K
 b) INSURANCE COMPANY: BLK
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Honda Vezel
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Private Hire
 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: Vincent (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: WANI AZAHARI (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S993120A CONTACT: 91942523
 c) ADDRESS: BK 666 Woodlands Ring Road

* d) DATE OF BIRTH: (11/11/1977) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 30 NOV 2001

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hirer

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: S0BS277B MODEL: BMW X4
 b) DRIVER'S NAME: Lai Keng
 c) NRIC/FIN/PASSPORT: 7771657B CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Pax (m)

* No of passengers
 (including driver)
 (1)

* No of passenger
 (including driver)
 ()

* No of passenger
 (including driver)
 ()

Email = rockera@pr@gmail.com

VIDEO

NIGHT

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7731250A



Name

WAN AZAHARI BIN WAN ABU
BAKAR

Race

MALAY

Date of birth

11-11-1977

Country/Place of birth

SINGAPORE

Sex

M



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S7731250

WAN AZAHARI BIN WAN ABU
BAKAR

Birth Date 11 Nov 1977

Issue Date 03 Dec 2003



Land Transport Authority



VOCATIONAL LIC



License No. S7731250A

Name WAN AZAHARI BIN WAN
ABU BAKAR

Issue Date : 22/1/2008

Expiry Date : 21/1/2011

5355311



MFRIC No. S7731250A



Date of issue
14-07-2014

Address

APT BLK 666 WOODLANDS RING ROAD
#02-319
SINGAPORE 730666



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	22/01/2008
03	BUS VL	06/12/2005





HOTLINE TEL: (65) 6419-3000
FAX: (65) 6415-3723

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, 1959 (MALAYSIA)

M Z 400

(The below excess is subject to GST)

COMPREHENSIVE	COMMERCIAL MOTOR	POLICY EXCESS	S\$2000.00 (Sect I)
CERTIFICATE NO.	SLM8304K	WINDSCREEN EXCESS	S\$100.00
POLICY NO.	999994528		

- 1) VEHICLE REGISTRATION NO.
2) NAME OF INSURED
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT
4) DATE OF EXPIRY OF INSURANCE
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

SUM INSURED Market Value
INSURING WITH COE/PARF Yes
SLM8304K
Vincar Leasing and Rental Pte Ltd

19 July 2018
18 July 2019

Any person who is driving on the insured's order or with their permission.

S\$2,000.00 Section I & S\$2,000.00 Section II Excess is applicable for driver who is above 22 years old with minimum 2 years driving experience.

The policy does not cover drivers who are below 22 years old and/or with less than 2 year driving experience.

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.

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 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.

LOSS OF USE Not Included

HIRE PURCHASE COMPANY MAYBANK

*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 18 Jul 2018

AIG Asia Pacific Insurance Pte. Ltd.

501980-000
Vincar Pte Ltd
No. 1 Chang Charn Road
#05-02 OC Building
Singapore 159630

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPOEC