

NATIONAL Assessment Centre Services

19013542

Date In: 2/10/2015 09:45	Job description	Date & Time Completed	Done by
Ref No: NGA/19013542/1	SAS e-filing		
Veh No: SDD 683K	E-mail (e-judge sheet, AIC sheet)		
D.O.A: 28/01/2015 15:15	I-Motor Claim Form		
OID: (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/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ()	Tel: ()	Fax: ()
TP Particulars: Vch No: SJP 1267M	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: ()	Date 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	Action

Claims Particulars:	1) AR: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$50)	
Contact No:	3) TP: 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)	
Est. 1:	6) TR: Re-inspection \$75	
Est. 2/3:	7) NI: Idao DA + SMRT Survey \$160	
	8) NTUC Additional Services:	
	OD:	
	* N5: Courtesy Car / Tpl 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	
	* 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	29/01/2019 09:45
Date Of Accident	28/01/2019 15:15
Exact Location Of Accident	JUNCTION OF LOWER DELTA ROAD AND JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDD683K
Insured/Policyholder	
Name Of Registered Owner	NEI L PING
NRIC No	S0273252A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98310967
Alternative Phone No	OTHERS-96758771

Vehicle Particulars

Manufacturer	LEXUS
Model	GS350-3.5 (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	2100307736-06
Cover Note Number	

Driver

Name of Driver	ONG AH NGUK @ WONG AH NGUK
NRIC No	S0240676D
Date Of Birth	08/02/1947
Occupation	INDOOR
Date Of Driving Pass	09/03/1984
Driving Experience	34 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96758771
Fax Number	
Contact Number	OTHERS-98310967
EMail Address	NOEMAIL

Address	67 WATTEN VIEW
Postcode	287201
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJP1267M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG ZHANG JUN
NRIC/Passport Number	S8737568D
Contact Number	94575325
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

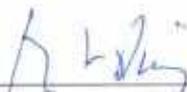
SKETCH PLAN

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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.

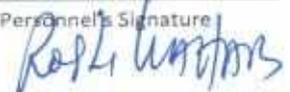


Policyholder's Signature
Date & Time:

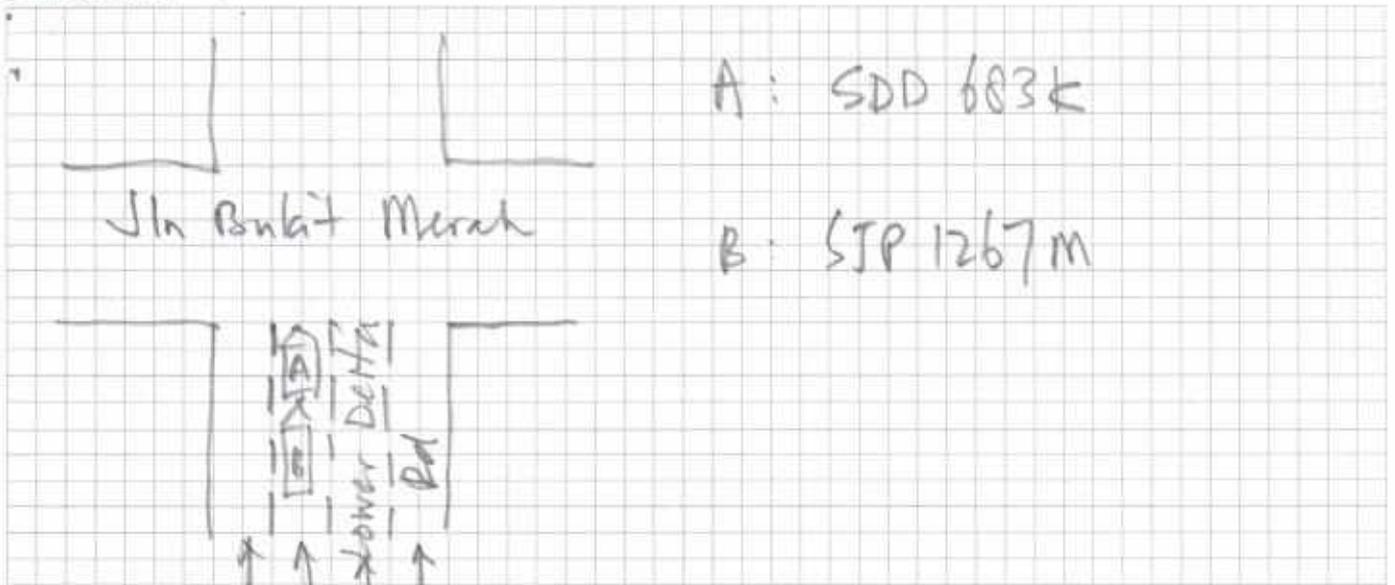


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28/1/19 @ 1515 hrs, I was travelling along Lower Delta Rd to River Valley.

At the red light junction (Lower Delta Rd & Jln Bukit Merah) the traffic light was RED. I stopped and my vehicle was stationary when suddenly I felt an impact in the rear.

I was shaken by the impact and seconds later I alighted from my vehicle and realised the vehicle behind me STP 1267M rear-ended my vehicle.

My vehicle was damaged as a result of the accident.

DECLARATION

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

[Signature]
Policyholder's Signature
Date & Time:

[Signature]
Driver's Signature
(if driver is not the policyholder)
Date & Time:

[Signature] 29/01/2019
Reporting Centre Personnel's Signature
Name: *[Signature]*
NRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 28/1/19	TIME: 1515	(hh:mm) 24 hrs Format	
LOCATION Junction of Lower Delta Rd & Jln Bukit Merah			
VEHICLE NUMBER SDD 683K			
INSURED NAME Nei Ping			
NRIC / FIN S0273252A	CONTACT: 98310967		
MAKE Lexus	MODEL LS 350		
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 : 2100307736-06			
NAME DRIVER : Ong Ah Ngut () SAME AS INSURED			
NRIC / FIN S0240676D S0240676D	CONTACT: 96758771 /		
DATE OF BIRTH: 8/2/47			
DRIVING PASS DATE :			
OCCUPATION : (<input checked="" type="checkbox"/>) INDOOR () OUTDOOR			
GENDER : () MALE (<input checked="" type="checkbox"/>) FEMALE			
EMAIL ADDRESS: () NO EMAIL			
ADDRESS OF DRIVER: 67 Watten View (287201)			
Number Of Passenger Include Driver: 1 driver Only			
Was driver an employee of the Insured's Company? () YES (<input checked="" type="checkbox"/>) NO			
If No, Relationship Of The Driver With The Insured			
() Owner (<input checked="" type="checkbox"/>) 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: (<input checked="" type="checkbox"/>) Clear () Raining () Drizzling () Others			
Road Surface : (<input checked="" type="checkbox"/>) Dry () Wet () Others			
Was Any Foreign Vehicle Involved In This Accident? () YES (<input checked="" type="checkbox"/>) NO			
Was Anybody Injured In The Accident? () YES (<input checked="" type="checkbox"/>) NO			
If YES, Injured details :			
Convey By Ambulance: () YES (<input checked="" type="checkbox"/>) NO			
Was There Any Video Capture By Car Camera? (<input checked="" type="checkbox"/>) YES () 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 SJP1267M	Ng Zhong Jun	() / Not Sure ()	94575325
Veh C	S8737568B	() / Not Sure ()	
Veh D		() / Not Sure ()	
Veh E		() / Not Sure ()	
Veh F		() / Not Sure ()	
Veh G		() / Not Sure ()	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0240676D



Photo



ONG AH NGUK
@WONG AH NGUK

黄爱玉

Race

CHINESE

Date of Birth

08-02-1947

Court of Birth

SINGAPORE

Sex

F

1490700



133358

NRIC# S0240676D



Foot Group

O*

Card No.

08-10-1003

Address

67 WATTEN VIEW
SINGAPORE 1128



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

Motor Cars PASS DATE: 09 Mar 1904

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

NP 428A



License No: S0240676D

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0273252A



NEI I PING
倪一平
CHINESE
Date of Birth: 23-02-1948 M
Country of Birth: SINGAPORE



1233347



NEI I PING S0273252A



Blood Group: B+ Date of Issue: 08-10-1993

Address:
67 WATTEN VIEW
SINGAPORE 112B

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Nel I Ping
Period of Insurance : 18 Jul 2018 To 17 Jul 2019
Engine No. : 2GR8764330
Chassis No. : JTHBE1BL705011778

Vehicle No. : SDD683K
Policy No. : 2100307736-06
Endorsement No. :
Issued Date : 14 Jun 2018

ABOUT THE COVER

Make/Model : LEXUS GS350
Engine Capacity/Tonnage : 3,456.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2012
Insuring with COE/PARF : 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 'Young and/or Inexperienced Driver Excess' ('YIDR') if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

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 Optional

* 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 - \$1300 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Nel I Ping - \$1300 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.

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 or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: CITIBANK SINGAPORE

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).

0030211313

AIG - AUTO DIRECT
 78 SHENTON WAY #07-16 AIG BUILDING
 SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	3252A
Vehicle Details	
Vehicle No.:	SDD683K
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Feb 2019
Vehicle Make:	TOYOTA
Vehicle Model:	LEXUS GS350 LUXURY AUTO
Primary Colour:	Black
Manufacturing Year:	2012
Engine No.:	2GR8764330
Chassis No.:	JTHBE1BL705011778
Maximum Power Output:	233.0 kW (312 bhp)
Open Market Value:	\$64,609.00
Original Registration Date:	18 Jul 2012
First Registration Date:	18 Jul 2012
Transfer Count:	0
Actual ARF Paid:	\$64,609.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Jul 2022
PARF Rebate Amount:	\$41,995.00
Intended COE Rebate Details	
COE Expiry Date:	17 Jul 2022
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$82,289.00
COE Rebate Amount:	\$27,805.00
Total Rebate Amount:	\$69,800.00

The information contained herein is correct as at 29 Jan 2019

OK