

# NATIONAL Assessment Centre Services. part 1 Jan 2005 MUA 119028916.

Date In: 4/3/19 09:40	Job description	Date & Time Completed	Done by
Ref No: NAI AIG19003920144	SAS e-filing		
Veh No: 680 917 K	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 1/3/19 10:10	I-Motor Claim Form		
OD: <input checked="" type="checkbox"/> Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: GT 9712 G	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 repaler.

( ) Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

Remarks: (INC Routine: 6788 6616)

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

Injury: \_\_\_\_\_

Date/Time	Actions

NAI 901662	Invoice Preparation Checklist	Am (S)	Adj (S)
Claimant's Particulars:	1) AR: Accident Reporting (\$30);	30.00	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: Towing Fee 540/545		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Bgr-In-Charge):	5) FT: 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 / 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: 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	04/03/2019 09:40
Date Of Accident	01/03/2019 10:10
Exact Location Of Accident	CTE TWDS CITY B4 BRADDELL EXIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBD917K
Insured/Policyholder	
Name Of Registered Owner	HAN FONG ALUMINIUM PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97843227
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	2100374623-04
Cover Note Number	-
Driver	
Name of Driver	KANG HAN CHENG
NRIC No	S1294220F
Date Of Birth	25/11/1958
Occupation	OUTDOOR
Date Of Driving Pass	01/07/1977
Driving Experience	41 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97843227
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 313 TAMPINES ST 33 #11-28
Postcode	520313
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JHG1816 (PRIVATE CAR)
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 108 SERANGOON NORTH AVENUE 1 #01-709 , <b>POSTCODE:</b> 550108 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2849999 - <b>FAX NO:</b> 63431742
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### 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	GT9712G
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)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

JHG1816

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)

#### DETAILS OF INJURED PERSON 1

Name

KANG HAN CHENG

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

GBD917K

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.:

SKETCH PLAN

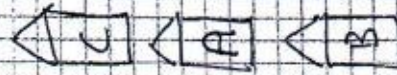
CTE TOWARDS CITY BEFORE BRADDELL

ROAD EXIT

A: GBD 917K

B: GT 9712G

C: JHG 1816



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time I (GBD 917K) was travelling on CTE towards city. As I was in the jam the front vehicle stop I follow suit. Suddenly I felt an impact from the back as the impact force me to move forward and hit to the front vehicle. I alighted and found out it was a three car chain collision.

DECLARATION

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

Policyholder's Signature  
Date & Time:

61ARMC SketchPlanForm\_V3

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

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



Date of Accident : 01/03/2019 Accident Time: 10:10 (24-HR-Format)  
 Accident Place : CTE TOWARDS CITY BEFORE BRADDELL  
 Vehicle No. (Car Plate No.) : GSD 917K Make/Model: TOYOTA / DYNA  
 Insurance Company : AIG Policy No: 2100374623-04  
 Owner or Company Name /IC No. : HAN FONG ALUMINIUM PTE LTD  
 Owner or Company Contact No. : \_\_\_\_\_ Owner's Hp 9784 3227 Company Tel \_\_\_\_\_  
 DRIVER'S Name / IC No. : KANG HAN CHEN / 51294220F  
 DRIVER'S Date Of Birth : 25/11/1958 DRIVER'S License Pass Date 01/07/1977  
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
 DRIVER'S Address : BLK 313 TAMPINES ST33 #11-28 SPODE (S2033)  
 DRIVER'S Contact No. / Alt No. : 1) 9784 3227 2) \_\_\_\_\_  
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
 Email Address : \_\_\_\_\_  
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
 Number of Passengers (Including Driver): 01

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Any Injury (If YES, Pls state): Yes. Driver 2 days MC

Other Party Driver's Particular (if any)

C:	B:
Vehicle No: <u>3H4 1816</u>	Vehicle No: <u>GT 9712 9</u>
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:



# SINGAPORE POLICE FORCE



T/20190301/2091

Police Station Of Origin:  
Serangoon North NPP  
108 Serangoon North Ave 1 #01-709  
SINGAPORE 550108  
Tel No: 1800-2849999

1 of 3

Report No. T/20190301/2091

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/03/2019 14:35		Vide Report No.:		Station Diary No.: 16	
<b>Informant's Particulars</b>					
Name of Informant: KANG HAN CHENG			Address: APT BLK 313 TAMPINES STREET 33 #11-28 SINGAPORE 520313		
ID Type / ID No.: NRIC NO / S1294220F			Contact No.: Home/Office: Mobile: 97843227		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 60	Date of Birth: 25/11/1958	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Company director			Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 01/03/2019 10:10	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY				
Towards City before Braddell Rd exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD917K	Lorry				Slightly Damaged	0
GT9712G	Van				Slightly Damaged	0
JHG1816	Car				Slightly Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20190301/2091

Police Station Of Origin:  
Serangoon North NPP  
108 Serangoon North Ave 1 #01-709  
SINGAPORE 550108  
Tel No: 1800-2849999

2 of 3

Report No. T/20190301/2091

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	KANG HAN CHENG	ID No.	S1294220F
Related Vehicle	GBD917K (Lorry)	Contact No.	97843227
Hospital/Clinic	INTEMEDICAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	01/03/2019	Date Discharge	01/03/2019
No. of Days granted Medical Leave	02	Degree of Injury	Slight

**Brief Details.**

On 01/03/2019 at about 1010hrs, I was driving my lorry GBD917K along CTE towards City on the 4th lane. Somewhere before Braddell Rd exit, there was a traffic congestion and the front vehicle, JHG1816, stopped and I follow suit. Suddenly, I felt an impact from the rear of my lorry. The impact caused my lorry to move forward and hit onto the front vehicle. I alighted to make a check and a van GT9712G had hit onto the rear of my lorry which caused a chain collision. I went to seek medical treatment at InteMedical (Ang Mo Kio) and was given 2 days of MC.



**SINGAPORE  
POLICE FORCE**



T/20190301/2091

Police Station Of Origin:  
Serangoon North NPP  
108 Serangoon North Ave 1 #01-709  
SINGAPORE 550108  
Tel No: 1800-2849999

3 of 3

Report No. T/20190301/2091

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

F /

Sgt 3 AIMAN BIN MUHAMAD SALEH

SN 154

Signature:

Signature Of Interpreter:

Not applicable Singapore Police Force

Officer In Charge Of Case:

TP / AEIT /

SSI 2 YEO GEAK ENG CECILIA

Contact No.: 65476404

Signature Of Informant:

Date/Time:

01/03/2019 14:35

Classification Of Case:

Authentication Stamp

NP168



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1294220F



Name

KANG HAN CHENG

Race

CHINESE

Date of birth

25-11-1958

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE

DRIVING LICENCE



Licence Number

S1294220F

Name

KANG HAN CHENG

Birth Date: 25 Nov 1958

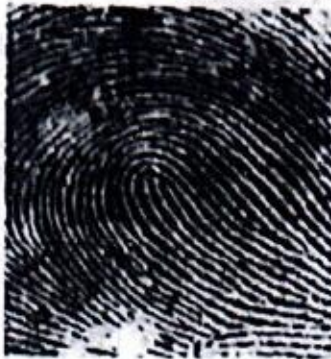
Issue Date: 08 Mar 2012



002048019B



4168594



NRIC No. S1294220F



Date of issue  
14-01-2008

Address

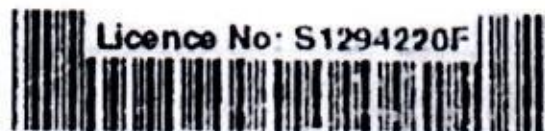
APT. BLK 313 TAMPINES STREET 33  
#11-28  
SINGAPORE 520313

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

## EFFECTIVE DATE

Class 2B	Motorcycles $\leq 200$ cc	04 Nov 1978
Class 2A	Motorcycles between 201 cc and 400 cc	04 Nov 1978
Class 2	Motorcycles $> 400$ cc	04 Nov 1978
Class 3	Motor Cars $\leq 3000$ kg with $\leq 7$ passengers, exclusive of the driver; and other motor vehicles $\leq 2500$ kg	01 Jul 1977
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight $> 2500$ kg *Motor vehicles which are not constructed to carry load and the unladen weight $< 7250$ kg	25 Mar 1981
Class 5	Motor vehicles not constructed to carry any load and the unladen weight $> 7250$ kg	02 Jun 1981

NP 428A



Licence No. S1294220F





# CERTIFICATE OF INSURANCE

## COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : Han Fong Aluminium Pte Ltd  
Period of Insurance : 04 Jun 2018 To 03 Jun 2019  
Engine No. : 1KD2400579  
Chassis No. : JTFAT35YX0K203047

Vehicle No. : GBD917K  
Policy No. : 2100374623-04  
Endorsement No. :  
Issued Date : 24 May 2018

### ABOUT THE COVER

Make/Model : TOYOTA DYNA 150D 2 ton (Lorry)  
Engine Capacity/Tonnage : 2 Tonnage  
Driver Restriction : NA  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2014  
Insuring with GOE/PAFF : Yes

#### Person or Classes of Persons Entitled to Drive\*

- a) Any person who is driving on the Policyholder's order or with their permission.  
b) 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 Inexperienced Driver Excess" (YIDEX) 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\*

- is in connection with the Policyholder's business  
1. Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.  
2) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace making, reliability trial or speed testing, and b) use whilst towing a trailer except the towing of any disabled vehicle using a mechanically propelled vehicle. c) use for any purpose in connection with Motor Trade.

\* 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 - \$800 Theft - \$0

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

### APPROVED REPORTING CENTRES/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 6336 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: HONG LEONG FINANCE LTD

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).

0030210534

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

storey