

# NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

Date In: 28/05/19	Job description	Date & Time Completed	Done by
Ref No: NA/A161900525/13	SAS e-filing		
Veh No: 5MG62675	E-mail (within 8hrs, AIC 2hrs)		
DOA: 27/02/19 1630	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: 5J58332X	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%; F: 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:- (INC hotline: 6788 6616)	Date & 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	Actions

NA1900274	<b>Invoice Preparation Checklist</b>	Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: 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		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*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: Idac Mobile 30		
Auditors' Comments :-	Invoice dated	Fee Charged	
Cat. 1:	Invoice dated	Fee Charged	
Cat. 2 / 3:			



## 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	28/03/2019 12:20
Date Of Accident	27/03/2019 16:30
Exact Location Of Accident	GRANGE ROAD(NO 82 THE COLONNADE)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMG6267S
Insured/Policyholder	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	201533046C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83802233
Vehicle Particulars	
Manufacturer	HONDA
Model	SHUTTLE
Exact Purpose for which vehicle was being used at time of accident	CHAUFFEUR
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 HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994387
Cover Note Number	
Driver	
Name of Driver	PETER TAN SWEE HUAT
NRIC No	S1800876I
Date Of Birth	13/01/1967
Occupation	OUTDOOR
Date Of Driving Pass	12/07/1990
Driving Experience	28 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91911313
Fax Number	
Contact Number	
Email Address	PETERTAN13@GMAIL.COM

Address	BLK 642 HOUGANG AVE 8 #03-185
Postcode	530642
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	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?	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: : UNKNOWN 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

PLS REFER TO THE ATTACHED STATEMENT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD FAULTY
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJS8332X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KAMSANI BIN KEMAT
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name PETER TAN SWEE HUAT

Approximate Age

Injuries Sustain SLIGHT

Injured person in which vehicle? SMG6267S

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:

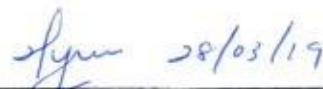
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

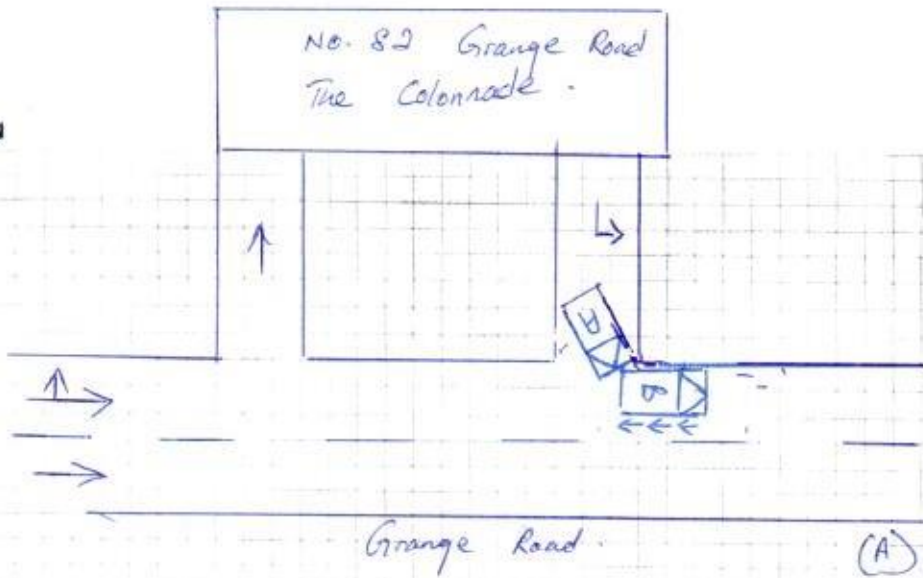


Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



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

**SKETCH PLAN**



(A) SMG 6267S.  
(B) SJ8 8332X.

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

On 27/03/19 at @ 1630hrs, after picking up my passengers at No. 82, Grange Road (The Colonnade). I was waiting to turn left onto Grange Road. I checked there was no oncoming traffic, as I was about to move out, suddenly, a car (SJ8 8332X) reversed and collided onto the front portion of my vehicle (SMG 6267S).

**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.:



<b>Vehicle No.</b>	SMG 6267 S.	Model / Make	Honda Shuttle.
Date of Accident	27/03/19.		
Time of Accident	1630 HRS		
Location of Accident	Grange Road (No. 82 The Colonnade)		
Exact purpose use during accident	Chauffeur		
<b>Name of Owner</b>	Twincar Leasing Pte Ltd.		
Telephone No.	H/P : 8380 2233	Home :	Office :
NRIC	201533046C		
Address	2, Kaki Bukit Ave 2 #01-17, Kaki Bukit Autocub, (S) 417921		
Claim type	OD <u>THIRD PARTY</u> REPORTING ONLY		
Insurance Company	AIG		
Type of Coverage	<u>Comprehensive</u> Third Party Third Party / Fire / Theft		
Policy No.	999994387		
<b>Name of Driver</b>	As Above If No, Peter Tan Swee Huat		
NRIC	S1800876 I	Any Passengers :	01 (F)
Date of birth	13/01/1967		
Occupation	<u>Outdoor</u> / Indoor		
Driving License Pass Date	12/07/1990		
Gender	<u>Male</u> / Female		
Contact No.	H/P : 9191 1313	Home :	Office :
Address	BLK 642 Hanyang Ave 8 #03-185 (S) 530642		
Driver have any own vehicle	<u>No</u> , If yes, Reg No.		
Relationship	Employee, If no, state <u>Agree</u>		
Weather condition	<u>Clear</u> Raining Other		
Road Surface	<u>Dry</u> Wet Other		
Any Injuries	No, <u>If Yes, Who?</u>		
Name And Contact No.	Peter Tan Swee Huat		
Name And Contact No.			
Police Report	<u>No</u> , If Yes, Where?		
<b>Vehicle B No.</b>	SJS 8332 X	Any Passengers :	N.A.
Name of Driver	Kamsai Bin Kemat	Contact No. :	
<b>Vehicle C No.</b>		Any Passengers :	
<b>Vehicle D No.</b>		Any Passengers :	
<b>Vehicle E no.</b>		Any Passengers :	
<b>Vehicle F No.</b>		Any Passengers :	
<b>Vehicle G No.</b>		Any Passengers :	
Witness Name	N.A	Witness Contact :	N.A.
<b>Accident Portion</b>	Front Portion		
Camera Recorder	<u>Yes</u> / No 30 Card faulty		
Email Address	petertan13@gmail.com		
<b>PARTICULAR WORKSHOP</b>	N-51		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Huixin		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg		



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

License Number: **S18008761**

Name: **PETER TAN SWEE HUAT**

Birth Date: **13 Jan 1967**

Issue Date: **17 Mar 2003**

000230828H

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S18008761**

Name: **PETER TAN SWEE HUAT**

Race: **CHINESE**

Date of Birth: **13-01-1967**

Country of Birth: **SINGAPORE**

Sex: **M**

**Land Transport Authority**

**VOCATIONAL LICENCE**

License No: **S18008761**

Name: **PETER TAN SWEE HUAT**

Card Issue Date: **18/09/2017**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES**

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	07 Nov 1988
Class 2A	Motorcycles between 201 cc and 400 cc	02 Nov 1988
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	12 Jul 1990

NP 428A

License No: **S18008761**

NPIC No: **S18008761**

APT BLK 642 HOUGANG AVENUE 8 #03-125  
SINGAPORE 530642

NPIC No: **S18008761**

Card Issue Date: **08/05/2016**

This card is not transferrable to any other person. It is the property of the Land Transport Authority (LTA). It must be returned to LTA when it expires or is lost.

Description	Is
PRIVATE HIRE CAR VL	PDVL/TDVL
BUS VL	18, 271759
BUS ATTENDANT	16/05/2016

Barcode





HOTLINE TEL: (65) 6419-3000

## 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 2 400

COMPREHENSIVE		COMMERCIAL MOTOR		(The below excess is subject to GST)	
CERTIFICATE NO.	SMG6267S	POLICY EXCESS		S\$2000.00 (Sect I & II)	
POLICY NO.	999994387	WINDSCREEN EXCESS		S\$100.00	
1) VEHICLE REGISTRATION NO.		SUM INSURED	YES		
2) NAME OF INSURED		INSURING WITH COE/PARF	YES		
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		SMG6267S			
4) DATE OF EXPIRY OF INSURANCE		Twincar Leasing Pte Ltd			
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*		27 December 2018			
		18 October 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 between 23 years to 65 years old with minimum 2 years driving experience in Singapore.					
Up to \$250.00 one-time waiver excess under section I for build in car camera and applicable on non at fault claim only. (Valid for 6 months).					
Accident repair can be carried out at any of your preferred workshop for repair subjected that all claim matters does not involved any lawyer services.					
An additional excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.					
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.					
It is hereby agreed and acceptance that we would make special arrangement to this workshop known as N-51 Automotive Pte Ltd to be your accident claim reporting center based on the conditions below.					
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 15 Jan 2019

AIG Asia Pacific Insurance Pte. Ltd.

Swift Link Insurance Agency - 502117

61 Ubi Avenue 2

#08-04A Automobile Megamart

Singapore 408898

  
AUTHORISED REPRESENTATIVE

ORIGINAL

SSPOEC

## Register New Vehicle (Acknowledgement)

### Vehicle Particulars

Vehicle No.:	SMG6267S		
Vehicle Type:	Z11 - Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	HONDA	Vehicle Model:	SHUTTLE HYBRID 1.5 AUTO
Chassis No.:	GP72000813	Engine No.:	LEB7101198
Motor No.:	H13801205	Trailer Chassis No.:	-
Propellant:	Petrol-Electric	Passenger Capacity:	4
Engine Capacity:	1496 cc	Power Rating:	22.0 kW
Maximum Power Output:	101.0 kW ( 135 bhp )		
Unladen Weight:	1190 kg	Maximum Laden Weight:	1465 kg
Primary Colour:	White	Secondary Colour:	-
First Registration Date:	27 Dec 2018	Original Registration Date:	27 Dec 2018
Manufacturing Year:	2018	Open Market Value:	\$22,712.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$6,898.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$20,000.00 (100%), next \$2,712.00 (140%)
Actual ARF Paid:	\$13,797.00		

### Owner Particulars

Owner Name:	TWINCAR LEASING PTE LTD
Owner ID Type:	Company
Owner ID:	201533046C
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block /House No.:	2
Registered Street Name:	KAKI BUKIT AVENUE 2
Registered Unit No.:	# 01 - 17