

# NATIONAL Assessment Centre Services.

Part 1 Jan 2003

MA119043704

Date In: 4/4/19 11:54	Job description	Date & Time Completed	Done by
Ref No: MA1AIG190059631A4	SAS e-filing		
Veh No: 5G2 9898 Y	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 3/4/19 17:25	I-Motor Claim Form		
OD: <input checked="" type="radio"/> 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 / IHC Assign Wksp / GW: ( ) Tel: ( ) Fax: ( )

TP Particulars:	Veh No: GBC 45667	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: ( )

Reminders: (INC No: 67986616) 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

MA1902433

<p>Client's Particulars:</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments:</p> <p>At: 1:</p> <p>2/13</p>	<p>Invoice Information Check:</p> <table border="1"> <tr> <td>1) AIL: Accident Reporting (\$30)</td> <td>30.00</td> </tr> <tr> <td>2) DA: Damage Assessment (\$100)</td> <td>INC (\$80)</td> </tr> <tr> <td>3) TP: Towing Fee</td> <td>\$40/\$45</td> </tr> <tr> <td>4) FT: Follow-Through Survey</td> <td>\$120</td> </tr> <tr> <td>5) PT: Follow-Through Survey (Resurvey)</td> <td>\$30</td> </tr> <tr> <td colspan="2">For retaining against INC Only (wef 10 Jan 2003)</td> </tr> <tr> <td>6) TR: Re-inspection</td> <td>\$75</td> </tr> <tr> <td>7) NI: Idan DA + SMRT Survey</td> <td>\$160</td> </tr> <tr> <td>8) NTUC Additional Services:</td> <td></td> </tr> <tr> <td>OD:</td> <td></td> </tr> <tr> <td>*N5: Courtesy Car / Tpt Allowance</td> <td>\$3</td> </tr> <tr> <td>*N6: Repair Coordination</td> <td>\$10</td> </tr> <tr> <td>*N7: Post Repair Inspection</td> <td>\$25</td> </tr> <tr> <td>*N8: DV / Collect Receipt Coordination</td> <td>\$3</td> </tr> <tr> <td>TP (N11): TP (Non INC) against INC</td> <td>\$20</td> </tr> <tr> <td>9) N12: Idan Mobile</td> <td>30</td> </tr> </table> <p>Invoice dated: ( ) Fee Charged: ( )</p> <p>Invoice dated: ( ) Fee Charged: ( )</p>	1) AIL: Accident Reporting (\$30)	30.00	2) DA: Damage Assessment (\$100)	INC (\$80)	3) TP: Towing Fee	\$40/\$45	4) FT: Follow-Through Survey	\$120	5) PT: Follow-Through Survey (Resurvey)	\$30	For retaining against INC Only (wef 10 Jan 2003)		6) TR: Re-inspection	\$75	7) NI: Idan DA + SMRT Survey	\$160	8) NTUC Additional Services:		OD:		*N5: Courtesy Car / Tpt Allowance	\$3	*N6: Repair Coordination	\$10	*N7: Post Repair Inspection	\$25	*N8: DV / Collect Receipt Coordination	\$3	TP (N11): TP (Non INC) against INC	\$20	9) N12: Idan Mobile	30
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## 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	04/04/2019 11:54
Date Of Accident	03/04/2019 17:25
Exact Location Of Accident	ALONG MACKENZIE RD BESIDE CARPARK M0040
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGZ9898Y
Insured/Policyholder	
Name Of Registered Owner	CHEW SIEW LIAN
NRIC No	S6937278C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96565258
Alternative Phone No	OFFICE-96565258
Vehicle Particulars	
Manufacturer	NISSAN
Model	QASHQAI
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	1700058235-01
Cover Note Number	-
Driver	
Name of Driver	TAN YOKE KOON, FRANKIE(CHEN YUKUN,FRANKIE)
NRIC No	S7212653Z
Date Of Birth	11/04/1972
Occupation	OUTDOOR
Date Of Driving Pass	15/03/1990
Driving Experience	29 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81155766
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	1 ELIZABETH DRIVE #02-06
Postcode	669743
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 - CHANGE/CROSS LANE
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?	
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: : CHEW SIEW LIAN
	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 ATTACHED STATEMENT.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBC4566T
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)



## SKETCH PLAN

### IMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
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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.

X 

Policyholder's Signature  
Date & Time:



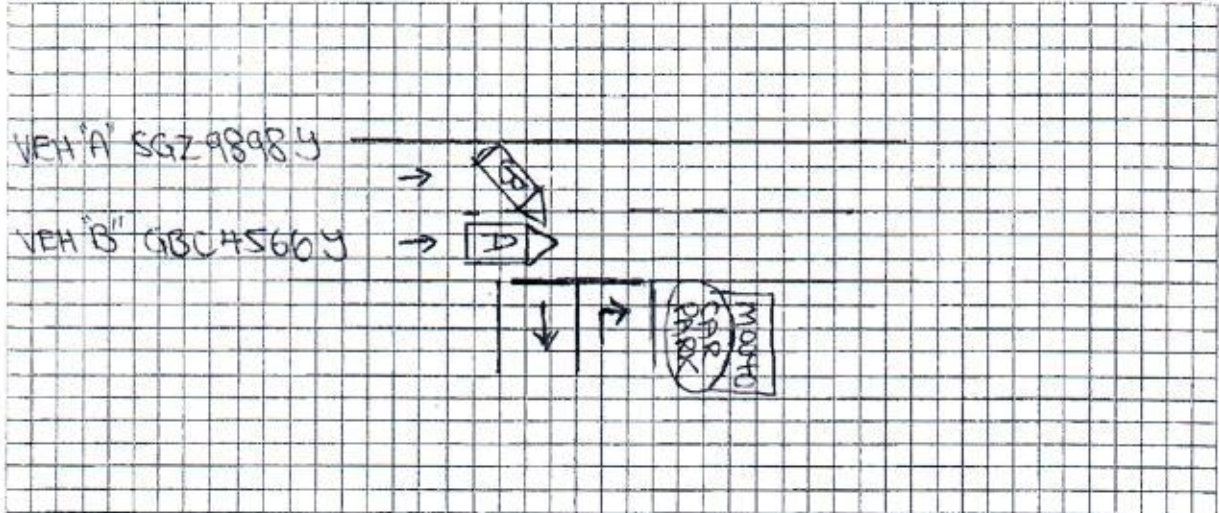
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



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

SKETCH PLAN

ALONG MACKENZIE RD BESIDE CAR PARK M0040



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time. I was driving vehicle "A" along the stated venue in lane one (1). Suddenly, vehicle "B" swerved into my lane and hit onto my left portion.

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]*

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



Date of Accident : 3/4/19 Accident Time: 1725 (24-HR-Format)  
Accident Place : ALONG MACKENZIE RD - ~~OUTSIDE CAR PARK~~ <sup>BESIDE CAR PARK MOO40</sup>  
Vehicle No. (Car Plate No.) : SGZ 9898Y Make/Model: NISSAN QASHQAI  
Insurer Company : AIG Policy No: 1700058235-01  
Owner or Company Name / IC No. : CHEW SIEW LIAN S6937278C  
Owner or Company Contact No. : \_\_\_\_\_ Owner's Hp 96565258 Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : TAN YOKE KOON FRANKIE S7212653Z  
DRIVER'S Date Of Birth : 11/04/72 DRIVER'S License Pass Date 15/3/90  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
DRIVER'S Address : 1 ELIZABETH DRIVE #02-06 S 669743  
DRIVER'S Contact No. / Alt No. : 1) 8115 5766 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): 02  
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): \_\_\_\_\_

(B)

Other Party Driver's Particular (if any)

Vehicle No: <u>GBC 4566 T</u>	Vehicle No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:

① CHEW SIEW LIAN FEMALE

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S7212653Z**



Name



**TAN YOKE KOON, FRANKIE**  
**(CHEN YUKUN, FRANKIE)**

**陈煜坤**

Race

**CHINESE**

Date of Birth

Sex

**11-04-1972**

**M**

Country of Birth

**SINGAPORE**



**REPUBLIC OF SINGAPORE**

**DRIVING LICENCE**

Licence Number **S7212653Z**

Name



**TAN YOKE KOON, FRANKIE**  
**(CHEN YUKUN, FRANKIE)**

Birth Date **11 Apr 1972**

Issue Date **06 Mar 2007**



001482958F



1054738



NRIC No: S7212653Z



Blood Group Date of issue

A+

23-06-1993

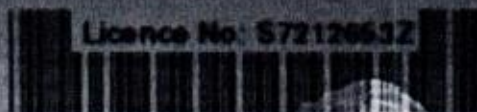
1 ELIZABETH DRIVE #02-06  
SINGAPORE 669743

NRIC No: S7212653Z Date: 10/10/2017

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

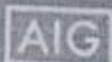
	PASS DATE
Class 2B Motorcycles $\leq$ 200 cc	26 Jul 1993
Class 2A Motorcycles between 201 cc and 400 cc	23 Aug 1994
Class 2 Motorcycles $>$ 400 cc	23 Nov 1996
Class 3 Motor Cars $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles $\leq$ 2500kg	15 Mar 1990

NP 428A



Licence No: S7212653Z





# CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Chew Siew Lian  
 Period of Insurance : 09 Oct 2018 To 06 Oct 2019  
 Engine No. : HRA2484496A  
 Chassis No. : SJNFEAJ11U2014838

Vehicle No. : 5GZ9898Y  
 Policy No. : 1700058235-01  
 Endorsement No. :  
 Issued Date : 13 Sep 2018

### ABOUT THE COVER

Make/Model : NISSAN Qashqai 1.2 DIG-Turbo  
 Engine Capacity/Tonnage : 1,197.00 CC  
 Driver Restriction : NA  
 Person or Classes of Persons Entitled to Drive\* :  
 at The Policyholder  
 (1) 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 \$2,000 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 85 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

### EXCESS

#### Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Chew Siew Lian - \$600 (Own Damage)

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

1. TC AutoClinic Add: No 1, Sixth Lok Yang Road Singapore 626099 62622212
2. Autolub Industrial Add: 19 Ulu Road 4 Singapore 40623 64909666
3. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64594091 64594092 64594093
5. Tan Chong Motor Sales Add: 17 Loring 8 Teis Payon Singapore 319254 63570753 63570754

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: DBS BANK 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).

0500610403

TAN CHONG CREDIT PTE LTD-TLH  
 211, BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 589623 ANSP-MOTOR  
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Signature*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

EWCPH2