

NATIONAL Assessment Centre Services (wef 1 Jan 05)

Date In: 12/04/19	Job description	Date & Time Completed	Done by
Ref No: NA/41619006535/13	SAS e-filing		
Veh No: SJV57305	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 26/02/19 2240	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: 5485320	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

NA1902739	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
			1st Bill	Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);			
	2) DA: Damage Assessment (\$100); INC (\$80)			
Driver/Owner:	3) TF: Towing Fee \$40/\$45			
Contact No:	4) FT: Follow-Through Survey \$120			
Damaged Portion:	5) i-T: 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:-			
	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: Idac Mobile 30			
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged		
Auditors' Comments :-	Invoice dated	Fee Charged		
Cat. 1:				
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	12/04/2019 11:35
Date Of Accident	26/02/2019 22:40
Exact Location Of Accident	JUNC OF ROCHOR CANAL RD & SELEGIE RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV5730J
Insured/Policyholder	
Name Of Registered Owner	MARIC CAR RENTAL
Co Reg No	201620648G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-99999999

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 3
Exact Purpose for which vehicle was being used at time of accident	WORK
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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994658
Cover Note Number	

Driver

Name of Driver	ROHAIZAL BIN HASSAN
NRIC No	S8932898E
Date Of Birth	27/09/1989
Occupation	OUTDOOR
Date Of Driving Pass	12/08/2009
Driving Experience	9 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87687554
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 63 CIRCUIT RD #05-283
Postcode	370063
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	WET

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

PLS REFER TO THE ATTACHED STATEMENT.

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	SLB532D
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)	

SKETCH PLAN

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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.

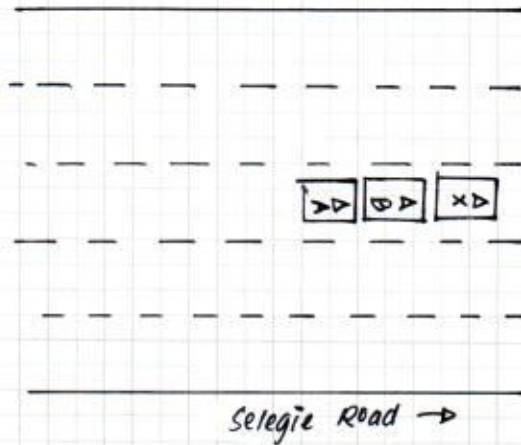


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



Vehicle X : unknown
 Vehicle A : SJV 5730 J
 Vehicle B : SLB 532 D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time, I (Vehicle A : SJV 5730 J) was stationary at the mentioned destination. As the traffic light turns green, Vehicle B (SLB 532 D) starts to move, so I followed suit. Suddenly, Vehicle B did a sudden jam-brake, I managed to react in time but my vehicle slightly kissed the rear of vehicle B. After analysing the damages, we mentioned to private settle & was asked to wait for vehicle B's call. After that, I got to know that vehicle B went to file an accident report to claim my insurance.

DECLARATION

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



Policyholder's Signature
 Date & Time:

[Handwritten Signature]

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

[Handwritten Signature] 12/04/19

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

SINGAPORE DRIVING LICENCE

Identity Number: **S8932898E**

ROHAIZAL BIN HASSANI

Birth Date: **27 Sep 1989**
Issue Date: **22 Aug 2014**

002337844E

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8932898E**



Name
ROHAIZAL BIN HASSANI

Race
BOYANESE

Date of birth
27-09-1989

Country of birth
SINGAPORE

Land Transport Authority

VOCATIONAL LICENCE
Licence No: **S8932898E**
Name: **ROHAIZAL BIN HASSANI**

Please visit www.lta.gov.sg to check the status of this vocational licence

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class	Vehicle Description	Effective Date
Class 1B	MOTORCYCLES WITH ENGINE 100 CC	11 Jan 2012
Class 2A	MOTORCYCLES BETWEEN 100 CC AND 400 CC	12 Oct 2012
Class 3	MOTOR CARS AND MOTOR TRUCKS THE WEIGHT OF WHICH EXCEEDS 1000 KG BUT NOT EXCEEDS 3500 KG	12 Aug 2014
Class 4	MOTOR CARS AND MOTOR TRUCKS THE WEIGHT OF WHICH EXCEEDS 3500 KG	12 Aug 2014

S / No. 9000242906

Licence No. **S8932898E**



NAME: **S8932898E**



Date of issue
28-09-2004

APT BLK 83 CIRCUIT ROAD #05-283
SINGAPORE 370083

NRIC No: **S8932898E**

Date: **22/08/2014 (R)**

class 3: 12 AUG 2009

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

Type	Description
13	PRIVATE HIRE CAR VL

Issue Date
08/06/2018



ACCIDENT STATEMENT

ACCIDENT DATE: (26 / 02 / 2019) (DD/MM/YYYY), TIME: (22 : 40) (HH:MM)

LOCATION: Junction of Roehner Canal Road & Selegie Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJV 5730 J
b) INSURANCE COMPANY: AG
c) POLICY NUMBER: 99999 4658
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Mazda 3
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Work
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: Maric Car Rental Pte Ltd (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 2016206489 CONTACT: _____
c) ADDRESS: 9 Tagore Lane #03-49, 9 @ Tagore Singapore 787472

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Ronaizal Bin Hassani (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: SP932898E CONTACT: 8768 7554
c) ADDRESS: 81K 63 Circuit Road #05-283 Singapore 370063

* d) DATE OF BIRTH: (29 / 09 / 1989) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 10

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: SLB 532D MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

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

Email = REPORTING@
TOPQUE5.com
Fax = 6452 4584

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8932898E



Name

ROHAIZAL BIN HASSANI

Race

BOYANESE

Date of birth

27-09-1989

Sex

M

Country of birth

SINGAPORE

S8932898E

3618056



NRIC No. S8932898E



Date of issue

28-09-2004

APT BLK 63 CIRCUIT ROAD #05-283
SINGAPORE 370063

NRIC No: S8932898E

Date: 22/08/2014 (R)



CERTIFICATE OF INSURANCE

HOTLINE TEL: (65) 5419-3000
FAX: (65) 5415-3723

OR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
OR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1969
OR TRANSPORT ACT, 1987 (MALAYSIA)
OR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

COMPREHENSIVE
POLICY NO.

COMMERCIAL MOTOR
SJV5730J
999994658

POLICY EXCESS

WINDSCREEN EXCESS

(This below excess is subject to GST)
S\$1000.00 (Sect I)
S\$100.00

SUM INSURED

INSURING WITH COE/PARF

Market Value
Yes

SJV5730J

MARIC CAR RENTAL PTE LTD

25 April 2018

24 April 2019

VEHICLE REGISTRATION NO.

NAME OF INSURED

EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE

OR THE PURPOSES OF THE ACT

DATE OF EXPIRY OF INSURANCE

PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

*Person who is driving on the insured's order or with their permission.

S\$100.00 Section I Excess and S\$1,000.00 Section II Excess is applicable for driver who is above 22 years old and/or with minimum 2 years driving experience.

S\$100.00 Section I Excess and S\$2,000.00 Section II Excess is applicable for drivers who is 21 years old with minimum 1 year driving experience.

Policy does not cover drivers who are below 21 years old or less than 1 year driving experience.

ded 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
der of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

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

TAI THONG LEE TRADING PTE LTD

tations 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
aysia), are not to be included under these headings.

We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles
rd-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

ed in Singapore 25 Apr 2018

500656-000
Cowell Insurance (Agency) Pte. Ltd.
8 Burn Road
#09-09 Trivex
Singapore 369977

AIG Asia Pacific Insurance Pte. Ltd.

Marile

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL