

NATIONAL Assessment Centre Services. (Ref: 1 Jan 05) **NA 19056040**

Date In: 20/04/2019 16:41	Job description	Date & Time Completed	Done by
Ref No: NA 19056040 1627/4	SAS e-filing		
Veh No: SGJ 555L	E-mail (to/for 3hrs, A/C 2hrs)		
D.O.A: 30/04/2019 10:15	1-Motor Claim Form		
OID / TP (Reporting Only)	1-Motor W/O (With: OD 2hrs, TP 4hrs)		
TP Insurer:	1-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: **SFX 6668 P** 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 ()

() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repair.

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

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

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()

Date/Time: ()

NA 1903112

Driver/Owner: ()

Contact No: ()

Damaged Portion: ()

QC Checked by (Engr-In-Charge): ()

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	30/04/2019 16:41
Date Of Accident	30/04/2019 10:15
Exact Location Of Accident	CTE (CITY) BEFORE BRADDELL ROAD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ5755L
Insured/Policyholder	
Name Of Registered Owner	MARIC & PARTNERS PTE. LTD.
Co Reg No	201620701N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84819710
Alternative Phone No	OFFICE-84819710

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	999994147
Cover Note Number	

Driver

Name of Driver	SUHAIMI BIN MOHAMMED YATIM
NRIC No	S1495216J
Date Of Birth	10/02/1961
Occupation	OUTDOOR
Date Of Driving Pass	07/10/1983
Driving Experience	35 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84819710
Fax Number	
Contact Number	OTHERS-84819710
EMail Address	NOEMAIL

Address	BLK 854 WOODLANDS STREET 83 #01-86
Postcode	730854
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?	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)	2
Passenger 1	NAME: : PASSENGER 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 SKETCH PLAN

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	SFN6668P
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	

SKETCH PLAN

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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.

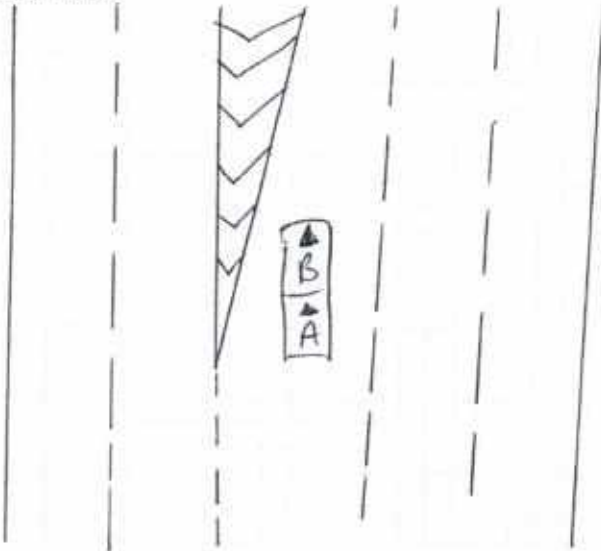


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



CTE City Before
Braddell Road

Vehicle A: SGJ 5755L

Vehicle B: SFN 6668P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, Vehicle B jammed back.

I could not react in time and hit onto Vehicle B rear
portion.

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.:

30/04/2018

Boo Loo

Email: sm@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 30/4/19 (dd/mm/yy) Time of Accident: 10:15 (24-HR-FORMAT)

Vehicle No.: SGJ5755L Vehicle Make & Model: Toyota Altis

Exact location of Accident: CTE City Before Bradell Exit

Policyholder's Name / IC No.: MARIC & PARTNERS PTE. LTD. 201620701N

Driver's Name / IC No.: Suhaimi Bin Mohammed Yatim / 51495216^J (As Above) ☐

Driver's Contact No.: 8481 9710 Company Contact No: _____

Driver's Address: 9 TAGORE LANE #03-04 9 @ TAGORE S(787472)

Insurance Company: AIG

Email address (if any): _____

Relationship between Owner & Driver: Hirer

or Others specify: _____

What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☐ Other Vehicle (The one you want to claim against) / ☒ Reporting (For Record Purpose)

Exact purpose for which the vehicle
Was being used at time of accident?

☐ Private use / ☒ Work purpose

Occupation (nature of job) ☐ Indoor / ☒ Outdoor

No. of Passengers (Including Driver): 02

Passenger Name: Grab Passenger

Gender: Female

Passenger Name: _____

Gender: _____

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No: Joseph Ang Tun Yew Vehicle No: SFN 6668P

Driver's Contact No: _____ Insurance Company (If any): _____

2. Driver's Name / IC No: _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1495216J



Name
SUHAIMI BIN MOHAMMED YATIM
سوحيمي بن محمد يقيم

Race
MALAY

Date of birth
10-02-1961

Country/Place of birth
SINGAPORE

Sex
M

S1495216J

REPUBLIC OF SINGAPORE DRIVING LICENCE



S1495216J


SUHAIMI BIN MOHAMMED YATIM

Birth Date: **10 Feb 1961**

Issue Date: **03 Mar 2003**



Land Transport Authority



VOCATIONAL LICENCE

Licence No. **S1495216J**

Name: **SUHAIMI BIN MOHAMMED YATIM**

Card Issue Date: **27/12/2017**

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

5867525



NRIC No. **S1495216J**



Date of issue
07-02-2018

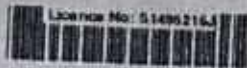
Address
**APT BLK 854 WOODLANDS STREET 83
#01-86
SINGAPORE 730854**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	13 Mar 1979
Class 2A	Motorcycles between 201 cc and 400 cc	13 Mar 1979
Class 2	Motorcycles exceeding 400 cc	13 Mar 1979
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	07 Oct 1963


NP 428A

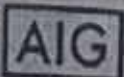
Licence No: **S1495216J**



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 Ser Ming Drive, Singapore 575701.

Type	Description	Issue Date
12	TAXI VL	27/12/2017





HOTLINE TEL: (65) 6419-3000

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 149)

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1988

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1989 (MALAYSIA)

M 2 400

THIRD PARTY FIRE & THEFT

COMMERCIAL MOTOR

(This below excess is subject to Q37)

CERTIFICATE NO.

SOLJ726L

POLICY EXCESS

S\$ 1000.00 (S\$ 1000)

POLICY NO.

900004167

WINDSCREEN EXCESS

NA

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

25 April 2019

14 April 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is a driver of the motor vehicle or with their permission.

All persons who are 16 years of age or older and who are between 22 years to 30 years old with maximum 2 years driving experience in Singapore.

An experienced driver (holder of S\$ 100.00 per accident is liable in the event of an accident occurring outside Singapore.

Accident claim for the 1st and 2nd of AIG is followed by 1st and 2nd of Manufacturer's warranty within 3 years warranty.

Insured must be the owner of the vehicle at the time of the accident. If the vehicle is not the owner, the insured must be the owner of the vehicle at the time of the accident. If the vehicle is not the owner, the insured must be the owner of the vehicle at the time of the accident.

6) LIMITATION AS TO USE:

- 1. Use for road, business, pleasure, delivery and business purposes of insured.
- 2. Use for road, business, pleasure, delivery and business purposes of any person who is entitled to drive the vehicle.
- 3. Use for the purpose of emergency to road or delivery and other to which the vehicle is used.

The policy does not cover: 1. Use for racing, speed testing, speed driving, stunt driving or any other purpose. 2. Use for any purpose in connection with the motor vehicle.

LOSS OF USE

NOT COVERED

HONG FURNACE COMPANY

TAI THONG LEE TRADING PTE LTD

Insured is responsible for the payment of the third party costs. The insured must be the owner of the vehicle at the time of the accident. If the vehicle is not the owner, the insured must be the owner of the vehicle at the time of the accident.

Insured must be the owner of the vehicle at the time of the accident. If the vehicle is not the owner, the insured must be the owner of the vehicle at the time of the accident.

Issued in Singapore on 20 April 2019

SOLJ726L

City of Insurance (Agency) Pte Ltd

8 Raffles Place

APR 20 2019

Singapore 189077

AIG Asia Pacific Insurance Pte Ltd

AUTHORISED REPRESENTATIVE

SINGAPORE

ORIGINAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 0701N

Vehicle Details

Vehicle No.: SGJ5755L
Vehicle to be Exported: No
Intended Deregistration Date: 30 Apr 2019
Vehicle Make: TOYOTA
Vehicle Model: COROLLA ALTIS 1.6 AUTO
Primary Colour: Red
Manufacturing Year: 2006
Engine No.: 3ZZ4585747
Chassis No.: MR053ZEC107125903
Maximum Power Output: 81.0 kW (108 bhp)
Open Market Value: \$15,950.00
Original Registration Date: 14 Jul 2006
First Registration Date: 14 Jul 2006
Transfer Count: 3
Actual ARF Paid: \$17,545.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 13 Jul 2021
COE Category: A - Car (1600cc & below)
COE Period(Years): 5
PQP Paid: \$24,760.00
COE Rebate Amount: \$10,902.00
Total Rebate Amount: \$10,902.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 30 Apr 2019.

OK