

ATTENTION: Assessment Centre Services

| | | | |
|---------------------------------|--|------------------------|----------|
| Date In: 23/05/2019 11:21 | Job description: SAS e-filing | Date & Time Completed: | Done by: |
| Ref No: NA/ALG19009060/KY | E-mail (within 8hrs, A/C 2hrs) | | |
| Veh No: SKA 39 46R | i-Motor Claim Form | | |
| TP Insurer: (TP) Reporting Only | i-Motor W/O (Within: OD 2hrs, TP 4hrs) | | |
| | i-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: SLL1599C | 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 |
|-----------|---------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| | | | |
|---------------------------------|---|----------------------|----------------------|
| Claimant's Particulars:- | Invoice Preparation Checklist | Ant (\$) 1st Bill | Ant (\$) Add Bill |
| Driver/Owner: | 1) AR: Accident Reporting (\$30); | | |
| Contact No: | 2) DA: Damage Assessment (\$100); INC (\$80) | | |
| Damaged Portion: | 3) TF: Towing Fee \$40/\$45 | | |
| QC Checked by (Engr-In-Charge): | 4) FT: Follow-Through Survey \$120 | | |
| Auditors' Comments:- | 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:- | | |
| | OP* | | |
| | *N5: Courtesy Car / Tpl 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 | | |
| | 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 | 23/05/2019 11:21 |
| Date Of Accident | 20/05/2019 18:25 |
| Exact Location Of Accident | JOHOR CUSTOM MALAYSIA |
| Country/State of Loss | MALAYSIA/JOHOR DARUL TAKZIM |
| DETAILS OF OWN VEHICLE | |
| Vehicle Registration Number | SKA3946R |
| Insured/Policyholder | |
| Name Of Registered Owner | TAN CHIEW HIOK LINDA |
| NRIC No | S1372358C |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-96370864 |
| Alternative Phone No | OTHERS-96370864 |
| Vehicle Particulars | |
| Manufacturer | RENAULT |
| Model | FLUENCE 1.6L CVT ABS D/AB 2WD 4DR SR |
| 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 | 2100249403-08 |
| Cover Note Number | |
| Driver | |
| Name of Driver | TAN CHIEW HIOK LINDA |
| NRIC No | S1372358C |
| Date Of Birth | 19/10/1959 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 19/07/1984 |
| Driving Experience | 34 YEARS AND 10 MONTHS |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-96370864 |
| Fax Number | |
| Contact Number | OTHERS-96370864 |
| EEmail Address | NOEMAIL |

| | |
|---|---|
| Address | BLK 125 SERANGOON NORTH AVENUE 1 #06-113 |
| Postcode | 550125 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|------------|
| Type Of Accident | SIDE SWIPE |
| 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) | 5 |
| Passenger 1 | NAME: : CHENG MOI CHOO GENDER: : FEMALE |
| Passenger 2 | NAME: : TAN HEE SENG GENDER: : MALE |
| Passenger 3 | NAME: : TAN KHIM CHEW GENDER: : MALE |
| Passenger 4 | NAME: : HO TANNI GENDER: : FEMALE |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | SERANGOON GARDENS NEIGHBOURHOOD POLICE POST |
| Police Station Address | ROAD: 51 SERANGOON GARDEN WAY , POSTCODE: 555947 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-2879999 - FAX NO: 62815969 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : F/20190521/2051

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 | SLL1599C |
| 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

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.

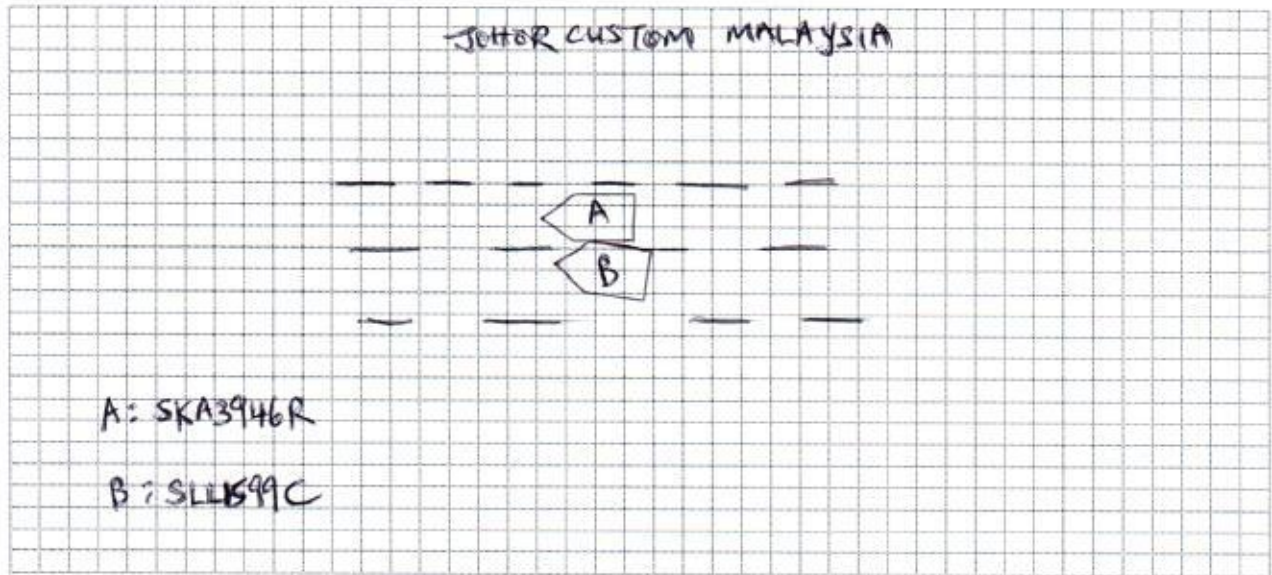
Policyholder's Signature
Date & Time:

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

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

23/5/2019

SKETCH PLAN:



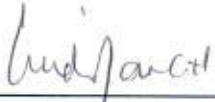
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

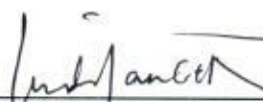
PLS REFER TO POLICE REPORT AS ATTACHED

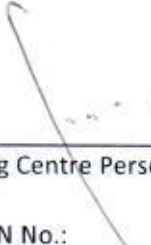
F/20190521/2051

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:

 23/5/2019
Reporting Centre Personnel's Signature
Name:
NRIC / FIN No.:



**SINGAPORE
POLICE FORCE**



F/20190521/2051

1 of 2

POLICE REPORT (NP299)

Report No. F/20190521/2051

Police Station Of Origin
Serangoon Gardens NPP
51 Serangoon Garden Way SINGAPORE
555947
Tel No: 1800-2879999

| | | |
|---|--|------------------------|
| Date/Time Report Made 21/05/2019 13:32 | Vide Report No. | Station Diary No. 6 |
| Name Of Informant TAN CHIEW HIOK LINDA | Address APT BLK 125 SERANGOON NORTH AVENUE 1 #06- 113 SINGAPORE 550125 | |
| ID Type / ID No. NRIC NO / S1372358C | Contact No. Home/Office Mobile 96370864 | |
| Nationality SINGAPORE CITIZEN | Email Address | |
| Occupation MARKETING | Sex Female | Age 59 |
| Institution/School Name | Date of Birth 19/10/1959 | Race Chinese |
| Date/Time Of Incident 20/05/2019 18:25 | Language English | |
| | Location Of Incident JOHOR CUSTOM MALAYSIA | |

Brief details.

On 20.05.2019 at around 1820hrs, I was driving my vehicle SKA3946R at Johor Custom when another Singapore vehicle SLL1599C had hit onto my left side door. At that time, my vehicle was stationery. The vehicle tried to drove away however failed as the traffic was heavily congested. We approached each other however the said driver did not admit to his mistake. We took photos of our vehicles and left the scene, No one was injured. There were no government property damage. I am lodging this report for record purpose.

| | |
|--|--------------------------------|
| Signature Of Officer Recording The Report: F / Sgt 3 MUHAMMAD ASYRAF BIN ARIS | Signature Of Informant: |
| Signature Of Interpreter: Not applicable | Date/Time: 21/05/2019 13:32 |
| Officer In-Charge Of Case: F / Serangoon N.P.C / Sgt 3 MUHAMMAD ASYRAF BIN ARIS Contact No.: 64880999 | Classification Of Case: |

Authentication Stamp





**SINGAPORE
POLICE FORCE**



F/20190521/2051

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190521/2051

Signature Of Officer Recording The Report:

F / Sgt 3 MUHAMMAD ASYRAF BIN ARIS

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
F / Serangoon N.P.C /
Sgt 3 MUHAMMAD ASYRAF BIN ARIS
Contact No.: 64880999

Signature Of Informant:

Date/Time:
21/05/2019 13:32

Classification Of Case:

Authentication Stamp

NOTICE OF REPORTING

This is to confirm that Tan Chiew Hock Linda, NRIC/FIN
S1372358C, has reported to the Police a non-injury traffic accident which
occurred at Johor Leston.

on 20/5/19 at 1800 am/pm involving the following vehicles:

2 If this accident was reported to the Police within 24 hours of its occurrence, then
he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

① SKA 3946R, complainant

② SLL1599C

Rank/Name of Issuing Officer: Sy H(3) Ang

Date: 21/5/19 Time: 1337h.

S/D Ref: 7

Police Post/Unit: Sengor North Lander NPS

 Signature: _____
Singapore Police Force

Accident Reporting Draft

VEHICLE NO: SKA3946R

MODEL: RENAULT FLUENCE 1.6L

| | | | |
|-----------------------------------|--|---------------------|-------|
| DATE OF ACCIDENT | 20/5/2019 | | |
| TIME OF ACCIDENT | 1825 HRS | HRS | AM/PM |
| LOCATION OF ACCIDENT | JOHOR CUSTOM MALAYSIA | | |
| EXACT PURPOSE USE DURING ACCIDENT | | | |
| NAME OF OWNER | TAN CHIEW HIOK LINDA | | |
| CONTACT NO. | 96370864 | | |
| NRIC | S1372358C | | |
| CLAIM TYPE | OD / THIRD PARTY / REPORTING ONLY THIRD PARTY | | |
| INSURANCE CO. | AIG | | |
| TYPE OF COVERAGE | COMPREHENSIVE/ THIRD PARTY/ THIRD PARTY FIRE & THEFT | | |
| POLICY NO. | | | |
| NAME OF DRIVER | SAME AS ABOVE AS ABOVE / IF NO: | | |
| NRIC | S1372358C | ANY PASSENGER: 4 | |
| DATE OF BIRTH | | CHENGT MOI CHOO (F) | |
| OCCUPATION | OUTDOOR / INDOOR | TAN HEE SENGA (M) | |
| DATE OF DRIVING PASS | | TAN KHAM CHEW (M) | |
| GENDER | MALE / FEMALE | HO TANNI (F) | |
| CONTACT NO. | 96370864 | OFFICE: | HOME: |
| ADDRESS | BLK 125 SERANGOON NORTH AVE 1 #06-113 S(550125) | | |
| DRIVER HAVE ANY OWN VEHICLE | NO/ IF YES: REG NO. | | |
| RELATIONSHIP | EMPLOYEE/ IF NO: | | |
| WEATHER CONDITION | CLEAR / RAINY/ OTHER: CLEAR | | |
| ROAD SURFACE | DRY / WET/ OTHER: DRY | | |
| ANY INJURIES | NO / IF YES: | | |
| CONTACT NO. | | | |
| POLICE REPORT | NO / IF YES: | | |
| VIDEO RECORDING | NO / YES | | |
| VEHICLE B NO. | SLL1599C | ANY PASSENGER: | |
| NAME | | | |
| CONTACT NO. | | | |
| VEHICLE C NO. | | ANY PASSENGER: | |
| VEHICLE D NO. | | ANY PASSENGER: | |
| VEHICLE E NO. | | ANY PASSENGER: | |
| VEHICLE F NO. | | ANY PASSENGER: | |
| ANY WITNESS | | | |
| WITNESS CONTACT NO. | | | |
| PARTICULAR WORKSHOP | <div style="text-align: center;"> Ryder Auto Pte Ltd 2 Kaki Bukit Ave 2, #02-19 @ Kaki Bukit Auto Hub, Singapore 417921 Email: ryderautoworkshop@gmail.com Tel: 67418277 Fax: 67468277 </div> | | |
| MOBILE NO. | | | |
| CONTACT PERSON | | | |
| FAX NO. | | | |

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1372358C



Name
TAN CHIEW HIOK LINDA

Race
CHINESE

Date of Birth
19-10-1959

Sex
F

Country of Birth
SINGAPORE

S1372358C

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1372358C

Name

TAN CHIEW HIOK LINDA

Birth Date 19 Oct 1959

Issue Date 03 Nov 2003



000973676F



0311639

S1372358C



Blood Group Date of issue
B+ 15-04-1992

Address
APT BLK 125 SERANGOON NORTH AVENUE 1
#06-113
SINGAPORE 1955

UB- LLY

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 19 Jul 1984



Licence No. S1372358C

NP 428A

WEARNES AUTO PROTECTOR (RENAULT) PRIVATE VEHICLE

Name of Policyholder : Tan Chiew Hiok Linda
Period of Insurance : 24 Feb 2019 To 23 Feb 2020
Engine No. : H4MC721F086348
Chassis No. : VF1LZB50TUC244920

Vehicle No. : SKA3946R
Policy No. : 2100249403-08
Endorsement No. :
Issued Date : 21 Jan 2019

ABOUT THE COVER

Make/Model : RENAULT FLUENCE 1.6
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2011
Insuring with COE/PARF : Yes

a) The Policyholder
 b) 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 \$3,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 30 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 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 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Tan Chiew Hiok Linda - \$800 (Own Damage)

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

1. Wearn's Automotive Pte Ltd Add: 28 Leng Kee Road Singapore 159105 64304890 63789350

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 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).

0503484204

WEARNES AUTOMOTIVE - EGT (RP)

45 LENG KEE ROAD

SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

SSPLBO