

# NATIONAL Assessment Centre Services

[wef 1 Jan'05] MHA 19 06925

Date In: 28/1/19-11:54	Job description	Date & Time Completed	Done by
Ref No: N0101619009369/24	SAS e-filing		
Veh No: 61223424	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 28/1/19-17:30	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: 535944

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: ( )

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

NIA1903981

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Dat. 1:

Dat. 2 / 3:

## Invoice Preparation Checklist

Amf (\$)

Amf (\$)

Est Bill

Add Bill

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$80)

3) TF: Towing Fee \$40/\$45

4) FT: Follow-Through Survey \$120

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:-

QJ\*

\*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

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 28/05/2019 11:54  
 Date Of Accident 24/05/2019 17:30  
 Exact Location Of Accident SEMBAWANG RD AFTER JUNC YISHUN AVE 5  
 Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number GBG3952Y  
**Insured/Policyholder**  
 Name Of Registered Owner KST AUTO RENTAL PTE LTD  
 Co Reg No 200806860W  
 Email Address NOEMAIL  
 Mobile Phone No  
 Alternative Phone No OFFICE-67415530

### Vehicle Particulars

Manufacturer NISSAN  
 Model NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC  
 Exact Purpose for which vehicle was being used at time of accident WORKING  
 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 COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.  
 Type Of Coverage COMPREHENSIVE  
 Fleet Policy NO  
 Policy Number  
 Cover Note Number 100876177

### Driver

Name of Driver NAZIB BIN RAFFAT AFFANDI  
 NRIC No S8228266A  
 Date Of Birth 17/09/1982  
 Occupation OUTDOOR  
 Date Of Driving Pass 18/02/2003  
 Driving Experience 16 YEARS AND 3 MONTHS  
 Gender MALE  
 Mobile Number (LOCAL) +65-84683173  
 Fax Number  
 Contact Number OFFICE-84683173  
 Email Address NOEMAIL

Address	BLK 317 SEMBAWANG VISTA #03-203
Postcode	750317
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?	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 132 PAYA LEBAR ROAD , <b>POSTCODE:</b> 409014 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-8486999 - <b>FAX NO:</b> 68486799
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190525/2041.

#### 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	SJU2914X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	FOK SIEW WAI, ADRIAN
NRIC/Passport Number	S8807848I
Contact Number	90284951
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

1



## 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

Sketch plan details:

- Vertical line with a small rectangle labeled 'A' and 'B' inside it.
- Text to the left: *Sentencing rd*
- Text to the right: *A: 40629527*  
*B: 550294X*

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*Refer to police report - 760190525/2041.*

*[A large blue diagonal line is drawn across the remaining lines of this section.]*

## DECLARATION

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



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.:



# ACCIDENT STATEMENT

ACCIDENT DATE: (24/5/19) (DD/MM/YYYY), TIME: (17:30) (HH:MM)

LOCATION: Zone Limbawang Rd after Junction Yishun Ave 5.

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: G0639524  
 b) INSURANCE COMPANY: \_\_\_\_\_  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: \_\_\_\_\_  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: Working  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: \_\_\_\_\_ (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 67415530  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: Nazib Bin Raffat Affandi (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S8228266A CONTACT: 04682177  
 c) ADDRESS: Blk 317 Limbawang Vista #03-203 (750171)

\*d) DATE OF BIRTH: (17/9/198~) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 18/2/2003

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) NO  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hire

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) Clear  
 b) ROAD SURFACE: (DRY / WET / OTHERS) DRY

6. WAS ANYBODY INJURED (YES / NO) NO

7. a) REPORTED TO POLICE (YES / NO) YES

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: 5J02944X MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: Falc Jiew Wei, Adrian E  
 c) NRIC/FIN/PASSPORT: S8878482 CONTACT: 90284931

## 9. THIRD PARTY VEHICLE

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

\* No of passenger  
 (including driver)  
(1)

\* No of passenger  
 (including driver)  
(1)

\* No of passenger  
 (including driver)  
( )

Email =

fax =

VIDEO =





# SINGAPORE POLICE FORCE



T/20190525/2041

Police Station Of Origin:  
Geylang N.P.C  
132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

1 of 3

Report No. T/20190525/2041

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/05/2019 09:43		Vide Report No.:		Station Diary No.: 50	
<b>Informant's Particulars</b>					
Name of Informant: NAZIB BIN RAFFAT AFFANDI		Address: APT BLK 317 SEMBAWANG VISTA #03-203 SINGAPORE 750317			
ID Type / ID No.: NRIC NO / S8228266A		Contact No.: Home/Office: Mobile: 84683173			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 36	Date of Birth: 17/09/1982	Type of Informant: Driver		
Race: Malay		Language: English		Institution / School Name:	
Occupation: Fumigators/Pest and weed controllers		Driving Licence Information: Class: 3		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 24/05/2019 17:30	Type of Location: Straight Road
Location: Along Road 1 SEMBAWANG ROAD towards Sembawang MRT				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG3952Y	Van				Slightly Damaged	0
SJU2914X	Car				Slightly Damaged	0

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**



T/20190525/2041

Police Station Of Origin:  
Geylang N.P.C  
132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

2 of 3

Report No. T/20190525/2041

**CONTINUATION OF REPORT**

<b>Driver</b>				
Name	NAZIB BIN RAFFAT AFFANDI		ID No.	S8228266A
Related Vehicle	GBG3952Y (Van)		Contact No.	84683173
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
<b>Driver</b>				
Name	FOK SIEW WAI, ADRIAN		ID No.	S8807848I
Related Vehicle	SJU2914X (Car)		Contact No.	90284951
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

**Brief Details.**

On the 24/05/2019 at about 1730hrs, I was driving along Sembawang Road towards Sembawang MRT on the second lane. As I was nearing the traffic junction, I noticed that the traffic light was red as such started to slow down and eventually came to a stop. Shortly after stopping, I felt an impact coming from the rear of my vehicle as such I then checked the rear mirror and noticed that a red vehicle had collided in to the rear of my vehicle. I immediately alighted from my vehicle to make a check on the other driver. Both of us were fine with no injuries and proceeded to exchanged particulars. The driver then informed that he wishes to go for a private settlement. I am lodging this report for insurance claims



**SINGAPORE  
POLICE FORCE**



T/20190525/2041

Police Station Of Origin:  
Geylang N.P.C  
132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

3 of 3

Report No. T/20190525/2041

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:  
G /  
Sgt 2 AW YONG ZHAO LUN ALOYSIUS

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIA /  
Staff Sgt WONG SIEU LUI  
Contact No.: 65476151

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
25/05/2019 09:43

Classification Of Case:



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8228266A



Name  
**NAZIB BIN RAFFAT AFFANDI**

Race  
**MALAY**

Date of birth  
**17-09-1982**

Sex  
**M**

Country of birth  
**SINGAPORE**



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8228266A**

Name  
**NAZIB BIN RAFFAT AFFANDI**

Birth Date **17 Sep 1982**

Issue Date **04 Oct 2013**




0022315578

4339897



NRIC No: **S8228266A**



Date of issue  
**31-12-2008**

APT BLK 317 SEMBAWANG VISTA #03-203  
SINGAPORE 750317

NRIC No: **S8228266A**      Date: **11/08/2011**      No: **0826771**

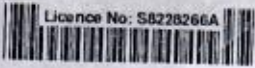
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor Cars  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of the driver; and other motor vehicles  $\leq$  2500kg      18 Feb 2003


NP 428A

Licence No: **S8228266A**





## COVER NOTE

<b>Cover Note No.</b> 100876177		<b>Date</b> 27 May 2019	
The following risk described in the Schedule is hereby HELD COVERED in the terms of the applicable Company's policy issued to the Policyholder.			
<b>SCHEDULE</b>			
<b>Policyholder</b>	KST Auto Rental Pte Ltd		
<b>Age Condition</b>	N/A	<b>Registration No</b>	GBG3952Y
<b>Policy Type</b>	COMPREHENSIVE COMMERCIAL MOTOR	<b>Make/Model</b>	Nissan NV200 1.5L Diesel
<b>Effective Date</b>	12 Apr 2019	<b>CC/Tonnage</b>	0.74
<b>Expiry Date</b>	11 Apr 2020	<b>Engine No</b>	K9KC400D057007K9KC400D057010
<b>Hire Purchase Company</b>	NA	<b>Chassis No</b>	VSKYBAM20Z0144883
		<b>Year of Registration</b>	2017
<b>This policy is subject to driver's age condition. The policy will indemnify the insured or any authorised driver only if he/she meets the age condition. Please refer to policy terms and conditions.</b>			
Usage of vehicle only for the following purposes: 1. Use only for social, domestic and pleasure purposes and for the Policyholder's business. 2. Use in connection with the Policyholder's business. Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business and use for social, domestic or pleasure purposes.			
Please note that acceptance of the risk is subject to our final acceptance and terms and conditions applicable to the policy. Should you require any change to the insurance, please contact us immediately. Otherwise, any change will not be covered under the policy.			
The Company may cancel this cover by notice in writing and the insurance will be terminated and a proportionate part of the annual premium for the insurance will be charged for the time the Company has been on risk.			
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)			
<b>CERTIFICATE OF INSURANCE</b>			
I/We hereby certify that this cover note 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 at SINGAPORE

AIG ASIA PACIFIC INSURANCE PTE. LTD.

**IMPORTANT NOTICE**

**THIS COVER NOTE IS VALID FOR  
60 DAYS FROM THE FIRST DAY OF  
THE POLICY PERIOD.**



Authorised Representative

SSPYTP