NATIONAL Assessment Centre	Services 1981 18		70-0	
11.1 01	Jeb description	i Date & Time Comple	ned Done	bs
RECNO NA/ALG 19010587/K4	SAS e-filing			
Veh No SLK 1592B	E-mail (wiens stas, AIC 2	lvez	1	
DOA 14/06/2019 08:30	i-Motor Claim Form			
OD (TP) Reporting Only	i-Motor W/O (Within:			
	i-Photo Uploaded			
TP Insurer:	Assessment/Survey Rep	oort	XXX - II-VXX	
	Ass't Report by Fax / F	land to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (		Tel:	Fax:	
TP Particulars: Veh No: S#	KTITIP .	NC( )/Non-INC(	)	
Owner / Driver: (		Tel:	)	
Policy No: ( ) Perio	d: (	) Cover Type: (	)	
Confirmed by : (	Date:	Time:	)	
	te-Est. Status (WO): N	: 0-20%; P: 21-79%. F:	80-100%]	
	erranty: YES ( ) / NO	( )		
Excess: (\$ ) Loading: \$1,000	( )/\$2,000( )			
General Remarks;-  ( ) Walk-In Customer : Customer's inform	PARTER THE MARKET SAME	1275 British September 18	Market Comment	
Apply for Transport Allowance ( ) / Cou     QC Check / Post Repair Inspection	artesy Car ( )			
	( )			
3) Upload Resurvey Photo [Repair Cost > \$300	00] ( )			
Injury:	- Walling of the small looks			
Date/Time Actions			105117	
		***************************************		
TALA LG CL	3.7		Anit (\$)	Amt (
NAIGOU		Preparation Checklist	Ist Bill	Add B
laimant's Particulars :-	7.1 M21.7 M (0.5 L/0.5 L	ccident Reporting (\$30); amage Assessment (\$100); IN	NC (\$80)	
river/Owner:			\$40/\$45	
ontact No:	5) FT : Fo	llow-Through Survey (Resurvey)	\$30	
amaged Portion:		ming against INC Only (wef 10 Jan -inspection	n 2005) \$75	
	THE STREET CO.	nc DA + SMRT Survey Additional Services	\$160	
C Checked by (Engr-In-Charge):	OD*			
		ourtesy Car / Tpt Allowance	\$5 \$10	
uditors' Comments :-	*N7: Po	st Repair Inspection	\$25	
u. L.		V / Collect Excess Coordination 1): TP (Non INC) against INC	\$5 \$20	
ut. 2 / 3;	9) N12: Id Invoice da		30 rped	AN STATE OF
	Invoice de		THE PERSON NAMED IN COLUMN	

### SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

EMail Address

- Please report <u>correctly</u> 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 witholding 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.
- 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.

aforesaid.		
The state of the s	ACCIDENT STATEMENT	
Date Of Report	14/06/2019 16:00	
Date Of Accident	14/06/2019 08:30	
Exact Location Of Accident	CTE TWDS CITY	
Country/State of Loss	SINGAPORE	
BUT THE STATE OF THE PARTY OF T	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLK1592B	
Insured/Policyholder		
Name Of Registered Owner	NEO R & R PTE LTD	
Co Reg No	1	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-97331986	
Alternative Phone No	OFFICE-97331986	
Vehicle Particulars		
Manufacturer	HONDA	
Model	P <sup>±</sup> u	
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	THIRD PARTY	
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	999994099	
Cover Note Number		
Driver		
Name of Driver	TAN TECK HIN	
NRIC No	S1124291Z	
Date Of Birth	01/05/1955	
Occupation	OUTDOOR	
Date Of Driving Pass	10/04/1976	
Driving Experience	43 YEARS AND 2 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-97331986	
Fax Number	attribensenanna 5 sua (1900) (1900) (1900) (1900)	
Contact Number	OTHERS-97331986	

NOEMAIL

BLK 105 PASIR RIS STREET 12 Address

#09-83

Postcode 510105

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) 2

involved in the accident

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)

Passenger 1

NAME:

: NIL

GENDER: : MALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

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?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SFK7171P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

LIM PIN TIENG MANDY (LIN PINGTING MANDY)

NRIC/Passport Number S7510883D Contact Number 91767171

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 23

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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 :
  - 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:
  - 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.:





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

### EFFECTIVE DATE

Motorcycles =< 200 cc
Motorcycles between 201 cc and 400 cc
Motorcycles > 400 cc
Motor cars with unladen weight =< 3000kg with =< 7
passengers, exclusive of driver; and other motor
vehicles with unladen weight =< 2500kg
Motor vehicles which are constructed to carry load
or passengers and the unladen weight > 2500kg
Motor vehicles which are not constructed to carry
load or passengers and the unladen weight > 2500kg Class 2B Class 2A Class 2 Class 3 18 Jun 1976 18 Jun 1976 18 Jun 1976 18 Jun 1976 10 Apr 1976



# CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THRD 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)

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. POLICY NO.

SLK1592B 999994099

WINDSCREEN EXCESS

POLICY EXCESS

SUM INSURED

SI K1590B

S\$2,500.00 (Sect I & II) \$\$100.00

INSURING WITH COE/PARF

NEO R & R PTE LTD

Market Value YES

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE

PURPOSES OF THE ACT

11 June 2019

4) DATE OF EXPIRY OF INSURANCE

10 June 2020

5 ) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE:

\$\$2,500.00 Section | & \$\$2,500.00 Section || Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience in Singapore. An additional section II excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore. Accident repair has to be carried out at AIG appointed list of workshop or Manufacturer workshop within 3 years warranty.

Provided that the person driving is permitted in accordance with the licensing or other taxes or requisitions to drive the Motor Vehicle of has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

#### 6) LIMITATION AS TO USE.

- 1) Use for social, domestic, pleasure purposes and business purposes of insured
- 2) Use for social, domestic, preasure 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) Usin for fullion, driving test, racing, pace-making, rotability that or speed testing. 2) Use whits drawing a trailer except the towing (other than for reward) of any one disabled mechanically proposed vehicle: 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

Privilege Capital Pte Ltd

ons rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 86 of the Read Transport Act, 1897 Valaysia), are not to be included under these headings

If We hereby Certify that the policy to which this Certificate relates 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 in Singapore 10 Jun 2019

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

Singapore 369977

AIG Asia Pacific Insurance Pte. Ltd.

ORIGINAL