

# NATIONAL Assessment Centre Services

Date In: 01/09/19	Job description	Date & Time Completed	Done by
Ref No: NA/AIG/19011623/13	SAS e-filing		
Veh No: 5SD27716	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 30/06/19 1700	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: ( N-51	Tel:	Fax:
TP Particulars:	Veh No: 5KAP3233K	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

NA1904964	<b>Invoice Preparation Checklist</b>		Amt (\$)	Amt (\$)
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		1st Bill	Add Bill
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF : Towing Fee \$40/\$45			
Damaged Portion:	4) FT : Follow-Through Survey \$120			
	5) RT : 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:-			
QC Checked by (Engr-In-Charge):	OD*			
	*N5: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
Auditors' Comments :-	TP (N11) : TP (Non INC) against INC \$20			
Cat. 1:	9) N12: Idac Mobile 30			
Cat. 2 / 3:	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	01/07/2019 16:25
Date Of Accident	30/06/2019 17:00
Exact Location Of Accident	C/PARK DRIVEWAY OF BLK 447 TAMPINES ST 42 LOT 74
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJD2771E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MUHAMMAD RAZLI BIN RAMLI
NRIC No	S8207228D
Email Address	MUHD_RAZLI@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-91546869
Alternative Phone No	OTHERS-91546869
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	ESTIMA
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
<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800083190
Cover Note Number	
<b>Driver</b>	
Name of Driver	MUHAMMAD RAZLI BIN RAMLI
NRIC No	S8207228D
Date Of Birth	12/03/1982
Occupation	INDOOR
Date Of Driving Pass	04/07/2006
Driving Experience	12 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91546869
Fax Number	
Contact Number	OTHERS-91546869
Email Address	MUHD_RAZLI@YAHOO.COM.SG

Address	BLK 640 PASIR RIS DRIVE 1 #02-520
Postcode	510640
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)	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

I WAS DRIVING ALONG THE CARPARK DRIVEWAY OF TAMPINES ST 42 INFRT OF BLK 447 ON A TWO WAY RD, SINGLE LANE. AS I WAS APPROACHING LOT 74 VEH B WAS REVERSING INTO THE SAID LOT. AS VEH B ALMOST COMPLETED PARKING INTO THE SAID LOT AND THE LANE THAT I WAS TRAVELLING WAS CLEAR, I PROCEED TO DRIVE ON STRAIGHT. SUDDENLY VEH B DROVE FORWARD AND COLLIDED ONTO THE FRT RIGHT PORTION OF MY VEH.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH WORKSHOP
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKP3233K
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

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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.

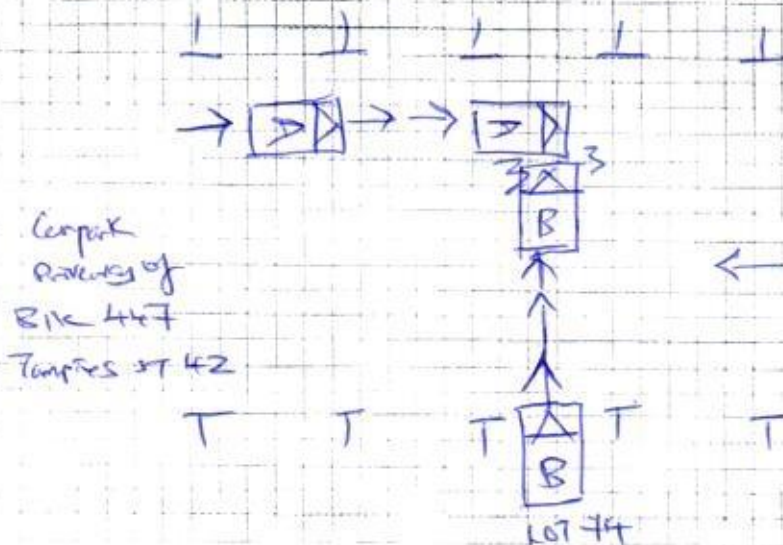
Policyholder's Signature  
Date & Time:

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

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



# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along the carpark Driveway of Tampines ST 42 in front of BIK 447 on a two-way road, single lane. As I was approaching LOT 74, Veh (B) was reversing into the said lot. As Veh (B) almost completed parking into the said lot and the lane that I was traveling was clear, I proceeded to drive on straight. Suddenly, Veh (B) drove forward and collided into the front right corner of my vehicle.

A - QD 2771 E

B - SKP 3285 K

## DECLARATION

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

*[Signature]*

Policyholder's Signature  
Date & Time:

*[Signature]*

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

*[Signature]*


01/07/19

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



<b>Vehicle No.</b>	SLO 2771E		<b>Model / Make</b>	Toyota Estima
<b>Date of Accident</b>	30/6/19			
<b>Time of Accident</b>	5:30pm		<b>HRS</b>	
<b>Location of Accident</b>	Carport Driveway off BK 447 Tampines ST 42 Lot 74			
<b>Exact purpose use during accident</b>	Pole use			
<b>Name of Owner</b>	Muhammad Razli Bin Ramli			
<b>Telephone No.</b>	H/P: 91546869	<b>Home :</b>	<b>Office :</b>	
<b>NRIC</b>	S82072280			
<b>Address</b>	Bk 440, Part Res Dr 1, #02-520, (S10670)			
<b>Claim type</b>	OD (THIRD PARTY) REPORTING ONLY			
<b>Insurance Company</b>	AIG			
<b>Type of Coverage</b>	(Comprehensive) Third Party Third Party / Fire / Theft			
<b>Policy No.</b>	1800083190			
<b>Name of Driver</b>	As Above If No,			
<b>NRIC</b>	Any Passengers : NI			
<b>Date of birth</b>				
<b>Occupation</b>	Outdoor / Indoor			
<b>Driving License Pass Date</b>	04/7/2006			
<b>Gender</b>	(Male) / Female			
<b>Contact No.</b>	H/P: 91546869	<b>Home :</b>	<b>Office :</b>	
<b>Address</b>	As above			
<b>Driver have any own vehicle</b>	No, If yes, Reg No.			
<b>Relationship</b>	Employee, If no, state			
<b>Weather condition</b>	(Clear) Raining Other			
<b>Road Surface</b>	(Dry) Wet Other			
<b>Any Injuries</b>	No, (If Yes, Who?)			
<b>Name And Contact No.</b>	Muhammad Razli Bin Ramli			
<b>Name And Contact No.</b>				
<b>Police Report</b>	No, If Yes, Where?			
<b>Vehicle B No.</b>	SKP 3233K		<b>Any Passengers :</b>	NI
<b>Name of Driver</b>			<b>Contact No. :</b>	
<b>Vehicle C No.</b>			<b>Any Passengers :</b>	
<b>Vehicle D No.</b>			<b>Any Passengers :</b>	
<b>Vehicle E no.</b>			<b>Any Passengers :</b>	
<b>Vehicle F No.</b>			<b>Any Passengers :</b>	
<b>Vehicle G No.</b>			<b>Any Passengers :</b>	
<b>Witness Name</b>			<b>Witness Contact :</b>	
<b>Accident Portion</b>	Front Right			
<b>Camera Recorder</b>	(Yes) / No			
<b>Email Address</b>	muhd_razli@yahoo.com.sg			
<b>PARTICULAR WORKSHOP</b>	NSI Automotive Pte			
<b>CONTACT NO.</b>	6842 0051 / 6744 0510			
<b>CONTACT PERSON</b>	Ivy			
<b>FAX NO</b>	6741 0510			
<b>WORKSHOP Email ADDRESS</b>	sales@nsi.com.sg			

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8207228D



Name  
MUHAMMAD RAZLI BIN RAMLI

محمد رزلي بن رملي

Race  
MALAY

Date of birth  
12-03-1982

Sex  
M

Country/Place of birth  
SINGAPORE

5254243

For LKK/NAC Use Only


REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8207228D

Name  
MUHAMMAD RAZLI BIN RAMLI

Birth Date: 12 Mar 1982

Issue Date: 19 Dec 2013

002249924E

5254243



NRIC No. S8207228D



Date of issue  
19-12-2013

Address  
APT BLK 640 PASIR RIS DRIVE 1  
#02-520  
SINGAPORE 510640

For LKK/NAC Use Only

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

EFFECTIVE DATE

Class 2B	Motorcycles <= 200 cc	13 Feb 2006
Class 2A	Motorcycles between 201 cc and 400 cc	17 Jan 2007
Class 2	Motorcycles > 400 cc	17 Jan 2007
Class 3	Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	04 Jul 2006

NP 428A

Licence No: S8207228D







# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : MUHAMMAD RAZLI BIN RAMLI  
Period of Insurance : 03 Aug 2018 To 02 Aug 2019  
Engine No. : 2AZC045372  
Chassis No. : ACR507026272

Vehicle No. : SJD2771E  
Policy No. : 1800083190  
Endorsement No. :  
Issued Date : 30 Jul 2018

### ABOUT THE COVER

Make/Model : TOYOTA  
Engine Capacity/Tonnage : 2,362.00 CC  
Driver Restriction : NA  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2006  
Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\* :

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 "Young and/or Inexperienced Driver Excess" ("YIDER") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

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 Optional

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 85 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

### EXCESS

#### Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

MUHAMMAD RAZLI BIN RAMLI - \$600 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore. You have the option of having the accident repairs carried out at the Sole Agent's workshop.

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](http://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: Prime Street Capital Pte Ltd

I/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).

0503972000

INSURHUB LLP

9 TEMASEK BOULEVARD 31/F SUNTEC TOWER 2  
SINGAPORE 038989

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Manik*

AIG Asia Pacific Insurance Pte. Ltd.  
AUTHORISED REPRESENTATIVE

De Shun Marcus Leow