

NATIONAL Assessment Centre Services

Form 1 (April 2015)

NA1904979

Date In: 08/06/2019 12:18	Job description	Date & Time Completed	Done by
Ref No: NA1904979/1670/4	SAS e-filing		
Veh No: SJR 5080S	E-mail (within 4hrs, AIC 2hrs)		
D.O.A: 27/06/2019 08:15	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: SJR 5080S	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

NA1904979	Invoice Preparation Checklist	Am't (\$) In Bill	Am't (\$) Add. Bill
Claimant's Particulars:	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	For claims against INC Only (wef 10 Jan 2005)		
Cal. 1:	6) TR: Re-inspection \$75		
Cal. 2/3:	7) N1: Idau DA + SMRT Survey \$160		
1/1	8) NTUC Additional Services:		
	9) N11: TP (Non-INC) against INC \$20		
	10) N12: Idau Mobile \$0		
	Invoice dated	Fax Charged	
	Printed at	Fine Charged	

07-MAY-2019 16:39

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	02/07/2019 12:18
Date Of Accident	27/02/2019 08:15
Exact Location Of Accident	ALONG THOMSON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR5180S
Insured/Policyholder	
Name Of Registered Owner	MARIC & PARTNERS PTE LTD
Co Reg No	20162071N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86661789
Alternative Phone No	OFFICE-86661789

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC
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
Fleet Policy	NO
Policy Number	999994654
Cover Note Number	

Driver

Name of Driver	NG TECK CHYE
NRIC No	S9103608H
Date Of Birth	06/02/1991
Occupation	OUTDOOR
Date Of Driving Pass	14/04/2012
Driving Experience	6 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86661789
Fax Number	
Contact Number	OTHERS-86661789
Email Address	NOEMAIL

Address	BLK 784A WOODLANDS RISE #03-42
Postcode	733784
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	NO COLLISION
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190308/2134

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	SLV5488B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

SKETCH PLAN

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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 Signature
Name:
NRIC/ID No:

02/07/2019
Rashid Hassan

SKETCH PLAN

No sketch

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I am not the driver. I am the person-in-charge of Maric & Partners Pte Ltd.

Refer to police report T/2019 0308/2134

IO Phillip: 9817 1397

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:

Supporting Centre Personnel's Signature
Name:
NRIC/FIN No:

02/07/2019
Rohi Limbong



**SINGAPORE
POLICE FORCE**



T/20190308/2134

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20190308/2134

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/03/2019 16:30		Vide Report No.: E/20190227/0046		Station Diary No.:	
Informant's Particulars					
Name of Informant: NG TECK CHYE			Address: 450B SENGKANG WEST WAY #21-339 FERNVALE CREST SINGAPORE 792450		
ID Type / ID No.: NRIC NO / S9103608H			Contact No.: Home/Office: Mobile: 86661789		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 28	Date of Birth: 06/02/1991	Type of Informant: EMPLOYEE OF LEASING COMPANY		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: OPERATIONS MANAGER		Driving Licence Information: Class:		Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 27/02/2019 08:15	Type of Location:
Location: Along Road 1 THOMSON ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJR5180S						0



**SINGAPORE
POLICE FORCE**



T/20190308/2134

2 of 3

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

Report No. T/20190308/2134

CONTINUATION OF REPORT

Brief Details.

WE RENTED OUT ONE OF OUR CARS WITH VEHICLE NUMBER: SJR5180S ON 17/1/19 TO A MALAY PERSON, MUHAMMAD NUR ALIF BIN AZHAR, IC: S9628749F. AFTER CHECKING HIS DOCUMENTS, AN EMPLOYEE, GOH SHU FANG (G8523795R) RENTED OUT THE CAR TO HIM FOR 3 MONTHS. SOON AFTER THAT, WE REPO HIS CAR AS HE HAD OUTSTANDING FEES. WHEN HE CAME BACK FOR THE VEHICLE, THE SAME EMPLOYEE GAVE BACK THE VEHICLE BUT SHE COULD NOT REALLY REMEMBER THE FACE.

ON 28/2/19 MY COMPANY RECEIVED A CALL FROM TRAFFIC POLICE SAYING THAT ONE OF OUR CARS WITH THE CAR PLATE NO: SJR5180S THAT WE RENTED OUT WAS INVOLVED IN AN ACCIDENT. WE THEN CONTACTED HIM AND ASKED HIM TO MAKE A REPORT AND HE ACKNOWLEDGED. THEN AFTER THAT WE WENT TO REPO THE CAR. WHEN WE REACHED THE MULTI-STOREY CARPARK OF BLK 524A TAMPINES CENTRAL 7 WE SAW THAT THE CAR HAD THE NUMBER PLATES REMOVED SO WE ASSUMED HE ABANDONED THE CAR AND REPO THE CAR.

THEN WE WERE ASKED TO COME TO TP TO MEET IO PHILIP. THE IO TOLD US THAT THE HIRER WAS NOT THE ONES WE THOUGHT WE RENTED OUT TO.



AIG Asia Pacific Insurance
Pte Ltd (201009404M)
AIG Building
78 Shenton Way #07-16
Singapore 079120

www.aig.com.sg

T (65) 6419 3000
F (65) 6835 7416

Your Ref: SJR5180S
Our Ref: 1468290887SG-001

Date: 10 June 2019

Manic & Partners Pte Ltd
9 Tagore Lane #03-04
9 @ Tagore
Singapore 787472

FINAL REMINDER
Dear Sir/Madam,

WITHOUT PREJUDICE

**ACCIDENT INVOLVING SJR5180S AND SLV5488B ON 27 February 2019 ALONG
THOMSON ROAD SINGAPORE**

We refer to the above matter.

We would like to inform you that we have received a claim from a third party involved in the above auto accident.

Our record shows that you have not reported the accident to us. We would appreciate it if you could urgently file a report at our approved reporting centre.

You should also IMMEDIATELY forward us by hand any letters or Courts Summons received from the other party involved in the accident. You should not negotiate, admit liability or offer payment to them.

We would like to bring to your attention that under Policy Condition 5A, we shall have full discretion in the process and settlement of the said third party claim.

Your NCD (No Claim Discount) will be reduced by 30% (20% for motorcycle/commercial vehicles) if a claim is made under your policy.

To enable us to look into the matter immediately, please let us hear from you within seven (7) days from date of this letter. In accordance with the policy conditions, we reserve the right to repudiate the said claim to you should you not give proper notice to us of any occurrence which may give rise to it.

Kindly contact our Call Centre at (65) 6419-3000 if you have any further enquiries.

Yours faithfully,
Claims Department
AIG Asia Pacific Insurance Pte Ltd

This is computer-generated document, no signature is required.

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 27/02/19 (dd/mm/yy) Time of Accident: 08:15 (24-HR-FORMAT)
Vehicle No: SJR 5180S Vehicle Make & Model: Honda Civic (silver)
Exact location of Accident: Thomson Road 1
Policyholder's Name / IC No: MARIC & PARTNERS PTE LTD 201620701N
Driver's Name / IC No: Ng Teck Chye / 5910360871 (As Above) ☐
Driver's Contact No: 8666 1789 Company Contact No: _____
Driver's Address: 9 TAGORE LANE #03-04 9 @ TAGORE S787472
Insurance Company: AIG Email address (if any): _____

Relationship between Owner & Driver: Employee 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?

Occupation (nature of job) ☐ Indoor / ☒ Outdoor

☐ Private use / ☒ Work purpose

No. of Passengers (Including Driver): 0

Passenger Name: _____
Passenger Name: _____

Gender: _____
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: 10 Ubi Ave 3

The Other Party(s) Details:

1. Driver's Name / IC No: _____ Vehicle No: SLV 5488 B

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, IDMC should not take the report. Investigation will be discontinued after one week.

XX

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9103608H



Name

NG TECK CHYE

黄德财

Race

CHINESE

Date of birth

06-02-1991

Sex

M

S9103608H

Country/Place of birth

SINGAPORE

For LKK/NAC Use Only



5776160

NRIC No. S9103608H



Date of issue

28-07-2017

For LKK/NAC Use Only

APT BLK 784C WOODLANDS RISE #03-42
SINGAPORE 733784

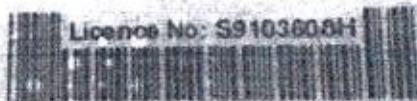
NRIC No: S9103608H

Date: 16/03/2019

DRIVE VEHICLES IN THE FOLLOWING CLASSES:
EFFECTIVE DATE

Motor vehicles with ≤ 7 passengers, exclusive 14 Apr 2012
Motor vehicles ≤ 2500 kg

For LKK/NAC Use Only



Licence No: S9103608H

REPUBLIC OF SINGAPORE



NRIC No. S9103608H

NG TECK CHYE

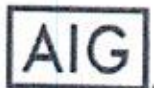
For LKK/NAC Use Only

Birth Date 06 Feb 1991

Issue Date 14 Apr 2012



002059620E



HOTLINE TEL (65) 6419-3000
FAX (65) 6415-3723

CERTIFICATE OF INSURANCE

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)

M 2-400

THIRD PARTY		COMMERCIAL MOTOR		(The below excess is subject to GST)	
CERTIFICATE NO.		SJR5180S		POLICY EXCESS	S\$1000.00 (Sect II)
POLICY NO.		999994654		WINDSCREEN EXCESS	NA
1) VEHICLE REGISTRATION NO.				SUM INSURED	NA
2) NAME OF INSURED				INSURING WITH COE/PAFF	NA
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT				SJR5180S	
4) DATE OF EXPIRY OF INSURANCE				MARIC & PARTNERS PTE LTD	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*				27 June 2018	
				24 April 2019	
<p>Any person who is driving on the Insured's order or with their permission.</p> <p>S\$1,000.00 Section II Excess is applicable for driver who is above 22 years old and/or with minimum 2 years driving experience.</p> <p>S\$2,000.00 Section II Excess is applicable for drivers who is 21 years old with minimum 1 year driving experience.</p> <p>The policy does not cover drivers who are below 21 years old or less than 1 year driving experience.</p>					
<p>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or 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.</p>					
6) LIMITATION AS TO USE*					
1) Use for social, domestic, pleasure purposes and business purposes of Insured					
2) Use for social, domestic, pleasure 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.					
<p>The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.</p>					
LOSS OF USE		Not Included			
HIRE PURCHASE COMPANY		NA			
<p>*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</p>					

I/ 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 27 Jun 2018

500656-000
Cowell Insurance (Agency) Pte. Ltd.
8 Burn Road
#09-09 Trivex
Singapore 369977

AKG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

ORIGINAL

55P06C

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: 190469085914 Vehicle Registration No: SJR 5780 S
Name (as shown in NRIC): NG JACK CHYE NRIC/FIN/Passport No: S90236084
(* Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address: _____ Singapore ()
Contact (Tel): _____ Mobile No.: 86661789
Email Address: _____
Date of Accident: 27/07/2019 Time of Accident: 08:15
Place of Accident: Along Thomson Road
Insurance Company: NG

(B) ADDITIONAL INFORMATION / AMENDMENTS

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

DATE OF ACCIDENT 27/07/2019

Policyholder / Driver's Signature
Date:

07/07/2019
Reporting Centre Personnel's Signature
Name: Ros L. Lim
NRIC/FIN No.:
Date: