

# NATIONAL Assessment Centre Services.

[Print 1 Jan 2005]

MMA 119102897

Date In: 6/8/19 09:34	Job description	Date & Time Completed	Done by
Ref No: NA1AIG19013712164	SAS e-filing		
Veh No: SLV 1375 D	E-mail (within 2hrs, AIC 2hrs)		
DDA: 5/8/19 08:40	I-Motor Claim Form		
OD: <input checked="" type="checkbox"/> Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / GW: (

Tel:

Fax:

TP Particulars:

Veh No:

SDQ 225 3-L

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 repaler.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In (

/ Towed-In (

); Invoice: YES (

NO (

); Towing Co: (

Remarks:

(INC 10/11/19 06:16)

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

Action

MA1905860

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Wksp-In-Charge):

Auditors' Comments:

Date:

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Invoice Item	Amount (\$)	Amount (\$)
1) AIR: Accident Reporting (\$30)	30.00	
2) DA: Damage Assessment (\$100); INC (\$80)		
3) TP: Towing Fee \$40/\$45		
4) PT: Follow-Through Survey \$120		
5) PT: Follow-Through Survey (Resurvey) \$30		
For claiming against INC Only (wef 10 Jan 2005)		
6) TR: Re-inspection \$75		
7) NI: Idao DA + SMRT Survey \$160		
8) NTUC Additional Services:-		
OD:		
*N5: Courtesy Car / Tpt Allowance \$5		
*N6: Repair Coordination \$10		
*N7: Post Repair Inspection \$25		
*N8: DV / Collect Excess Coordination \$5		
TP (N11): TP (N-on INC) against INC \$20		
9) N12: Idao Mobile \$0		
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	06/08/2019 09:34
Date Of Accident	05/08/2019 08:40
Exact Location Of Accident	CANTONMENT RD TWDS KEPPEL RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV1375D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	201533046C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83802233

### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL HYBRID
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	999994387
Cover Note Number	-

### Driver

Name of Driver	JOERO SHEMANDER HON JU WOEI
NRIC No	S1697230D
Date Of Birth	05/12/1965
Occupation	OUTDOOR
Date Of Driving Pass	17/05/1991
Driving Experience	28 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90018668
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 36 BEO CRES #10-43
Postcode	160036
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?	YES
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)	2
Passenger 1	NAME: : GARY GENDER: : MALE

#### 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

REFER TO STATEMENT

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDQ2253L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SHANKAR RAMESH
NRIC/Passport Number	
Contact Number	97268588
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	JOERO SHEMANDER HON JU WOEI
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLV1375D
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

**DETAILS OF INJURED PERSON 2**

Name	GARY
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLV1375D
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	



## 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:

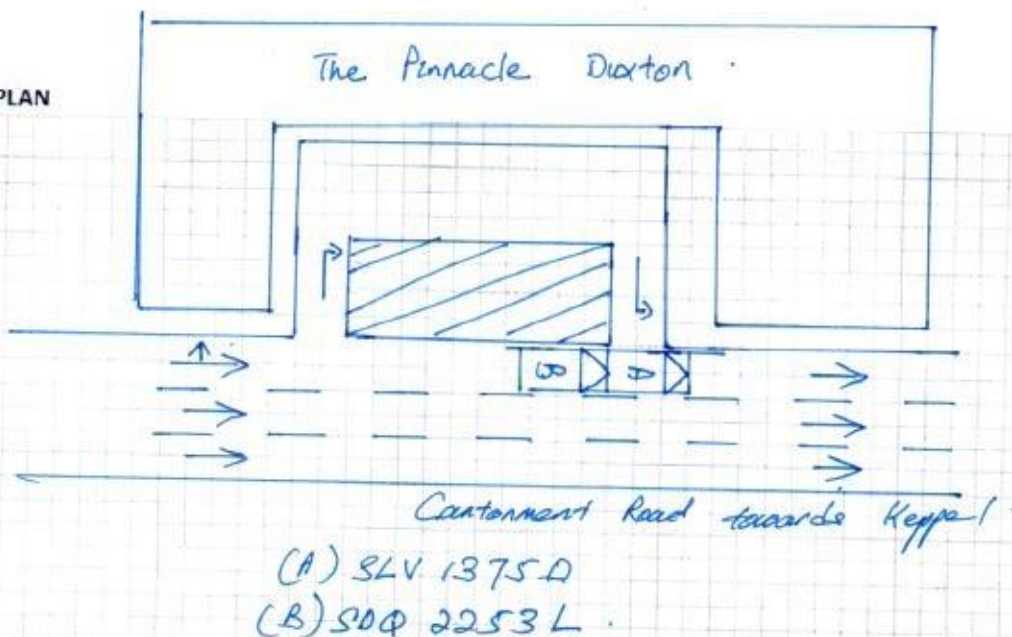


Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 05/08/19 at @ 0840 hrs, I was travelling in my vehicle (SLV 1375 D) along Cantonment Road towards Kappa 1 in front of The Pinnacle Duxton on the extreme left lane. The traffic was very heavy and was moving slowly and stopped. Suddenly a car (SDQ 2253 L) from behind, collided onto the rear portion of my vehicle.

## 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)

Reporting Centre Personnel's Signature  
Name:



<b>Vehicle No.</b>	SLV 1375D.	Model / Make	Honda Vezel Hybrid.
Date of Accident	25/08/19		
Time of Accident	0840 HRS		
Location of Accident	Cantonment Road towards Koppel in front of The Pinnacle Duxton.		
Exact purpose use during accident	Chauffeur.		
<b>Name of Owner</b>	Twincar Leasing Pte Ltd.		
Telephone No.	H/P: 8380 2233	Home:	Office:
NRIC	201533046 C.		
Address	2, Kaki Bukit Ave 2 #01-17, Kaki Bukit Autohub (S) 417921		
Claim type	OD	THIRD PARTY REPORTING ONLY	
Insurance Company	AIG.		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	99999 4387		
<b>Name of Driver</b>	As Above If No, Joero Shemander Hon Ju Wei		
NRIC	S1697230D	Any Passengers:	01 (m)
Date of birth	05/12/1965		
Occupation	Outdoor	/	Indoor
Driving License Pass Date	17/05/1991		
Gender	Male	/	Female
Contact No.	H/P: 9001 8668	Home:	Office:
Address	BLK 36, Bee Crescent #10-43 (S) 160036.		
Driver have any own vehicle	No,	If yes, Reg No.	
Relationship	Employee,	If no, state <i>husb</i>	
Weather condition	Clear	Raining	Other
Road Surface	Dry	Wet	Other
Any Injuries	No,	If Yes, Who?	
Name And Contact No.	Joero Shemander Hon Ju Wei (H/P: 9001 8668)		
Name And Contact No.	Gary (H/P: 9650 1461)		
Police Report	No,	If Yes, Where?	
<b>Vehicle B No.</b>	SDQ 2253 L.	Any Passengers:	
Name of Driver	Shankar Ramesh	Contact No.:	9726 8588.
<b>Vehicle C No.</b>		Any Passengers:	
<b>Vehicle D No.</b>		Any Passengers:	
<b>Vehicle E no.</b>		Any Passengers:	
<b>Vehicle F No.</b>		Any Passengers:	
<b>Vehicle G No.</b>		Any Passengers:	
Witness Name	N-A	Witness Contact:	N-A.
Accident Portion	Rear Portion.		
Camera Recorder	Yes/No		
Email Address	joero.s.hon@gmail.com		
<b>PARTICULAR WORKSHOP</b>	N-51		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Zi Peng		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg		



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S1697230D**

Name: **JOERO SHEMANDER HON JU WOEI**

Birth Date: **05 Dec 1965**

Issue Date: **13 May 2004**

001217153E

*For LKK/NAC Use Only*

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S1697230D**

Name: **JOERO SHEMANDER HON JU WOEI**

韩宇伟

Race: **CHINESE**

Date of Birth: **05-12-1965** Sex: **M**

Country of Birth: **SINGAPORE**

*For LKK/NAC Use Only*

Land Transport Authority

**VOCATIONAL LICENCE**

Licence No: **S1697230D**

Name: **JOERO SHEMANDER HON JU WOEI**

Card Issue Date: **28/12/2017**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

*For LKK/NAC Use Only*

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

Class	Description	PAS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	17 May 1991

Licence No: **S1697230D**

NP 428A

*For LKK/NAC Use Only*

0182634

NRIC No: **S1697230D**

Blood Group: **A+** Date of issue: **12-12-1991**

Address: **APT BLK 36 BED CRESCENT #10-43 SINGAPORE 160036**

NRIC No: **S1697230D** Date: **18-08-2000** No: **3669710**

*For LKK/NAC Use Only*

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	28/12/2017

*For LKK/NAC Use Only*

PDVL/TDVL  
33 000 00000  
263608





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)

MZ 400

(The below excess is subject to GST)

COMPREHENSIVE	COMMERCIAL MOTOR	POLICY EXCESS	S\$2000.00 (Sect I & II)
CERTIFICATE NO.	SLV1375D	WINDSCREEN EXCESS	S\$100.00
POLICY NO.	999994387		

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE  
FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

SUM INSURED YES

INSURING WITH COE/PARF YES

SLV1375D

Twincar Leasing Pte Ltd

19 October 2018

18 October 2019

Any person who is driving on the Insured's order or with their permission.

S\$2,000.00 Section I & S\$2,000.00 Section II Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience in Singapore.

Up to \$250.00 one-time waiver excess under section I for build in car camera and applicable on non at fault claim only. (Valid for 6 months).

Accident repair can be carried out at any of your preferred workshop for repair subjected that all claim matters does not involved any lawyer services.

An additional excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.

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.

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.

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.

It is hereby agreed and acceptance that we would make special arrangement to this workshop known as N-51 Automotive Pte Ltd to be your accident claim reporting center based on the conditions below.

LOSS OF USE	Not Included
HIRE PURCHASE COMPANY	MAYBANK

\*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.

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 17 Oct 2018

AIG Asia Pacific Insurance Pte. Ltd.

Swift Link Insurance Agency - 502117

61 Ubi Avenue 2

#09-04A Automobile Megamart

Singapore 408898

ORIGINAL

AUTHORISED REPRESENTATIVE

SSPOEC

## Register New Vehicle (Acknowledgement)

### Vehicle Particulars

Vehicle No.:	SLV1375D		
Vehicle Type:	Z11 - Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	HONDA	Vehicle Model:	VEZEL HYBRID 1.5X AUTO
Chassis No.:	RU31256486	Engine No.:	LEB5956504
Motor No.:	H12366397	Trailer Chassis No.:	-
Propellant:	Petrol-Electric	Passenger Capacity:	4
Engine Capacity:	1496 cc	Power Rating:	22.0 kW
Maximum Power Output:	112.0 kW ( 150 bhp )		
Unladen Weight:	1280 kg	Maximum Laden Weight:	1555 kg
Primary Colour:	White	Secondary Colour:	-
First Registration Date:	22 Dec 2017	Original Registration Date:	22 Dec 2017
Manufacturing Year:	2017	Open Market Value:	\$25,666.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$2,500.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$20,000.00 (100%), next \$5,666.00 (140%)
Actual ARF Paid:	\$5,000.00		

### Owner Particulars

Owner Name:	TWINCAR LEASING PTE LTD
Owner ID Type:	Company
Owner ID:	201533046C
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block /House No.:	2
Registered Street Name:	KAKI BUKIT AVENUE 2
Registered Unit No.:	# 01 - 17