

# NATIONAL Assessment Centre Services

Form 1 (Jan 2011)

MMAY/19/03206

Date In: 06/08/2019 15:13	Job description	Date & Time Completed	Done by
Ref No: N/A	SAS e-filing		
Veh No: 5555C	E-mail (within 4hrs, AIC 2hrs)		
D.O.A: 05/08/2019 12:00	I-Motor Claim Form		
OD: TP (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 /MNC Assign Wksp / QW: ( )	Tel: ( )	Fax: ( )
TP Particulars:	Veh No: JKR 8085	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 repair.
( ) 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

MMAY/19/06018	Invoice Preparation Checklist	Amr (\$)	Amr (\$)
Client/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) PT: Follow-Through Survey (Resurvey) (\$30)		
Auditors' Comments:	For claimant against INC Only (waf 10 Jan 2019)		
Cal 1:	6) TR: Re-inspection (\$15)		
Cal 2/3:	7) N1: Idm DA + SMRT Survey (\$160)		
	8) NTUC Additional Services:		
	1211		
	* N3: Courtesy Car / Tpt 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: Idm Mobile (\$0)		
	Invoice dated	Pen Charged	
	Invoice dated	Fee 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 06/08/2019 15:13  
Date Of Accident 05/08/2019 12:00  
Exact Location Of Accident ALONG FARRER ROAD TOWARDS PIE  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SJA5254C  
**Insured/Policyholder**  
Name Of Registered Owner VIVIAN SHAH YIEN (VIVIAN SHI YAN)  
NRIC No S7344805J  
Email Address SHAHYIEN@GMAIL.COM  
Mobile Phone No (LOCAL) +65-98365325  
Alternative Phone No OTHERS-98365325

### Vehicle Particulars

Manufacturer SUZUKI  
Model SWIFT-1.4 (A)  
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 REPORTING ONLY  
Vehicle Category PRIVATE CAR

### Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number 2100478357-02  
Cover Note Number

### Driver

Name of Driver VIVIAN SHAH YIEN (VIVIAN SHI YAN)  
NRIC No S7344805J  
Date Of Birth 21/11/1973  
Occupation INDOOR  
Date Of Driving Pass 06/12/2005  
Driving Experience 13 YEARS AND 7 MONTHS  
Gender FEMALE  
Mobile Number (LOCAL) +65-98365325  
Fax Number  
Contact Number OTHERS-98365325  
Email Address SHAHYIEN@GMAIL.COM

Address BLK 121 KIM TIAN PLACE  
#13-76  
Postcode 160121  
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 COLLISION - HEAD TO REAR  
Weather Conditions CLEAR  
Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? YES  
Foreign Vehicle Registration Number JSR3029 (PRIVATE CAR)  
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) 1

#### Details of Police Action

Was the accident reported to the police? YES  
If Yes, Please state which Police Station  
Police Station Name QUEENSTOWN N.P.C  
Police Station Address ROAD: 3 QUEENSWAY #01-03, POSTCODE: 149073, COUNTRY: SINGAPORE  
Police Station Contact TEL NO: 1800-4719999 - FAX NO:  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

#### Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20190806/2050

#### 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 JSR3029  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver MOHD RAZALI SIDE EK BIN JAMALUDIN  
NRIC/Passport Number 850425065223  
Contact Number +60197413741  
Address  
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

3

Passenger 1

NAME: :

GENDER: :

Passenger 2

NAME: :

GENDER: :

#### DETAILS OF INJURED PERSON 1

Name

VIVIAN SHAH YIEN (VIVIAN SHI YAN)

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

SJA5254C

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:

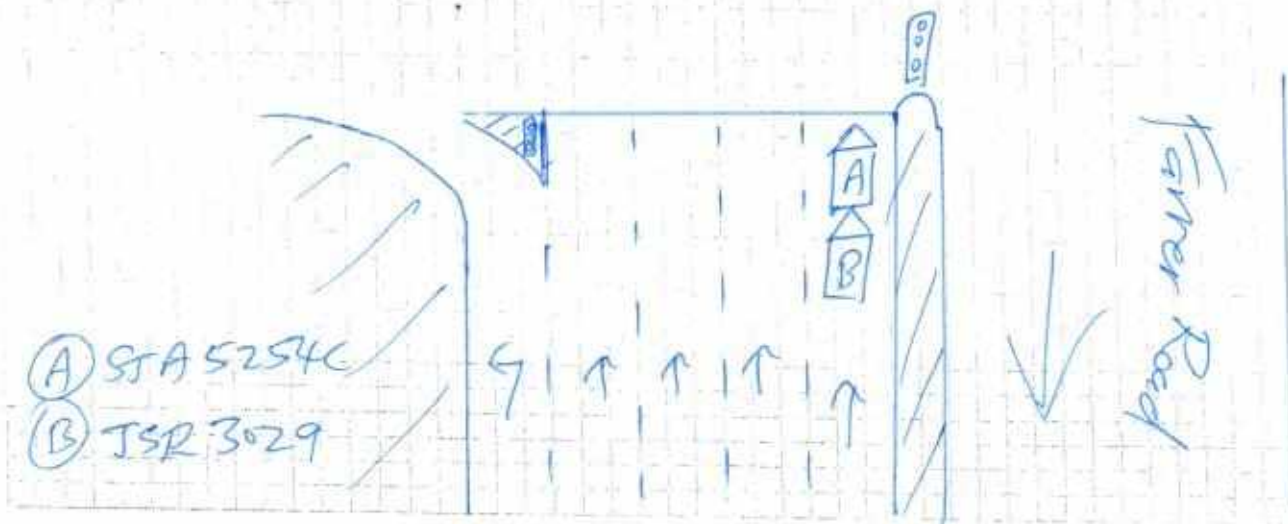
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

I was stationary at the traffic junction waiting for the light to turn green when vehicle (B) came from behind and hit my car (A).

We exchanged particulars thereafter.

I wished to state that driver of vehicle (B) told me that he could not stop in time.

I am doing this report because I don't feel well and need to visit the doctor.

POLICE REPORT 7/24/08/2020

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:

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





**SINGAPORE  
POLICE FORCE**



T/20190806/2050

1 of 4

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

Report No. T/20190806/2050

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 06/08/2019 13:00		Vide Report No.:		Station Diary No.: 43
<b>Informant's Particulars</b>				
Name of Informant: VIVIAN SHAH YIEN		Address: APT BLK 121 KIM TIAN PLACE #13-76 SINGAPORE 160121		
ID Type / ID No.: NRIC NO / S7344805J		Contact No.: Home/Office:		Mobile: 98365325
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Female	Age: 45	Date of Birth: 21/11/1973	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: IMDA - SENIOR MANAGER		Driving Licence Information: Class: 3A		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 05/08/2019 12:00	Type of Location: Straight Road
Location: Along Road 1 FARRER ROAD				
TOWARD PIE				
Weather: Clear	Road Surface: Wet		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume: No Traffic	
Type of Collision: between moving vehicle and stationary vehicle head to rear			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JSR3029	Car				Slightly Damaged	2
SJA5254C	Car	SUZUKI	SWIFT 1.4 AT SPECIAL EDITION	Blue	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJA5254C	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100478357-02	10/08/2018	09/08/2019



**SINGAPORE  
POLICE FORCE**



T/20190806/2050

2 of 4

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

Report No. T/20190806/2050

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	MOHD RAZALI SIDEK BIN JAMALUDIN	ID No.	850425065223
Related Vehicle	JSR3029 (Car)	Contact No.	+60197413741
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL 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	VIVIAN SHAH YIEN	ID No.	S7344805J
Related Vehicle	SJA5254C (Car)	Contact No.	98365325
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 5/8/2019 at about 12pm, I was traveling along FARRER ROAD toward PIE driving my vehicle with the carplate number of SJA5254C and I was at the stationary position waiting at the traffic junction waiting for the traffic light to turn green. Suddenly, I felt an impact from my rear side and I got off my vehicle and I saw an Malaysia car with the car plate number of JSR3029 hit my rear side of my vehicle causing a dent at the bumper as the rear side to be damage.

As there were no traffic at the point of time, I asked the driver and he told me that he was unable to stop in time. We exchanged particulars and agree to settle privately. The driver also gave me \$300 Ringget as he does not have any Singapore Dollar, verbally he also said to pay me a sum of money on a monthly basis for the repair.

No one was injure during the moment of accident. no police was call to scene. The cost to repair for my damage bumper was \$1200/- SGD.

I lodging this police report for my own record purposes as well as I don't feel well and need to visit the doctor.





**SINGAPORE  
POLICE FORCE**



T/20190806/2050

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

4 of 4

Report No. T/20190806/2050

**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:

D /

Sgt 2 CHIEW BENJAMIN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

06/08/2019 13:00

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No: 35575151

SN 49

Authentication Stamp

NP168

SIGNATURE

Classification Of Case:

# JMC & POLICE REPORT

## PERSONAL PARTICULARS

Date of Accident: 05/08/2019

Time of Accident: 12 00pm (24Hrs)

Vehicle No: STA5254c

Vehicle Make/Model: Suzuki swift 1.4

Exact Location of Accident: Along Farrer Road

Owner's Name/NRIC: Vivian Shah Yien / S7344805J

Driver's Name/NRIC: Vivian Shah Yien / S7344805J

Driver's Contact: 98365325 Insurance Co & Policy No: AIG

Driver's Email Address: shahyien@gmail.com

Relationship between Owner & Driver: Spouse/Children/Friend/Parents/Others specify: \_\_\_\_\_

What do you wish to claim (Please circle one only)

1) Own Insurance 2) Other Vehicle (The one you want to claim against) 3) Reporting (For Recording Purposes)

Exact Purpose for which the vehicle was being used at time of accident? (Please circle one only)

Private Use / Work Purpose

Weather Condition & Road Conditions?

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet

Occupation

Indoor / Outdoor

Any Injuries? (MC of 3 Days or more, police report is required)

Yes / No

If Yes, which police station? \_\_\_\_\_

The Other Party (Vehicle B) Details

Driver's Name/IC: \_\_\_\_\_

Vehicle No: JSR 3029

Insurance Company: \_\_\_\_\_

Driver's Contact: \_\_\_\_\_

(If more than 2 vehicles involved, please indicate the other party vehicle numbers below)

Other Vehicle (Vehicle C): \_\_\_\_\_

Independent Witness (If Any): \_\_\_\_\_ Contact: \_\_\_\_\_

Preferred Workshop (If Any): \_\_\_\_\_ Contact: \_\_\_\_\_

\* If no proper document are produced, IDAC should not file the report.

\* Information will be discarded after one week.



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

License Number: **S7344805J**

**For LKK/NAC Use Only**

**VIVIAN SHAH YIEN**  
(VIVIAN SHI YAN)

Date of Birth: 21 Nov 1973

Issue Date: 06 Dec 2005

0013886620

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S7344805J**

**For LKK/NAC Use Only**

**VIVIAN SHAH YIEN**  
(VIVIAN SHI YAN)

石 燕

Race: **CHINESE**

Date of birth: 21-11-1973

Sex: **F**

Country/Place of birth: **SINGAPORE**

S7344805J

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:**

Class 3A Motor cars without clutch pedals (Auto) <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals <= 2500kg

**For LKK/NAC Use Only**

**THOMSON**

MGT OFFICE EMAIL: [mgt.thomson@impre](mailto:mgt.thomson@impre)

MGT OFFICE TEL: 3 Lorong Puntong Singapore 376444

Issue Date: 06 Dec 2005

0013886620

**For LKK/NAC Use Only**

**NRIC No: S7344805J**

**Date of issue: 07-12-2015**

**APT BLK 121 KIM TIAN PLACE #13-76 SINGAPORE 160121**

**NRIC No: S7344805J**

**Date: 30/07/2017**



# CERTIFICATE OF INSURANCE

## AUTOPLAN PRIVATE VEHICLE

Name of Policyholder : Vivian Shah Yien (Vivian Shi Yan)  
Period of Insurance : 10 Aug 2018 To 09 Aug 2019  
Engine No. : K14B1124419  
Chassis No. : JSAFZC82S00327044

Vehicle No. : SJA5254C  
Policy No. : 2100478357-02  
Endorsement No. :  
Issued Date : 06 Jul 2018

### ABOUT THE COVER

Make/Model : SUZUKI Swift Special Edition

Engine Capacity/Tonnage : 1,372.00 CC

Driver Restriction : NA

Sum Insured : Market Value  
Off Peak Car : No

First Year of Registration : 2016  
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 \$1,000 as "Young and/or Inexperienced Driver Excess" ("YIDRE") 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 95 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)

Vivian Shah Yien (Vivian Shi Yan) - \$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 can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 8338 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: HONG LEONG FINANCE LTD

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).

0030213000

AIG ASIA PACIFIC INSURANCE PL  
78 SHENTON WAY #07-16 AIG BUILDING  
SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.  
AUTHORISED REPRESENTATIVE

SIPGCC

78 Shenton Way #07-16 AIG Building 079120 | T: +65 6619 3000 | F: +65 6415 3723 | [www.aig.com.sg](http://www.aig.com.sg)

AIG Asia Pacific Insurance Pte. Ltd.