

# NATIONAL Assessment Centre Services

[wef 1 Jan'09] **NA1191103M**

Date In: <b>21/1/19-10:11</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA/016/1921477424</b>	SAS e-filing		
Veh No: <b>508 6856</b>	E-mail (within Shrs, AIC 2hrs)		
D.O.A: <b>21/1/19-19:30</b>	i-Motor Claim Form		
OD <b>TP</b> 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: <b>508 6856</b>	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 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

<b>NA1906396</b>	<b>Invoice Preparation Checklist</b>	Amf (\$)	Amf (\$)
		Inc Bill	Add Bill
<b>Claimant's Particulars :-</b>	1) AR : Accident Reporting (\$30);		
<b>Driver/Owner:</b>	2) DA : Damage Assessment (\$100); INC (\$80)		
<b>Contact No:</b>	3) TF : Towing Fee \$40/\$45		
<b>Damaged Portion:</b>	4) FT : Follow-Through Survey \$120		
	5) FT : Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2009)		
	6) TR : Re-inspection \$75		
	7) N1 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
<b>QC Checked by (Engr-In-Charge):</b>	<b>Q1:</b>		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
<b>Auditors' Comments :-</b>	<b>TP (N11) : TP (Non INC) against INC</b>	\$20	
<b>Ref 1:</b>	<b>9) N12: Idac Mobile</b>	\$0	
<b>Ref 2 / 3:</b>	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	22/08/2019 10:11
Date Of Accident	21/08/2019 19:30
Exact Location Of Accident	PIE TWDS TUAS
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBB688G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	DERRICK CHEONG YEE JIN
NRIC No	S7918263Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97760688
Alternative Phone No	OFFICE-97760688

### Vehicle Particulars

Manufacturer	BMW
Model	M5 D/AB SR ABS HID DSC NAV HUD RR/ENT
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

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800008108-01
Cover Note Number	

### Driver

Name of Driver	DERRICK CHEONG YEE JIN
NRIC No	S7918263Z
Date Of Birth	24/06/1979
Occupation	INDOOR
Date Of Driving Pass	15/09/2009
Driving Experience	9 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97760688
Fax Number	
Contact Number	OFFICE-97760688
Email Address	NOEMAIL

Address	BLK 443B FAJAR ROAD #17-86
Postcode	672443
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?	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)	1

#### 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	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190822/7005.

#### 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	SLG7508C
Vehicle Make/Model/Colour	VOLVO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN ZHENG YAN
NRIC/Passport Number	S8104848G
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	DERRICK CHEONG YEE JIN
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SBB688G
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 willful misrepresentation or withholding of material facts may allow insurance companies to rescind its 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 fees 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.

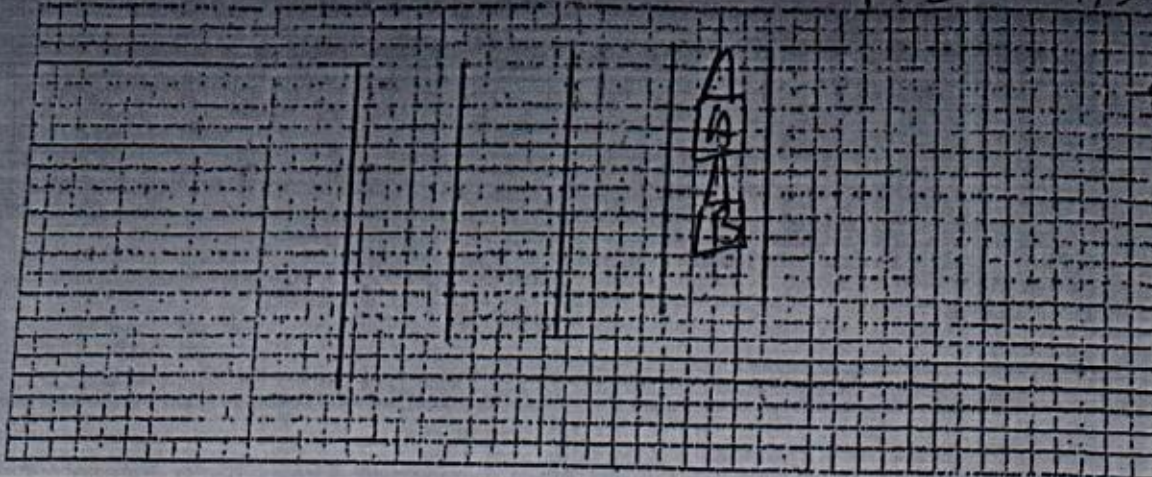
Policyholder's Signature  
Date & Time:

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

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



SKETCH PLAN



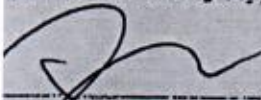
PIE TVAS A-  
SBB6880  
B-  
SLG7908

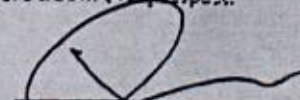
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Petr Tv Police Report.

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/PIN No.:



Date of Accident : 1930 Accident Time: 21/8/2019 (24-HR-Format)  
Accident Place : PIE (Tunnels) Tanjong  
Vehicle Reg. No. (Car Plate No.) : SBB 688G  
Vehicle Make/Model : BMW M5  
Insurance Company : AIG Policy No. :  
Owner or Company Name / IC No. : Derrick Cheong Yee Jin  
Owner or Company Contact No. : Owner's Hp : Company Tel :  
DRIVER'S Name / IC No. : S7918 2637  
DRIVER'S Date Of Birth : 24/6/1979 DRIVER'S License Pass Date : 15/9/09  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner  
DRIVER'S Address : 443B FAJAR ROAD #17-86  
DRIVER'S Contact No. / Alt No. : 1) 97760688 2) :  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address :  
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
Number of Passengers (Including Driver): 1

Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particular (if any)

Vehicle Reg. No: SLG 7508C  
Vehicle Make/Model: Volvo  
Name Driver: Tan Zheng Tan  
IC No. Driver: S8104848G  
Driver's Contact & Add: \_\_\_\_\_

Vehicle Reg. No: \_\_\_\_\_  
Vehicle Make/Model: \_\_\_\_\_  
Name Driver: \_\_\_\_\_  
IC No. Driver: \_\_\_\_\_  
Driver's Contact & Add: \_\_\_\_\_





# SINGAPORE POLICE FORCE



T/20190822/7005

1 of 3

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

Report No. T/20190822/7005

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 22/08/2019 09:54		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: DERRICK CHEONG YEE JIN		Address: APT BLK 443B FAJAR ROAD #17-86 SINGAPORE 672443			
ID Type / ID No.: NRIC NO / S7918263Z		Contact No.: Home/Office:		Mobile: 97760688	
Nationality: SINGAPORE CITIZEN		Email: derrickcyj@gmail.com			
Sex: Male	Age: 40	Date of Birth: 24/06/1979	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: car dealer		Driving Licence Information: Class: 3		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/08/2019 19:30	Type of Location: Straight Road
Location:  PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SBB688G	Car	BMW	M5 D/AB SR ABS HID DSC NAV HUD RR/ENT	Grey		0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SBB688G	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800008108-01	07/02/2019	30/11/2019





**SINGAPORE  
POLICE FORCE**



T/20190822/7005

2 of 3

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

Report No. T/20190822/7005

**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	DERRICK CHEONG YEE JIN	ID No.	S7918263Z
Related Vehicle	SBB688G (Car)	Contact No.	97760688
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	22/08/2019	Date Discharge	22/08/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight

**Brief Details.**

on the stated time and date i was driving my vehicle bearing SBB688G . suddenly i felt a great impact on my rear vehicle SLG7508C white volvo hit me when i was stationary . i have a back pain and when to see a doctor .





**SINGAPORE  
POLICE FORCE**



T/20190822/7005

3 of 3

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

Report No. T/20190822/7005

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
JUREMAH BINTE AHMAD  
Contact No.: 65476219

Authentication Stamp

VP168

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:  
22/08/2019 09:54

Classification Of Case:



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7918263Z



Name  
DERRICK CHEONG YEE JIN

Race  
CHINESE

Date of birth  
24-06-1979

Sex  
M

Country of birth  
SINGAPORE

For LKK/NAC Use Only

1802000



Card No. S7918263Z

Date of birth  
18-07-2010

AP1 BLK 4430 FAJAR ROAD #17-80  
SINGAPORE 672443

Card No. S7918263Z Date 12/11/2018

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S7918263Z



Name  
DERRICK CHEONG YEE JIN

Birth Date 24 Jun 1979

Valid Until 15 Sep 2009

For LKK/NAC Use Only

001783166F



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

PASS DATE

Class 2 Motor Cars < 3500kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 3500kg 15 Sep 2009

NP 428A

License No. S7918263Z







# CERTIFICATE OF INSURANCE

## AUTOPLAN PRIVATE VEHICLE

**Name of Policyholder** : DERRICK CHEONG YEE JIN  
**Period of Insurance** : 07 Feb 2019 To 30 Nov 2019  
**Engine No.** : 21530191S63B44B  
**Chassis No.** : WBSFV92060DX95490

**Vehicle No.** : SBB688G  
**Policy No.** : 1800008108-01  
**Endorsement No.** :  
**Issued Date** : 25 Jan 2019

### ABOUT THE COVER

**Make/Model** : BMW M5 4.4 [Sedan]  
**Engine Capacity/Tonnage** : 4,395.00 CC  
**Driver Restriction** : Named Driver Basis  
**Person or Classes of Persons Entitled to Drive\*** :  
a) The Policyholder  
b) Any person who is named as a "named driver" under this Policy

**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2012  
**Insuring with COE/PARF** : Yes

**Age Condition** : Not Applicable  
**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.

\* 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 Outside Singapore Cover - \$0 Own Damage - \$3500 Theft - \$0 Theft Outside Singapore Cover - \$7000 Flood Cover - \$3500

**Section 2**  
Property Damage - \$0

**Windscreen** : \$100

#### Named Driver and Excess (where applicable)

DERRICK CHEONG YEE JIN - \$3500 (Own Damage) \$7000 (Theft Outside Singapore Cover), \$3500 (Flood Cover)

### 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 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: Dickson 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).

0504629000

CH AUTO SOLUTION  
BLK 17 EUNOS CRESCENT #12-2865  
SINGAPORE 400017

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Mobile*

**AIG Asia Pacific Insurance Pte. Ltd.**  
AUTHORISED REPRESENTATIVE

CH Auto Solution