

NATIONAL Assessment Centre Services.

(Ref: J2408)

12/10/2018 12:33

Date In: 12/10/2018 12:33	Job description	Date & Time Completed	Done by
Ref No: 12/10/2018 12:33	SAS e-illing		
Veh No: SBS 22274	E-mail (Vehicle then, AIC then)		
D.O.A: 12/10/2018 12:55	I-Motor Claim Form		
(ID) (1) Reporting Only	I-Motor W/O (With: OD then, TP then)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wkep / INC Assign Wkep / QW: (Tel:	Fax:
TP Particulars:	Veh No: SBS 22274	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 ()	

() 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: ()

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time:	Location:

1) AR: Accident Reporting (\$30)	INC (\$40)
2) DA: Damage Assessment (\$100)	INC (\$45)
3) TP: Towing Fee	\$120
4) FT: Follow-Through Survey	\$30
5) FT: Follow-Through Survey (Resurvey)	\$75
6) TR: Re-inspection	\$160
7) NI: Ideas DA + SMRT Survey	
8) NTUC Additional Services:	
ON:	
*NS: Courtesy Car / Tpt Allowance	\$3
*NS: Repairs Coordination	\$10
*N7: Post Repair Inspection	\$23
*N8: DV / Collect Excess Coordination	\$3
TP (Nil) / TP (Nil INC) against INC	\$30
9) NI: Ideas Mobile	
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	14/10/2019 12:33
Date Of Accident	13/10/2019 12:55
Exact Location Of Accident	UPP CHANGI RD TOWARDS CITY (OUTSIDE BEDOK POINT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS2227U
Insured/Policyholder	
Name Of Registered Owner	FERNANDEZ MARTHA JOSEPHINE
NRIC No	S1169113G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97545043
Alternative Phone No	OTHERS-97545043

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY-1.6 (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	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	1800146646
Cover Note Number	

Driver

Name of Driver	FERNANDEZ MARTHA JOSEPHINE
NRIC No	S1169113G
Date Of Birth	31/01/1956
Occupation	INDOOR
Date Of Driving Pass	28/07/1983
Driving Experience	36 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97545043
Fax Number	
Contact Number	OTHERS-97545043
Email Address	NOEMAIL

Address	BLK 185 BEDOK NORTH ROAD #01-76
Postcode	460185
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

PLEASE REFER TO SKETCH PLAN

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	SBS6800U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
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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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:

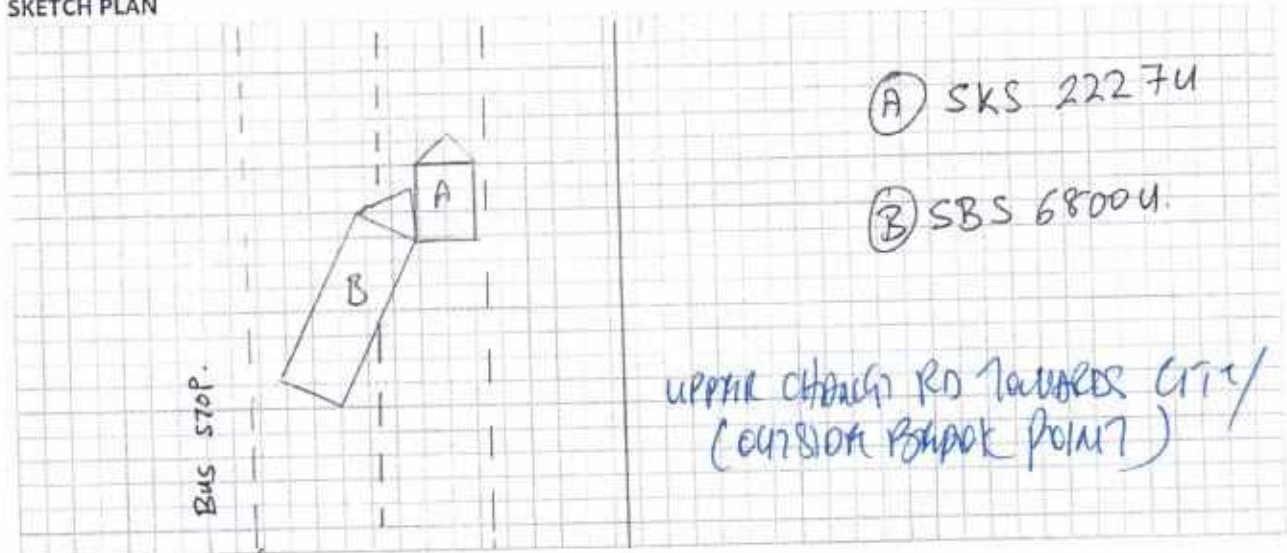
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: Kesli MOHAR
NRIC/FIN No.: 1411012919

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 13/10/2019 AT 1255HRS I WAS DRIVING ALONG UPPER CHANGI RD TWDS CITY. I WAS DRIVING STRAIGHT ALONG MY LANE. WHEN SUDDENLY VEHICLE B FROM THE BUS LANE CUT INTO MY LANE I TRIED TO AVOID HOWEVER VEHICLE B COLLIDED INTO 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)
Date & Time:

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

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 13-Oct-2019

ACCIDENT TIME: 1255

LOCATION: UPPER CHANGI RD TWDS CITY (OUTSIDE BEDOK POINT)

VEHICLE NUMBER: SKS2227U

INSURED NAME: FERNANDEZ MARTHA JOSEPHINE

NRIC / FIN: S1169113G

CONTACT: +65 9754 5043

MAKE: NISSAN

MODEL: SYLPHY 1.6 CVT

Are you claiming under your own insurance policy for repair to your vehicle?

() Yes, If No, Pls Select: (☒) Third Party () Reporting Only

INSURANCE COMPANY: AIG

TYPE OF POLICY: Comprehensive

POLICY NUMBER: 180046646

EXPIRY DATE: 05-Dec-2019

NAME DRIVER: FERNANDEZ MARTHA JOSEPHINE

NRIC / FIN: S1169113G

CONTACT: +65 9754 5043

DATE OF BIRTH: 31-Jan-1956

DRIVING PASS DATE: 28-Jul-1983

OCCUPATION: Indoor

GENDER: Female

EMAIL ADDRESS:

ADDRESS OF DRIVER: 185 BEDOK NORTH ROAD VISTA 8 #01-76 SINGAPORE 460185

Relationship Of The Driver With The Insured: Employee

Number Of Passenger Include Driver: 1 Driver

NAME	NRIC/FIN/BC	GENDER	INJURED
FERNANDEZ MARTHA JOSEPHINE	S1169113G	Female	

INJURY DETAILS: 0 Passenger(s)

Insurance Company Of Driver's Own Vehicle:

Weather Conditions: Clear

Road Surface: Dry

Was Any Foreign Vehicle Involved In This Accident? No

Convey By Ambulance: No

Was There Any Video Capture By Car Camera? No

Was There Accident Reported To The Police? No Police Report Number:

Details Of 3rd Party	Name	NRIC	Contact	No.of Paxs(incl' driver)
Veh B SBS6800U				Not Sure



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Fernandez Martha Josephine
Period of Insurance : 07 Dec 2018 To 06 Dec 2019
Engine No. : HR16933875C
Chassis No. : MNTBBAB17Z0033384

Vehicle No. : SKS2227U
Policy No. : 1800146646
Endorsement No. :
Issued Date : 24 Dec 2018

ABOUT THE COVER

Make/Model : NISSAN SYLPHY 1.6 PREMIUM
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
Insuring with COE/PARF : Yes

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 authorized 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" ("YIDR") if You are or Your Authorized 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

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 150) and Section 55 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) :

Fernandez Martha Josephine - \$600 (Own Damage)

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

- 1 TC AutoClinic Add: No 1, Sixth Lok Yang Road Singapore 620099 62622212
- 2 Automation Industrial Add: 19 Ubi Road 4 Singapore 408623 84909688
- 3 TC AutoClinic Add: 25 Leng Kee Road Singapore 159587 67038511 67038512 67038513
- 4 Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64864091 64864092 64864093
- 5 Tan Chong Motor Sales Add: 17 Lorong 8 Toa Payoh Singapore 319254 63570753 63570754

For other Approved Reporting Centres/AIG Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 6338 8200. Alternatively, you may refer to AIG website 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: DBS BANK 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. 150), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).)

0500610356

TAN CHONG CREDIT PTE LTD-LTP
911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE
SINGAPORE 589622 ANSP-MOTOR
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. J. J. J.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

55/2235

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	SKS2227U	Vehicle Scheme:	Normal
Vehicle Type:	P10 - Passenger Motor Car		
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	NISSAN	Vehicle Model:	SYLPHY 1.6 CVT
Chassis No.:	MNTBBAB17Z0033384	Engine No.:	HR16933875C
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Petrol	Passenger Capacity:	4
Engine Capacity:	1598 cc	Power Rating:	-
Maximum Power Output:	85.0 kW (113 bhp)		
Unladen Weight:	1205 kg	Maximum Laden Weight:	1605 kg
Primary Colour:	White	Secondary Colour:	-
First Registration Date:	07 Dec 2018	Original Registration Date:	07 Dec 2018
Manufacturing Year:	2018	Open Market Value:	\$16,212.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$8,106.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$16,212.00 (100%)
Actual ARF Paid:	\$16,212.00		

Owner Particulars

Owner Name:	FERNANDEZ MARTHA JOSEPHINE
Owner ID Type:	Singapore NRIC
Owner ID:	S1169113G
Registered Address Type:	HDB / HUDC
Registered Block/House No.:	185
Registered Street Name:	BEDOK NORTH ROAD
Registered Unit No.:	# 01 - 76
Registered Building Name:	-
Registered Postal Code:	460185
COE No. / Expiry Date:	2018110101002429G / 06 Dec 2028
COE Bid Category:	A - Car up to 1600cc & 97kW (130bhp)
QP Paid:	\$25,556.00

Transaction Details

Business Transaction Ref. No.:	20181207151329064241
Business Transaction Date:	07 Dec 2018
Business Transaction Time:	15:13:29

Message

The above vehicle has been successfully registered.

Please note that \$32,359.00 will be deducted from your GIRO account.

OK

Save as PDF

Retain Registered Vehicle No. (Acknowledgement)

Business Transaction Details

Business Transaction Ref. No.: 201812071506629127556

Business Transaction Date: 07 Dec 2018

Business Transaction Time: 15:06:29

Vehicle No. Details

Retained Vehicle No.: SKS2227U

Retained Vehicle No. Expiry Date: 20 Dec 2018

Re-assigned Vehicle No.: SMG1846D

Chassis No.: KL1GA69UJFB034726

Engine No.: LE9150060031

Motor No.: -

Vehicle Make: CHEVROLET

Vehicle Model: MALIBU 2.4L AUTO

Message

Vehicle No. retained successfully.

Please note that \$100.00 will be deducted from the motor dealer's GIRO account.

The number plates on the existing vehicle must be changed by 10 Dec 2018 to display the newly assigned vehicle registration number. Failure to comply with this requirement is an offence under the Road Traffic Act.

SKS2227U is not transferable and must be used to register a vehicle by 20 Dec 2018 or \$1,200.00 will be deducted from the motor dealer's GIRO account after the validity period.

OK