NATIONAL Assessment Cent	Jeb description	Date & Time Completed	Done by
Date In: 17 1120 - 09:23			
Reino: NA Algro polarging	SAS e-filing		
Veh No: Sha go 297.	E-mail (within Shrs, AIC 2hrs)		•
D.O.A : 46 1/00 - 11:00	i-Motor Claim Form	Le .	
The self but the self-self-self-self-self-self-self-self-	i-Motor W/O (Within: OD 2	isrs, TP 4hrs)	
OD : TP Reporting Only	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hane	d to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: (Tel: Fax	x:)
	91734 . 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: \$0-10	0%]
Year of Registration: ()	Warranty: YES ()/NO ()	
	,000()/\$2,000()	Secretaria de la companya della companya della companya de la companya della comp	
General Remarks:-	Commence of the Commence of th		
() Walk-In Customer: Customer's in	AND AND ADDRESS OF THE PARTY OF	A STATE OF THE PARTY OF THE PAR	
() Total Loss Case : to e-mail Insu			V.5.
	ice: YES() / NO();	Towing Co. (·)
		3	Done by
Remarks: (INC horline: 6788 6616)		Date&Time Completed	23 July One by
Apply for Transport Allowance ()	Courtesy Car ()		
2) QC Check / Post Repair Inspection	()		
3) Upload Resurvey Photo [Repair Cost>	\$3000] ()		1
Injury:			
			SESSO ACTOR
Date/Time Actions	28 penting realizable 2000 and		Photo-State Co.
	1	- Control of the Cont	
No.	Invoice P	reparation Checklist	Anit (S) Amt (\$)
MANOOGIV .	7.7	THE RESIDENCE OF THE PARTY OF T	Tit Bill Add Bill
laimant's Particulars :-		age Assessment (\$100); INC (\$80	No. of the last of
river/Owner:	3) TF : Towin	ng Fee S40/	7545
	5) FT : Follo	w-Through Survey (Resurvey)	\$30
ontact No:	For claiming 6) TR: Re-in	ng against INC Only (wef 10 Jan 2005)	\$75
amaged Portion:	7) N1 : Idac	DA + SMRT Survey	\$160
	8) NTUC Ad	ditional Services	
C Checked by (Engr-In-Charge):	*N5: Cour	ricsy Car / Tpt Allowance	\$5
	• N6: Repe	sir Co-ordination Repair Inspection	\$10
uditors' Comments::-	+N8: DV	Collect Excess Coordination	55
it. 1:	TP (NII)	: TP (Non INC) against INC	30
	9) N12: Idno Invoice date	d Fee Chargad	
at. 2 / 3;	Invoice date	B 400 3	

+ . pri at 1.25

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 witholding 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.

aforesaid,	ou hereby consent to the archiving of this report at the centre and to copies of the report being made available		
Service of the party of the service of	ACCIDENT STATEMENT		
Date Of Report	17/01/2020 09:23		
Date Of Accident	16/01/2020 11:00		
Exact Location Of Accident	JALAN NOVENA UTARA		
Country/State of Loss	SINGAPORE		
建设设施设施	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SLG9529D		
Insured/Policyholder			
Name Of Registered Owner	TAN CHOR HUI		
NRIC No	SXXXX771D		
Email Address	NOEMAIL		
Mobile Phone No	(LOCAL) +65-96790403		

Alternative Phone No Vehicle Particulars

Manufacturer MERCEDES-BENZ Model E200 AVG (R18 LED)

Exact Purpose for which vehicle was being used at PRIVATE USE

time of accident

OFFICE-96790403

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken THIRD PARTY PRIVATE CAR Vehicle Category

Insurance Company

AIG ASIA PACIFIC INSURANCE PTE, LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

Policy Number 2100490255-03

Cover Note Number

Driver

TAN CHOR HUI Name of Driver NRIC No SXXXX771D Date Of Birth 06/10/1952 OUTDOOR Occupation Date Of Driving Pass 19/05/1971

48 YEARS AND 7 MONTHS **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-96790403

Fax Number

Contact Number OFFICE-96790403

EMail Address NOEMAIL

BLK 406 BEDOK NORTH AVENUE 3 Address

#05-187

460406 Postcode

NO Was driver an employee of the Insured's Company

OWNER 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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

Weather Conditions CLEAR Road Surface DRY

Other Information

YES Was any foreign vehicle involved in this accident?

W9173U (COMMERCIAL VEHICLE) Foreign Vehicle Registration Number

Number of vehicles (including own vehicle)

involved in the accident

2 NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged? I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

0 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE Police Station Name

YES

ROAD: 30 BEDOK NORTH ROAD, POSTCODE: 469676, COUNTRY: Police Station Address

SINGAPORE

TEL NO: 1800-2449999 - FAX NO: 62447258 Police Station Contact

NO Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20200116/2122.

Attachment(s)

Are accident photos available for attachment? YES NO Was there any video captured by Car Camera? Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

W9173U Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE Vehicle Category

CHAN JO ONN Name of Driver

NRIC/Passport Number

020720080693 Contact Number 67421530 Address

Postcode

Page 2 of 21

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:
 - 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.:

Refer to attached she-tich 12 km

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

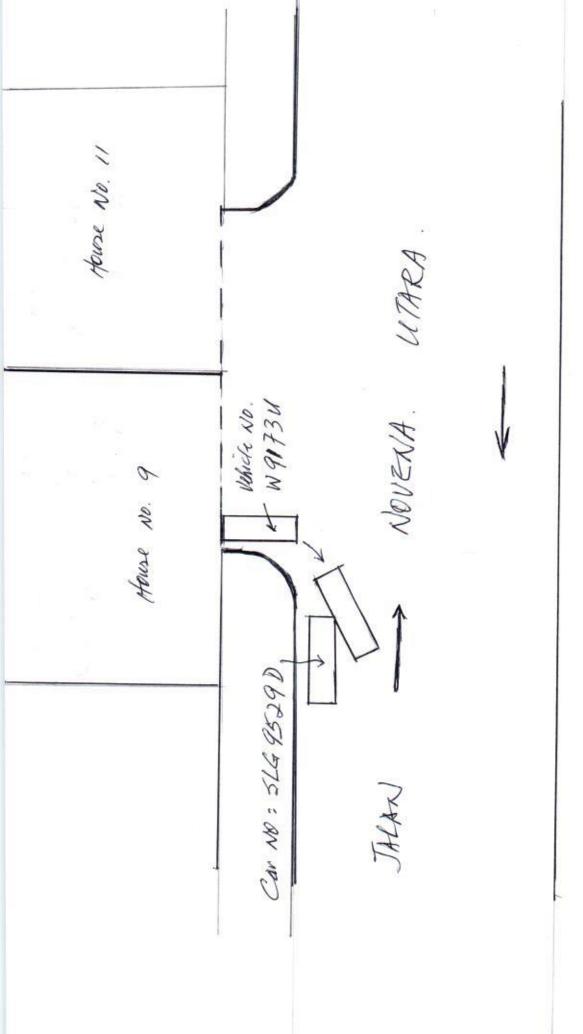
refer -	b police	report -	1/20200116	12m2.		
			in f.			

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.:



Timb of according 11.00 am our 16/01/2020





Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

1 of 3 Report No. T/20200116/2122

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/01/2020 16:21		Made:	Vide Report No.:	Station Diary No.	
Informa	nt's Partic	ulars			
Name of Informant: TAN CHOR HUI			Address: APT BLK 406 BEDOK NORTH AVENUE 3 #05-187		
ID Type / ID No.: NRIC NO / S0180771D Nationality: SINGAPORE CITIZEN		71D	SINGAPORE 460406 Contact No.: Home/Office: Mobile: 96790403 Email:		
		EN			
Sex: Age: Date of Birth: Male 67 06/10/1952		Date of Birth: 06/10/1952	Type of Informant: Vehicle Owner		
Race: Chinese		Language:	Institution / School Name:		
Occupation: CONTRACTOR		Driving Licence Informati Class:	ion: Date of Expiry:		

General Infor	mation of the Acciden	t		
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 16/01/2020 11:00	Type of Location Straight Road
Location: Along Road 1 JALAN NOVE Weather: Clear		Road Surface:		Road Speed Limit:
Traffic Flow: Traffic Control: Two Way Not Controlled				raffic Volume:
Type of Collision: Moving Vehicle Against - Parked Vehicle			A	nyone conveyed by mbulance:

Details of V	ehicle Invo	lved	SECTION .			
Vehicle No.	Type	Make	Model	Color	Condition	No of December
SLG9529D	Car	MEDGEDEG	COLUMN AND ADDRESS OF THE PARTY	minimum reproductive minimum states	Condition	No of Passenger
	Cai	MERCEDES BENZ	E200	Grey	Slightly Damaged	0
W9173U	Van	TOYOTA	LUAGE	1000		
	Vali	TOTOTA	HIACE	White	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA
The state of the s	The state of the s



T/20200116/2122

2 of 3

Report No. T/20200116/2122

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

CONTINUATION OF REPORT

Vehicle Owner	THE RESERVE THE PARTY OF THE PA	THE RESIDENCE OF THE PARTY OF T		Editor Co.	0.29	
Name	TAN CHOR HUI			ID No	i.	S0180771D
Related Vehicle	SLG9529D (Car)	- 10		Conta	ct No.	96790403
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days granted Medical Leave NIL			Degree of Injury NIL			
Driver		HUHLE	ARTHUR DE		of the	
Name	CHAN JI ONN		ID No		020720080693	
Related Vehicle	W9173U (Van)		Contact No.		67421530	
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Dis			harge	NIL	
No. of Days granted Medical Leave NIL			Degree of		NIL	

Brief Details.

On 16/01/2020 at about 1015hrs, i parked my grey coloured Mercedes E200 (bearing registration number SLG9529D) along Jalan Novena Utara. Later that day at about 1100hrs, i returned to my vehicle only to discover that a white coloured Malaysian vehicleToyota Hiace (bearing registration number W9173U) had collided into the right front side of my parked vehicle. He informed that he just exited from Jalan Novena Utara House no. 9, and was turning right into Jalan Novena Utara, wheh he collided into my vehicle.

Due to the collision, there were scratches and on my front bumper, and the sensor on my front bumper was damaged. There were also scratched on my right front headlight. I wish to state that nobody was injured.





Report No. T/20200116/2122

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

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:	Signature Of Informant:
Sgt 3 MUHAMMAD NAQIB BIN ABDUL RAZAK Signature Of Interpreter:	Date/Time:
Not applicable	16/01/2020 16:21
Officer In Charge Of Case: TP / AEIT / SSI 2 YEO GEAK ENG CECILIA Contact No.: 65476404	Classification Of Case:
Authentication Stamp	



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

: 18 Nov 2019 To 17 Nov 2020

Name of Policyholder Period of Insurance

: Tan Chor Hui

Vehicle No. Policy No.

: SLG9529D : 2100490255-03

Engine No. Chassis No. : 27492030813475

: WDD2130422A100434

Endorsement No.

Issued Date

: 05 Nov 2019

ABOUT THE COVER

Make/Model

: MERCEDES Benz E200 Sedan Avantgarde

Engine Capacity/Tonnage: 1,991,00 CC

Sum Insured : Market Value

First Year of Registration : 2016

Driver Restriction

· NA

Off Peak Car : No

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 \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") 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 2000cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1997 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Tan Chor Hui - \$800 (Own Damage), \$800 (Flood Cover)

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

Cycle & Carriage Eunos Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818
 Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

For other: Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +85 8338 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: Daimler Financial Services Africa & Asia Pacific 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), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504380239

CYCLE & CARRIAGE - MINDYL 239 ALEXANDRA ROAD SINGAPORE 159930 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE