

NATIONAL Assessment Centre Services

part 1 Jan 2003

MNA 120057819

| | | | |
|---|--|-----------------------|---------|
| Date In: 8/17/20 11:37 | Job description | Date & Time Completed | Done by |
| Ref No: NAL AIG 2000 7101/64 | SAS e-filing | | |
| Veh No: SKJ 56 G. | E-mail (within 3hrs, AIC 2hrs) | | |
| ICIA: 7/17/20 13:00 | I-Motor Claim Form | | |
| UD: <input checked="" type="radio"/> Reporting Only | I-Motor W/O (Within: OD 2hrs, TP 4hrs) | | |
| | 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: SLJ 3939C. | 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 repairer. |
| () Total Loss Case: to e-mail Insurer URGENTLY. |
| Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: () |

| | | |
|---|-----------------------|---------|
| Remarks: | INC () / Non-INC () | 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 |
|-----------|---------|
| | |
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| | |
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| | |
| | |
| | |

MNA 2003605

| | | | |
|---------------------------------|---|-------------|------------|
| Claimant's Particulars: | Invoice/Registration Checklist | Am (S) | Stable (S) |
| Driver/Owner: | 1) AR: Accident Reporting (\$30); | 30.00 | |
| Contact No: | 2) DA: Damage Assessment (\$100); INC (\$30) | | |
| Damaged Portion: | 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 2003) | | |
| | 6) TR: Re-Inspection \$75 | | |
| | 7) NI: Idas DA + SMRT Survey \$160 | | |
| | 8) NTUC Additional Services: | | |
| | OP: | | |
| | *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: Idas Mobile \$0 | | |
| QC Checked by (Engr-In-Charge): | Invoice dated | Fee Charged | |
| | Invoice dated | Fee Charged | |
| Author's Comments: | | | |
| Tel: () | | | |
| Fax: () | | | |

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 | 08/07/2020 11:37 |
| Date Of Accident | 07/07/2020 13:00 |
| Exact Location Of Accident | STADIUM CRESCENT RD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SKJ56G |
| Insured/Policyholder | |
| Name Of Registered Owner | TAN PECK HONG ADRIAN |
| NRIC No | SXXXX304E |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-96960656 |
| Alternative Phone No | OFFICE-96960656 |

Vehicle Particulars

| | |
|--|-------------|
| Manufacturer | TOYOTA |
| Model | HARRIER |
| 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 | 1900162811 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | TAN PECK HONG ADRIAN |
| NRIC No | SXXXX304E |
| Date Of Birth | 23/04/1986 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 04/01/2005 |
| Driving Experience | 15 YEARS AND 6 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-96960656 |
| Fax Number | |
| Contact Number | OFFICE-96960656 |
| EEmail Address | NOEMAIL |

| | |
|---|-------------------------------|
| Address | BLK 673B YISHUN AVE 4 #09-658 |
| Postcode | 762673 |
| 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 - MAJOR/MINOR RD |
| Weather Conditions | CLEAR |
| Road Surface | WET |

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

Circumstances of Accident

REFER TO POLICE REPORT T/20200707/7012

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 | SLJ3939C |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | BOEY CHONG YIP |
| NRIC/Passport Number | SXXXX335D |
| Contact Number | 90880603 |
| Address | |
| Postcode | |
| Insurance Company Name | |

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN PECK HONG ADRIAN

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? SKJ56G

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

SKETCH PLAN


VEHICLE NO.: SKJ56G
INSURER : _____
DATE & TIME: 07/07/2020 @ 1300hrs


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 Authorized 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:

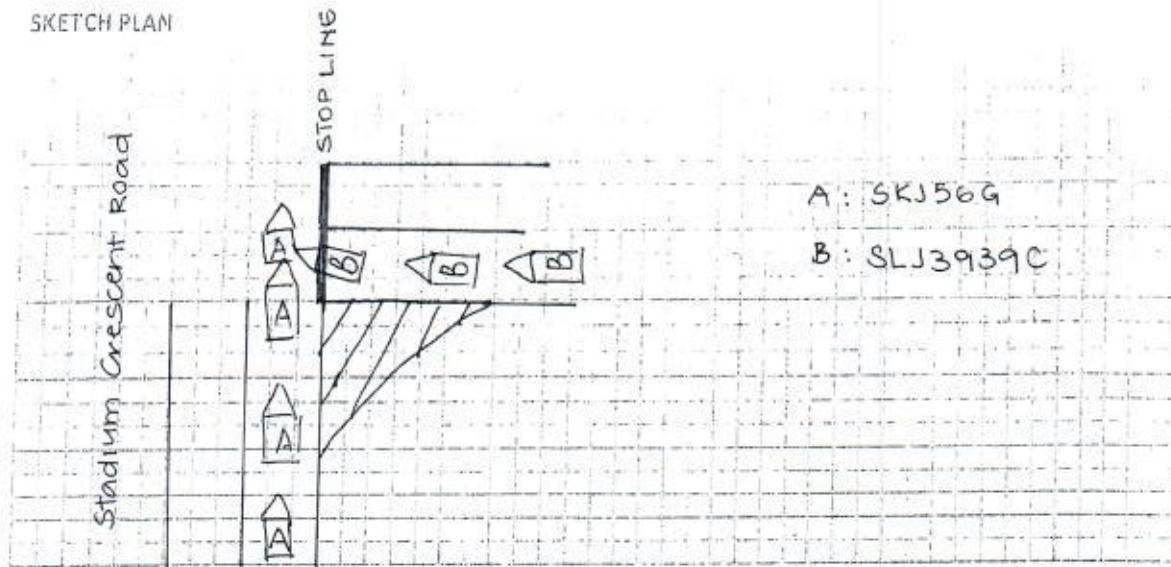
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

Refer to police Report No. T/20200707/7012

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

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.:

() Claim Own Policy () Claim Third Party () Reporting Only
(✓) Claim OD/TP at other workshop (C.S. ONG AUTO P/L)



**SINGAPORE
POLICE FORCE**



T/20200707/7012

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

1 of 3

Report No. T/20200707/7012

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|---|------------|------------------------------|---|--------------------|----------------------------|
| Date/Time Report Made: 07/07/2020 16:33 | | Vide Report No.: | | Station Diary No.: | |
| Informant's Particulars | | | | | |
| Name of Informant: TAN PECK HONG, ADRIAN | | | Address: APT BLK 673B YISHUN AVENUE 4 #09-658 SINGAPORE 762673 | | |
| ID Type / ID No.: NRIC NO / S8612304E | | | Contact No.: Home/Office: | | Mobile: 96960656 |
| Nationality: SINGAPORE CITIZEN | | | Email: adriangolfsg@gmail.com | | |
| Sex: Male | Age: 34 | Date of Birth: 23/04/1986 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: Golf Coach | | | 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: 07/07/2020 13:00 | Type of Location: Straight Road |
| Location: STADIUM CRESCENT ROAD | | | | |
| 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 Vehicles - Head To Side | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|--------|-----------------|-------|-------------------|-----------------|
| SKJ56G | Car | TOYOTA | HARRIER M GRADE | Black | Slightly Damaged | 0 |
| SLJ3939C | Car | MAZDA | | White | Seriously Damaged | 0 |

Details of Person Involved

| | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |



**SINGAPORE
POLICE FORCE**



T/20200707/7012

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

2 of 3

Report No. T/20200707/7012

CONTINUATION OF REPORT

| Driver | | | |
|-----------------------------------|-----------------------|--|---------------------------------|
| Name | TAN PECK HONG, ADRIAN | ID No. | S8612304E |
| Related Vehicle | SKJ56G (Car) | Contact No. | 96960656 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | 07/07/2020 | Date Discharge | NIL |
| No. of Days granted Medical Leave | 08 | Degree of Injury | Slight |

Brief Details.

On 07/07/2020 at around 1300hrs, I was travelling along Stadium Crescent Road, Vehicle B SLJ3939C fail to stop at the stop line and collided onto the rear RH portion of my vehicle causing my vehicle to sway to the left side of the road. I went to Atlas Shoulder, Knee And Sport Surgery at Mount Elizabeth Medical Centre as I suffered pain on my left knee and was awarded 8 days hospitalization leave.



**SINGAPORE
POLICE FORCE**



T/20200707/7012

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

3 of 3

Report No. T/20200707/7012

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 /
SHARIFAH NOR FARIZAN BINTE SYED MOHD
SAID
Contact No.: 65476172

Authentication Stamp

NP168

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

Date/Time:
07/07/2020 16:33

Classification Of Case:

Particular of Insured / Driver & Details of the Accident

(Pls circle where applicable)

Location of Accident: Stadium Crescent Road

Date & Time of Accident: 07 July 2020 @ 1300hrs

Purpose when vehicle was used at the time of accident: Going to Work
(eg. Going Home)

Details of Own Vehicle

Vehicle Registration Number: SKJ56G

Make / Model: Toyota Harrier

Vehicle Category: Private Car

Claiming Own insurance: YES / NO

If No, Reporting only Third Party Claim

Name of Preferred workshop: C.S. ONG AUTO PTE LTD Contact: 6484 1933

Insured / Policy Holder

Name of Registered Owner: Tan Peck Hong, Adrian NRIC: S8612304E

Address: Apt B1K 673B Yishun Avenue 4 #09-658 S(762673)

Mobile No: 9696 0656 Other Contact: Home No. / Office / Others: _____

Email: adriangolfsg@gmail.com

Driver

Name of Driver: Tan Peck Hong, Adrian

NRIC/ Fin: S8612304E

Driving License Pass Date: 04 Jan 2005

DOB: 23-04-1986

Address: 'As insured'

Occupation: INDOOR / OUTDOOR Mobile No: 9696 0656

Gender: MALE / FEMALE Other Contact: Home No. / Office / Others: _____

Email: _____

Driver an employee: YES / NO If no, what is relationship with the policyholder: owner
If Driver is a policyholder, please kindly ignore this question

Insurance Company

Fleet Policy: YES / NO Policy Number: 1900162811 Type of Coverage: Comprehensive

General Information of Accident

Type of Accident: HEAD-REAR / SIDE SWIPE / OTHERS Head to Side

Weather Conditions: CLEAR / RAINING / OTHERS: _____

Road Surface: DRY / WET _____

Any video captured by car camera?: YES / NO

*Any witness? YES / NO

Any police report made: YES / NO

*Injured party: YES / NO (*If Yes, pls provide name & tel)

For Injured Party details, it must be supported by police report

Tan Peck Hong, Adrian

H/P: 9696 0656

No. of Passenger (Including Driver): 1

Details of Passenger 1

Name of Passenger: Tan Peck Hong, Adrian

Gender: Male

Details of Passenger 3

Name of Passenger: -

Gender: -

Details of Other Vehicle Property 1

Vehicle Registration No: SLJ3939C

Vehicle Make / Model / Colour: Mazda

Name of Driver: Boey Chong Yip

No. of Passenger (Including Driver): Unknown

NRIC: S6911335D

Contact Number: 9088 0603

Nature of Damage: Slightly damaged

Vehicle Category: Private car

Details of Passenger 2

Name of Passenger: -

Gender: -

Details of Passenger 4

Name of Passenger: -

Gender: -

Details of Other Vehicle Property 2

-
-
-
-
-
-
-



CERTIFICATE OF INSURANCE

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : TAN PECK HONG ADRIAN
Period of Insurance : 17 Sep 2019 To 16 Sep 2021
Engine No. : 8ARZ161836
Chassis No. : JTEZB3GH90J004701

Vehicle No. : SKJ56G
Policy No. : 1900162811
Endorsement No. : 000000000304983
Issued Date : 23 Sep 2019

ABOUT THE COVER

Make/Model : TOYOTA HARRIER 2.0

Engine Capacity/Tonnage : 1,998.00 CC

Driver Restriction : NA

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.

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2019

Insuring with COE/PARF : Yes

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. 189), Section 95 of the Road Transport Act, 1987 (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 PECK HONG ADRIAN - \$800 (Own Damage), \$800 (Flood Cover)

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

1. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

2. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 2 Pandan Crescent Singapore 126462 Tel: 6631 1188

For other 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 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

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).

0504667225

INCHCAPE AUTO TOYOTA - BSTL047

33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSCASE