

NATIONAL Assessment Centre Services. [ver 1 Jan'05] MMA 120074674

Date In: 31/8/20 13:56	Job description	Date & Time Completed	Done by
Ref No: NAI/AG 20009182164	SAS e-filing		
Veh No: SLB 2470K	E-mail (within 2hrs, AIC 2hrs)		
TPA: 29/8/20 14:15	I-Motor Claim Form		
OT: (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 / INC Assign Wksp / QW: ()	Tel: ()	Fax: ()
TP Particulars:	Veh No: FBF 216 P.	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 () / Non-INC ()	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	Action

MA2004527		Invoice / Registration Checklist	Amount (\$)	PAID (\$)
Client's Particulars:		1) AR: Accident Reporting (\$30);	30.00	
Driver/Owner:		2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:		3) TP: Towing Fee 540/545		
Damaged Portion:		4) PT: Follow-Through Survey \$120		
QC Checked by (Sign-In-Charge):		5) PT: Follow-Through Survey (Resurvey) \$30		
For claimant's use (INC Only) (ver 10 Jan 2005)		6) TR: Re-inspection \$75		
For claimant's use (INC Only) (ver 10 Jan 2005)		7) NI: Idas DA + SMRT Survey \$160		
For claimant's use (INC Only) (ver 10 Jan 2005)		8) NTUC Additional Services:-		
For claimant's use (INC Only) (ver 10 Jan 2005)		ON:		
For claimant's use (INC Only) (ver 10 Jan 2005)		• NS: Courtesy Car / Tpt Allowance \$5		
For claimant's use (INC Only) (ver 10 Jan 2005)		• NG: Repair Co-ordination \$10		
For claimant's use (INC Only) (ver 10 Jan 2005)		• NF: Post Repair Inspection \$25		
For claimant's use (INC Only) (ver 10 Jan 2005)		• NN: DV / Collect Excess Coordination \$5		
For claimant's use (INC Only) (ver 10 Jan 2005)		TP (NI1): TP (Inc INC) against INC \$20		
For claimant's use (INC Only) (ver 10 Jan 2005)		NI2: Idas Mobile \$0		
For claimant's use (INC Only) (ver 10 Jan 2005)		Invoice dated	Fee Charged	
For claimant's use (INC Only) (ver 10 Jan 2005)		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	31/08/2020 13:56
Date Of Accident	29/08/2020 14:15
Exact Location Of Accident	TAMPINES AVE 10 TWDS TPE B4 TAMPINES LINK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB2470K
Insured/Policyholder	
Name Of Registered Owner	LOW KIAN SENG
NRIC No	SXXXX084J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96855080
Alternative Phone No	OFFICE-96855080
Vehicle Particulars	
Manufacturer	NISSAN
Model	QASHQAI
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	2100459293-04
Cover Note Number	
Driver	
Name of Driver	LOW KIAN SENG
NRIC No	SXXXX084J
Date Of Birth	11/02/1957
Occupation	INDOOR
Date Of Driving Pass	14/05/1976
Driving Experience	44 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96855080
Fax Number	
Contact Number	OFFICE-96855080
EMail Address	NOEMAIL

Address	4 FLORA DRIVE #01-57
Postcode	507026
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	RAINING
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?	NO
Was any injured conveyed to hospital by ambulance?	
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)	2
Passenger 1	NAME: : JENNY ONG GENDER: : FEMALE

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/20200829/7025

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	FBF216P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
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

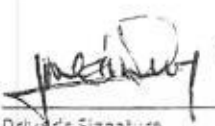
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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



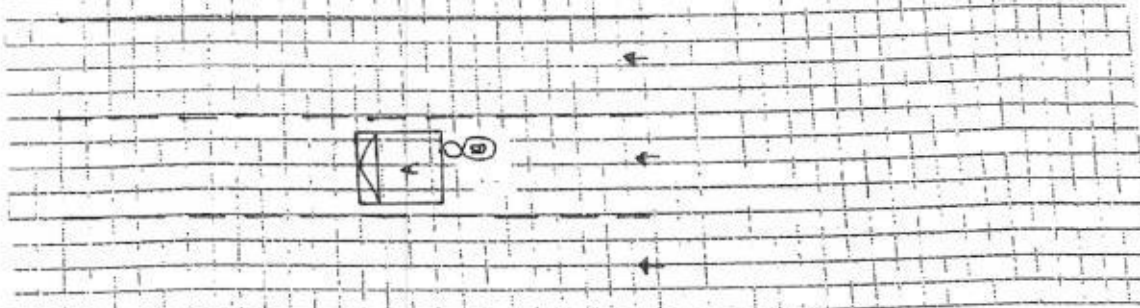
Reporting Centre Personnel's Signature
Name
NRIC/FIN No.

SKETCH PLAN

Tampines Ave 10 TWDs TPE Before Tampines Link

Vehicle A - SIB2470K

Vehicle B - FBF216P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

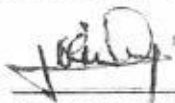
- Refer to Police Report -

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/FIN No:



SINGAPORE POLICE FORCE



T/20200829/7025

1 of 3

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

Report No. T/20200829/7025

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/08/2020 17:47		Vide Report No.: E/20200829/0147		Station Diary No.:	
Informant's Particulars					
Name of Informant: LOW KIAN SENG			Address: 4 FLORA DRIVE #01-57 SINGAPORE 507026		
ID Type / ID No.: NRIC NO / S1263084J			Contact No.: Home/Office: Mobile: 96855080		
Nationality: SINGAPORE CITIZEN			Email: lks@firstfood.com.sg		
Sex: Male	Age: 63	Date of Birth: 11/02/1957	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Management executive			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident					
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/08/2020 14:15	Type of Location: Straight Road	
Location: TAMPINES AVENUE 10					
Weather: Raining		Road Surface: Wet		Road Speed Limit: 60 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: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBF216P	Motorcycle					0
SLB2470K	Car	NISSAN	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR	Grey		0



**SINGAPORE
POLICE FORCE**



T/20200829/7025

2 of 3

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

Report No. T/20200829/7025

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLB2470K	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100459293-04	31/03/2020	30/03/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Rider				
Name	THONG CHAI LENG		ID No.	S7683515B
Related Vehicle	FBF216P (Motorcycle)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	Serious
Driver				
Name	LOW KIAN SENG		ID No.	S1263084J
Related Vehicle	SLB2470K (Car)		Contact No.	96855080
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

Brief Details.

On stated date & time. I was travelling in my vehicle bearing (SLB2470K) along tampines avenue 10. My speed was about 30-40km/hr as there was slow traffic. Suddenly I felt a huge impact from my rear. A motorcycle bearing (FBF216P) collided onto the rear portion of my vehicle. We then exchange particulars and waited for the traffic police and ambulance.



**SINGAPORE
POLICE FORCE**



T/20200829/7025

3 of 3

Report No. T/20200829/7025

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
YEO CHUN JIAN
Contact No.: 65476213

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:
29/08/2020 17:47

Classification Of Case:



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Low Kian Seng
 Period of Insurance : 31 Mar 2020 To 30 Mar 2021
 Engine No. : HRA2230062A
 Chassis No. : SJNFEAJ11U1588114

Vehicle No. : SLB2470K
 Policy No. : 2100459293-04
 Endorsement No. :
 Issued Date : 05 Mar 2020

ABOUT THE COVER

Make/Model : NISSAN QASHQAI 1.2 DIG-TURBO
 Engine Capacity/Tonnage : 1,197.00 CC
 Driver Restriction : NA
 Person or Classes of Persons Entitled to Drive* :
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2016
 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 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 1500cc - 1600cc

* Limitations rendered inoperative by Section 5 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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Low Kian Seng - \$600 (Own Damage), \$600 (Flood Cover)

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

1. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
2. TC AutoClinic Add: No. 1, Sixth Lok Yang Road Singapore 628098 62622212
3. Autoclusion Industrial Add: 19 Ubi Road 4 Singapore 408623 64908666
4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
5. Tan Chong Motor Sales Add: 17 Lorong 8 Toa Payoh Singapore 319254 63570753 63570754

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.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: NA

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).

0500610563

TAN CHONG CREDIT PTE LTD-LKF

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589623

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

5EPTLA

AIG Asia Pacific Insurance Pte. Ltd.

1003077125JAC4
 0500610563 | 029120 | T +65 6413 3000 | www.aig.sg

Date of Accident : 29/8/2020 Accident Time: 14:15 (24-HR-FORMAT)
 Accident Place : Tampines Ave 10 TWDr TPE Before Tampines Link
 Vehicle Reg. No (Car plate No.) : SLB2470K Vehicle Make/Model: Nissan Qashqai
 Insurance Company : AIG Policy No. 2106459293-04
 Name of Registered Owner : Company/Individual LOW KIAN SENG
 ID of Registered Owner : Co Reg No: - Owner's NRIC No: S1263064J
 : Co Contact No: - Owner's Contact No: 9685 5080
 DRIVER'S Name : LOW KIAN SENG DRIVER'S NRIC No: S1263084J
 DRIVER'S Date of Birth : 11/2/1957 DRIVER'S License Pass Date: 14/5/1976
 Relationship bet. Owner & Driver : Spouse \ Parents \ Child \ Sibling \ Employee \ Others: Owner
 DRIVER'S Address : 4F LORA DRIVE #01-57 S (507026)
 DRIVER'S Contact No / Alt No : 1) 9685 5080 2) -
 DRIVER'S Occupation : INDOOR/OUTDOOR (eg: working inside or outside of shops)
 Email Address : lks@firstfood.com.sg
 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): 02 Passenger Name: Jenny Ong Gender: M/F
 Was the accident reported to the police? YES \ NO Passenger Name: - Gender: M/F
 Was there any video Captured by car camera: YES \ NO Any Injuries: YES / NO Injured Name: -
 Injured Name: -
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: FBF 216P	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

Other Party Driver's Particulars (if any)

Vehicle Reg No: _____	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____