

ASS. REC. BY:

Tang Jiah

REF:

CS/ALG 20011091/Tr 953.

ASSIGNMENT

From:

Date:

Estimated Cost:

☒ TP/WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No. 2070013957

Claims No. 6742778169SG

Sum Insured: Excess: Nil 0/-

(Client's Record)

Make of Veh:

(Policy Condition)

 Remark: The veh had commenced its
repair at the time of inspection.
Bal. or Market Value: 4118K.

IDAC Accident Rpt: Consistent?: Yes or No

G/A / PR Seen: Consistent?: Yes or No

Est. Repairs: 9 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Don

Veh No:

SMSG322C.

Yr Regn: 2020, March

Type: ☒ Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Citroen C5

c.c. 1598

Colour

Silver

A/C: Insured / Std / NI / NA

Sp. Reading

8254

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

UR7A45 GFR KL045/40.

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt or

Modi: Nil / STD / STD A/Rim or

Tyre Size:

F: 235/55R18.

R:

4 - .

☒ DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

14/10/20

Survey held at

CCC Pandan Goh

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Frt N/S & Rear

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

15/10/20@2.48pm revert to Thaddaeus Ng via Merimen.

15/10/20@4.42pm Thaddaeus Ng informed C/A via Merimen.

15/10/20@5.04pm Informed Don Bong C/A & ex:\$0/- by email.

27/11/20@3.08pm confirmed with Andre final fig \$18347.80, 9 days (Red \$12400, 40%)

Date/Time, File Pass to?

☐

Prel. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: 9

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

S + RS SI

Phone

Others

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Report Form: MER-OD

Lump Sum / 18347.80




CYCLE & CARRIAGE FRANCE PTE. LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE
 209 Pandan Gardens, Singapore 609339 Tel: (65) 6568 4501 Fax: (65) 6565 1240



QUOTATION

Company Reg No. 200609327M
 GST Reg No. MR-8500111-X

Invoice Name & Address				Owner Name & Vehicle Info			
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPARTMENT 78 SHENTON WAY #08-16 AIG BUILDING SINGAPORE 079120 Contact No 6419 1000				Cust No/Name	FCV01876/ROSSIDAH BINTE SALLIM		
				Reg No/Reg Date	SMS6322C / 06/03/2020		
				Date In/Mileage	/ 0		
				Chassis/Package	VR7A45GFRKL045140 /#		
				Engine No	10FKA72544970		
				Make/Model	CIT/C5 AIRCROSS 1.6 PURETECH 180 S&S EAT		
				Colour/Trim	MOF CUMULUS GREY/WH/ OXF CUIR CLAUDIA/TI		
							
Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No	
FAX00001	Credit	14/10/2020/ 09:27	QUD	247 / DonBong	15718	0	
Description of Goods / Services					Qty	Unit Price	Disc% Amount
E PNT88000 RENEW ACCIDENT DAMAGED PARTS ON REAR TAILGATE, 500 REAR BUMPER, REPAIR RH REAR FENDER, REPAIR REAR END PANEL							1000. 2500.00
E PNT88000 REMOVE AND REPLACE REAR WINDSCREEN GLASS							✓ 300.00
M SUNDRY SUPPLY REAR WINDSCREEN SEALANT							net - 80.00
M SUNDRY INSTALL REAR WINDSCREEN SOALR FILM 3960 adjustment.							? 220.00
E PNT88000 TRANSFER REAR TAILGATE MECHANISM, TRIM AND OTHERS ATTACHMENT TO NEW PANEL							✓ 150.00
E PNT88000 REMOVE AND INSTALL REAR FLOOR PANEL AND OTHERS ATTACHMENT TO FACILITATE REPAIR WORK							? 150.00
E PNT88000 REMOVE AND INSTALL REAR PARKING ASSIST							✓ 60.00
E PNT98000 PAINT WORK SPRAY REAR END PANEL, REAR TAILGATE, 380 REAR BUMPER, RH REAR FENDER AND AFFECTED PORTION							760. 1900.00
E PNT88000 RENEW ACCIDENT DAMAGED PARTS ON FRONT BONNET, ✓ FRONT BUMPER FACE, ✓ LH FRONT FENDER, REPAIR RH FRONT FENDER, REPAIR LH FRONT DOOR ✓							1000. 2000.00
E PNT88000 REMOVE AND INSTALL FRONT PARKING ASSIST							✓ 60.00
E PNT98000 PAINT WORK SPRAY FRONT BONNET, FRONT BUMPER, ✓ ✓ LH FRONT FENDER, LH FRONT DOOR, RH FRONT FENDER AND AFFECTED PORTION							1140. 2280.00 1520.
M SUNDRY APPLY BODY SEALANT							40. 160.00
A 54900099							✓ 50.00

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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No		
FAX00001	Credit	14/10/2020/ 09:27	QUD	247 / DonBong	15718	0		
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
CHECK WIRING AND CHASSIS ELECTRICAL SYSTEM								?
M SUNDRY								80.00
PERFORM RUST PREVENTION								✓
A 10028901								225.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST								40
USING HI-SCAN PRO TEST								ne ✓
M SUNDRY								50.00
SUPPLY C&C LOGO								
M SUNDRY	✓							50
SUPPLY FRONT AND REAR NUMBER PLATE WITH FRAME								100.00
M SUNDRY								20
SUNDRIES								50.00
S SPECIALISTJOB								
WO:1242829 ACCIDENT TOWED IN FROM PASIR RIS ST51 BLK559 TO CNC PG								
Date:13/10/2020; Time Start 15:31pm, Time End 16:42pm								
Normal towing \$50; Add Accident towing \$10; So Total Cost \$60								
M TAILGATE A PEINDRE					1.00	2662.00	20.00	2129.60
M TAILGATE HINGE SUP					1.00	66.00	20.00	52.80
M BALL-JOINT DIAM EXT 10					1.00	23.00	20.00	18.40
M FIX LOCK STIFF VOLET AR					1.00	30.00	20.00	24.00
M TAILGATE GLASS					1.00	603.00	20.00	482.40
M TAILGATE PROP					1.00	93.00	20.00	74.40
M GLASS WEDGE					8.00	1.00	20.00	6.40
M WINDOW MOULDING RH					1.00	219.00	20.00	175.20
M WINDOW MOULDING LH					1.00	219.00	20.00	175.20
M WEATHERSTRIP					1.00	156.00	20.00	124.80
M WEATHERSTRIP LH					1.00	268.00	20.00	214.40
M WEATHERSTRIP RH					1.00	268.00	20.00	214.40
M BADGE					1.00	79.00	20.00	63.20
M BRAND EMBLEM					1.00	79.00	20.00	63.20
M REAR BUMPER					1.00	79.00	20.00	63.20
M BUMPER SKIRT					1.00	1198.00	20.00	958.40
					1.00	784.00	20.00	627.20

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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No
FAX00001	Credit	14/10/2020/ 09:27	QUD	247 / DonBong	15718	0

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M RECESS DOOR	1.00	62.00	20.00	49.60
M BRACKET SET	1.00	107.00	20.00	85.60
M FINISHER BUMPER	1.00	91.00	20.00	72.80
M BMPR RUBBR BOOT	1.00	76.00	20.00	60.80
M SUPPORT	1.00	53.00	20.00	42.40
M PLUG	1.00	151.00	20.00	120.80
M BUMPER MOULDING	1.00	402.00	20.00	321.60
M BUMPER BRACKET	1.00	194.00	20.00	155.20
M BUMPER BRACKET LH	1.00	107.00	20.00	85.60
M BUMPER BRACKET RH	1.00	107.00	20.00	85.60
M FIX STIFFENER LH	1.00	154.00	20.00	123.20
M FIX STIFFENER RH	1.00	154.00	20.00	123.20
M BUMPER ABSORBER	1.00	517.00	20.00	413.60
M FIXING STUD	1.00	36.00	20.00	28.80
M WING REAR LIGHT LH	1.00	478.00	20.00	382.40
M WING REAR LIGHT RH	1.00	478.00	20.00	382.40
M TAILGATE LIGHT LH	1.00	349.00	20.00	279.20
M TAILGATE LIGHT RH	1.00	349.00	20.00	279.20
M REAR FOG LIGHT LH DE PARE CHOC	1.00	99.00	20.00	79.20
M REAR FOG LIGHT RH DE PARE CHOC	1.00	99.00	20.00	79.20
M LICEN PLAT LAMP	1.00	27.00	20.00	21.60
M LICEN PLAT LAMP	1.00	27.00	20.00	21.60
M SENSOR	1.00	189.00	20.00	151.20
M SENSOR	1.00	189.00	20.00	151.20
M SENSOR	1.00	189.00	20.00	151.20
M SENSOR CORNER	1.00	189.00	20.00	151.20
M SENSOR CORNER	1.00	189.00	20.00	151.20
M FRONT BUMPER	1.00	189.00	20.00	151.20
M FRT SKIRT-PANEL	1.00	1473.00	20.00	1178.40
M RECESS DOOR	1.00	813.00	20.00	650.40
M FR BMPR GRILLE	1.00	62.00	20.00	49.60
M BRACKET SET	1.00	709.00	20.00	567.20
	1.00	107.00	20.00	85.60

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Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M FINISHER BUMPER	1.00	91.00	20.00	? 72.80
M FR BMPR GRILLE CENT	1.00	130.00	20.00	X 104.00
M FR BMPR GRILLE LAT	1.00	146.00	20.00	dev 116.80
M FINISHER BUMPER LAT	1.00	162.00	20.00	dev 129.60
M FINISHER BUMPER	1.00	113.00	20.00	unt 90.40
M FR BMPR GRILLE INF	1.00	226.00	20.00	? 180.80
M BUMPER ABSORBER	1.00	153.00	20.00	? 122.40
M BRACKET SET	1.00	107.00	20.00	? 85.60
M REAR DUCT	1.00	189.00	20.00	? 151.20
M REAR DUCT	1.00	86.00	20.00	? 68.80
M BUMPER PLUG	1.00	80.00	20.00	X 64.00
M BUMPER BRACKET	1.00	336.00	20.00	? 268.80
M BUMPER ABSORBER	1.00	363.00	20.00	? 290.40
M BUMPER ABSORBER	1.00	490.00	20.00	? 392.00
M MUL FIXING SET	1.00	36.00	20.00	re 28.80
M SENSOR LH	1.00	189.00	20.00	? 151.20
M SENSOR	1.00	189.00	20.00	X 151.20
M SENSOR	1.00	189.00	20.00	X 151.20
M SENSOR	1.00	189.00	20.00	X 151.20
M SENSOR CORNER LH	1.00	189.00	20.00	? 151.20
M SENSOR CORNER	1.00	189.00	20.00	X 151.20
M FRONT WING LH ASS	1.00	529.00	20.00	? 423.20
M ACCOUSTIC SEAL	1.00	67.00	20.00	? 53.60
M WING MOULDING LH AILES AVANT	1.00	211.00	20.00	dev 168.80
M FRONT LIGHT LH	1.00	499.00	20.00	unt 399.20
M HDLIGHT SUPPORT LH COMPLEMENTA	1.00	71.00	20.00	unt 56.80
M LIGHT MOULDING LH AV	1.00	88.00	20.00	unt 70.40
M HEADLIGHT ASSY LH	1.00	678.00	20.00	dev 542.40
M KIT PATTE	1.00	138.00	20.00	? 110.40
M ENGINE BONNET ASS	1.00	1337.00	20.00	ht 1069.60
M BONNET HINGE LH	1.00	117.00	20.00	? 93.60
M BONNET HINGE RH	1.00	117.00	20.00	X 93.60
M HOOD HOOK	1.00	86.00	20.00	? 68.80

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FAX00001	Credit	14/10/2020/ 09:27	QUD	247 / DonBong	15718	0

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M VISUAL CAMERA	1.00	381.00	20.00	? 304.80
M CAMERA MOUNTING	1.00	26.00	20.00	? 20.80
M TRIM	1.00	59.00	20.00	? 47.20

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
 Signature:
 Date:

BS.
 235/55K18

SURVEYOR NAME: Tanphie 97495744
 SURVEYOR SIGNATURE: [Signature]
 DATE: 14/10/20 2 12pm
 REMARKS: Not influence Ex: to be advise.
Resurvey before paint, tanphie/klondom
9 days

Guarantee Your Warranty, Maintain with Cycle & Carriage!

Parts	18,796.00			
Labour	9,675.00			
Standard Menu	0.00	7% GST on	29211.00	29,211.00
Specialist Job	0.00			2044.77
Diagnostics Job	0.00			
Sundry/Others	740.00			
Total(w/o GST)	29,211.00			
			Total Payable	31,255.77
			Paid	0.00
			Total Due	31,255.77

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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	13/10/2020 13:51
Date Of Accident	13/10/2020 05:25
Exact Location Of Accident	PASIR RIS DRIVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS6322C
Insured/Policyholder	
Name Of Registered Owner	ROSSIDAH BINTE SALLIM
NRIC No	SXXXXX497Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97707251
Alternative Phone No	OTHERS-97707251

Vehicle Particulars

Manufacturer	CITROEN
Model	C5 AIRCROSS 1.6

Exact Purpose for which vehicle was being used at time of accident

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

If No, Please state action to be taken

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	2070013957
Cover Note Number	

Driver

Name of Driver	AZHAR BIN NOH
NRIC No	SXXXXX393C
Date Of Birth	25/02/1965
Occupation	INDOOR
Date Of Driving Pass	16/12/2009
Driving Experience	10 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97707251
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 559 PASIR RIS STREET 51 #01-231
Postcode	510559
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	3
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?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	SBS6473E
Vehicle Make/Model/Colour	BUS
Details Of Properties	
Vehicle Category	BUS
Name of Driver	LIM YEW SONG
NRIC/Passport Number	SXXXX402D
Contact Number	97359584
Address	
Postcode	
Insurance Company Name	MS FIRST CAPITAL INSURANCE LTD
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GBB8330K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

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.

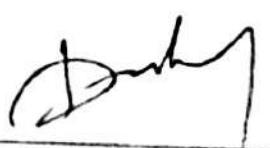
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

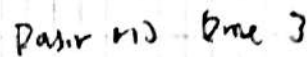
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

URGENT 10/11/00



refu to attachment

Her.

✓



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SINGAPORE POLICE FORCE



T/20201013/2026

1 of 3

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20201013/2026

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/10/2020 11:45	Vide Report No.:	Station Diary No.: 39
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Informant's Particulars

Name of Informant: AZHAR BIN NOH			Address: APT BLK 559 PASIR RIS STREET 51 #01-231 SINGAPORE 510559	
ID Type / ID No.: NRIC NO / S1722393C			Contact No.: Home/Office: Mobile: 97707251	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 55	Date of Birth: 25/02/1965	Type of Informant: Driver	
Race: Malay			Language: English	Institution / School Name:
Occupation: Aeronautical engineering technician			Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/10/2020 05:25	Type of Location: X-Junction
Location: PASIR RIS DRIVE 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
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
GBB8330K	Van				Slightly Damaged	0
SBS6473E	Bus/Coach/Mi nibus				Slightly Damaged	0
SMS6322C	Car	CITROEN	C5 AIRCROSS	Grey	Slightly Damaged	0



Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20201013/2026

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM YEW SONG	ID No.	S0070402D
Related Vehicle	SBS6473E (Bus/Coach/Minibus)	Contact No.	97359584
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	AZHAR BIN NOH	ID No.	S1722393C
Related Vehicle	SMS6322C (Car)	Contact No.	97707251
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	13/10/2020	Date Discharge	13/10/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the mentioned date and time, I was at the traffic junction of Pasir Ris Drive 3 and Pasir Ris Dr 6, in front of Blk 474 Pasir Ris. While waiting for the lights to turn green, I suddenly felt an impact from the rear of my vehicle. Looking through the rear view mirror, I saw a bus at the rear of my vehicle. After the first impact, I felt that my car was hit two more times. As a result of the impact, I also hit another vehicle that was in front of me. I then alighted from my vehicle to check on the damages of my car. As a result of the accident, the front and rear of my vehicle was damaged. I also suffers pain on the back of my body and had seek medical treatment at Changi General Hospital.



**SINGAPORE
POLICE FORCE**



T/20201013/2026

3 of 3

Report No. T/20201013/2026

Police Station Of Origin:

Pasir Ris N.P.C

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

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:

G /

SI KAMARUZZAMAN BIN MAHMOOD

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI MOHAMAD ZULFAZDLI BIN ABDULLAH

Contact No.: 65476204

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

13/10/2020 11:45

Classification Of Case:

UNDERTAKING

I, AZHAR BIN NOH, (NRIC No. S1722393C), hereby confirm that the Singapore Accident Statement lodged by me on 13.10.2020 at 13.35 hours pertaining to the accident involving motor car Reg. No: SMS 6322C, in which I was the driver are true and accurate to the best of my knowledge, information and belief.

I acknowledge that my insurers are not liable under the contract of insurance if there is a breach of policy terms and conditions.

In the event that an unrelated/unreported third party property or injury claim arises or there is evidence emerges that there is a breach of policy terms and conditions, I irrevocably undertake to absolve my insurer from all liability under the contract of insurance and I undertake to re-pay any sums paid by my insurers pursuant to the contract of insurance upon receipt of written demand by my insurers.

Signature :



Name of Insured / Driver :

AZHAR BIN NOH

Nric No. :

S1722393C

Date :

13/10/20

Signature :



Name of Policyholder :

ROSDHAN SUM

Nric No. :

S6931497C

Date :

13/10/20



AIG Asia Pacific Insurance Pte. Ltd
AIG Building
78 Shenton Way
#07-16

MOTOR ACCIDENT INTERVIEW FORM

NAME : ROSSIDAH SAUIM
VEHICLE NUMBER : SMS 6322C
DATE/ TIME OF ACCIDENT : 0525
PLACE OF ACCIDENT : PASIR RIS DRU 3
THIRD PARTY VEHICLE (IF ANY) : SBS 6473 E

.....
WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

FROM WORKPLACE AT LOYANG HEADING
HOME TO PASIR RIS ST. 51

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT WAS THE RESULTS?

NO

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

REAR & FRONT

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

NO

AZHAR BIN NGH

NAME:

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

CITROEN AUTO PROTECTOR PRIVATE VEHICLE

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder.

Name of Policyholder : ROSSIDAH BINTE SALLIM
Period of Insurance : 04 Mar 2020 to 03 Mar 2021
Engine No. : 10FKA72544970
Chasis No. : VR7A45GFRKL045140

Vehicle No. :
Cover Note No. : 2070013957
Endorsement No. :
Issued Date : 04 Mar 2020



ABOUT THE COVER

Make/Model : CITROEN C5 Aircross 1.6
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 : 2020
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 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 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)
ROSSIDAH BINTE SALLIM - \$600 (Own Damage), \$600 (Flood Cover)

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

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708600

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: MayBank

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.
We hereby certify that this Cover Note 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). For Corporate Policies, this Cover Note is valid for 60 days from the commencement date of the period of insurance.

0502847633



CYCLE & CARRIAGE - JESSIE
239 ALEXANDRA ROAD
SINGAPORE 159930


Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Seng-Choo A


 Licence Number **S1722393C**
 Name
AZHAR BIN NOH
 Birth Date **25 Feb 1965**
 Issue Date **16 Dec 2009**


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1722393C




 Name
AZHAR BIN NOH
 Race
MALAY
 Date of birth
25-02-1965 Sex
M
 Country of birth
SINGAPORE

FOR C&C USE ONLY

YOU ARE LICENCED TO DRIVE VEHICLE : THE FOLLOWING : (S)


Class 3A Motor cars without clutch pedals (Auto) <= 3000kg
 with <= 7 passengers, exclusive of the driver; and
 other motor vehicles without clutch pedals <= 2500kg

PASS DATE
16 Dec 2009

Licence No. **S1722393C**


NP 428A

FOR C&C USE ONLY


 4823238

NRIC No. **S1722393C**

Date of issue
12-01-2013

Address
APT BLK 559 PASIR RIS STREET 51 #01-231
SINGAPORE 510559
 NRIC No: **S1722393C** Date: **17/01/2013** No: **7236304**