NATIONAL Assessment Centre 5	ervices increasing	عد ب ^ر د	1	
Date In: 10/12/20	ch description	Dute &	Time Completed	Done by
Rel Nu. NA/A1620013675/13	SAS e-filing	i		
Veh No. SGN 6418H .	E-mail (within Shrs, AlC 2hrs;	T		
D.O.A: 09/12/20 1519	i-Motor Claim Form			
	i-Motor W/O (Within: OD 2h	rs. TP 4hrs)		
OD . (TP) Reporting Only	i-Photo Uploaded	!		
TP Insurer:	Assessment/Survey Report	i		
Tr. insurer.	Ass't Report by Fax / Hand	to Owner	Wksp	
Preferred Wksp / INC Assign Wksp / QW; (KAI MOTOR	Tel:		Fax:
TP Particulars: Veh No: XA	7-678T INC(,)/N	on-INC()	
Owner / Driver: (Tel:)
Policy No: () Period	()	Cover	Type: ()
Confirmed by : (Date:		Time:)
	E-Est. Status (WO): N: 0-2	20%; P:	21-79%. F: 80-	100%]
	ranty: YES ()/NO ()		
Excess: (\$) Loading: \$1,000 (
General Remarks		1.00	1 596 500 (1.57) (1.57)	
() Walk-In Customer: Customer's information		trictly NO	rater of repairer	
() Total Loss Case : to e-mail Insurer U				
Drive-In ()/ Towed-In (); Invoice: Y		Towing C		
itemarks: 🖖 (INC hor)lac: 6788(6616)		g: Dales	Timo Comple od	Done by
1) Apply for Transport Allowance ()/ Cour	tesy Car ()			
2) QC Check / Post Repair Inspection	()	_		
3) Upload Resurvey Photo [Repair Cost > \$3000)] ()			
Injury:		····		-,,
Date/Time Actions		K40.000	Salik him	6,87
Company of the Compan	181978, S. D.C.A. S.	-3551A55557		
	hestik wietel	Modification	3-14-33989.00	(in America) America
N92/00332	1.7 × 3000000 37 × 41 × 7	Carolina and Line	n Checklist	将来。清清前 'Add B
llumanus Particulars :-	1) AR : Accide 2) DA : Dama		nt (5100); INC	
Driver/Owner:	3) TF : Towing 4) FT : Follow	g Fee		\$40/\$45
	5) FT : Follow	-Through Su	rvey (Resurvey)	\$30
Contact No:	For claiming 6) TR: Re-ius	g against ING	COnly (wef 10 Jan 20	105) \$75
Damäged Portion:	7) N1 : Idao D	A + SMRT	Survey	2160
	8) NTUC Add	itional Servi	005:-	
C Checked by (Engr-In-Charge):	on:	* Total		
20. Circled by (Bilgi-III-Circlego).	• N5: Court	esy Car / Tp		\$10
	On* *N5: Court *N6: Repei	r Co-ordinat	ion ion	\$10 \$25
Auditors Comments:	On* *N5: Court *N6: Repel *N7: Post F *N8: DV /6	r Co-ordinat Capair Inspec Collect Exce	on tion si Coordination	\$10
	On* *N5: Court *N6: Repel *N7: Post F *N8: DV /6	r Co-ordinat Repair Inspec Collect Exce TP (Non IN Mobile	ion ion	\$10 \$25 \$5 \$20 30

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

 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

- opicy 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

10/12/2020 14:46 (SGT) Date of Submission 09/12/2020 15:10 (SGT) Date of Accident Sims Ave, Singapore Exact Location of Accident SIMS AVE JUNC OF LOR 1 GEYLANG Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

SGN6418H Vehicle Registration Number

INSURED/POLICYHOLDER

No is company? KWANG KENG HOCK Name Of Registered Owner SXXXX824I NRIC No stevenkwang@gmail.com Email Address Mobile Phone No (Phone) +65-96246318 +65-96246318 Alternative Phone No

VEHICLE PARTICULARS

Toyota Manufacturer COROLLA ALTIS Model Variant Exact purpose for which vehicle was being used at time of Private use

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

No - Claiming third party Private car

INSURANCE COMPANY

Name of Insurance Company Comprehensive Type of Coverage Fleet Policy 2100488963-03 Policy Number Cover Note Number

DRIVER

KWANG KENG HOCK Name of Driver SXXXX824I NRIC No 09/12/1963 Date Of Birth Indoor Occupation

28/06/1982 Date Of Driving Pass 38 YEARS AND 6 MONTHS Driving experience Male Gender (Phone) +65-96246318 Mobile Number +65-96246318 Alt. Phone Number stevenkwang@gmail.com Email Address BLK 309A ANCHORVALE ROAD Address #06-73 Address complement 541309 Postcode Yes Is the driver the policyholder? If No, Relationship of the Driver with the Insured No Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Collision - Change/cross lane Type of Accident Clear Weather Conditions Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Yes Was any other material or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE ATTACHED STATEMENT. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes No Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1 XD7678T Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Commercial vehicle Vehicle Category NAVAEETHAN VENUGOPAL Name of Driver -1 Work Permit No (Phone) +65-93501416 Contact Number

Address

Postcode

Address complement

Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust 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>.
- 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.
- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l understand, acknow ledge, 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

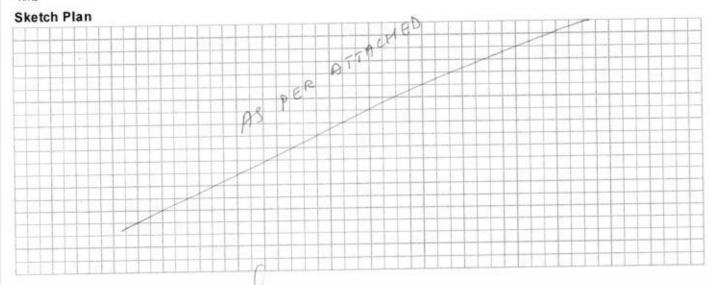
Policyholder's Signature / Date &

Policyholder's Signature / Date 8

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre

Personnel



escribe	e Circum	stances	of the A	ccident									
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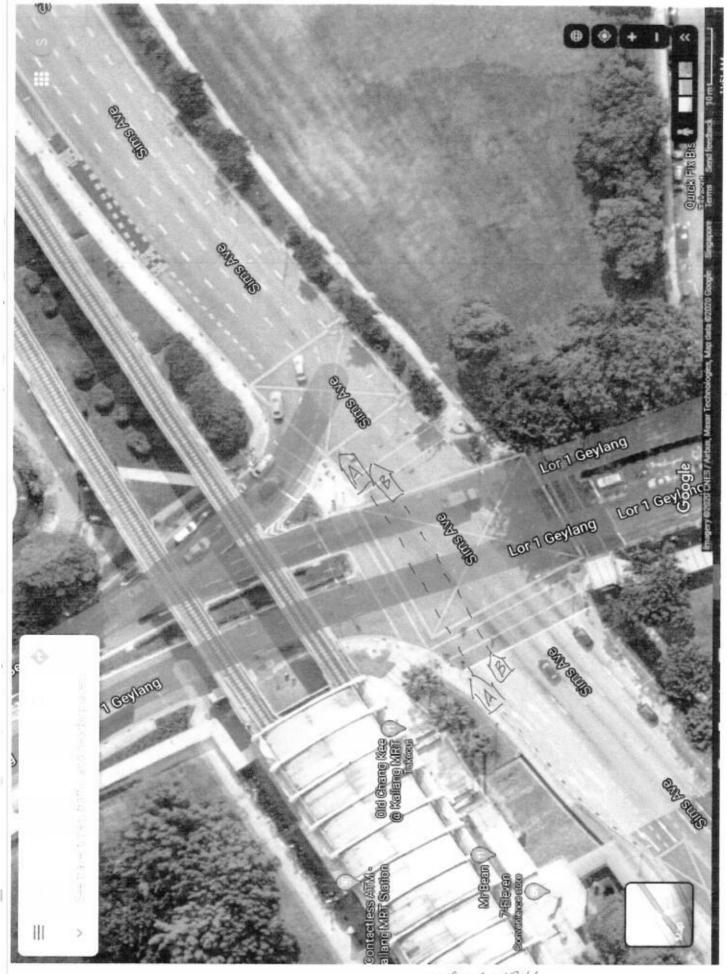
Declaration

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

Witnessed by Reporting Centre Personnel



A-5946418H B-XD7678T

ACCIDENT STATEMENT

ACC	DENT DATE: (09, 12, 2020) (DD/MM/YYYY), TIME: (15:10) (HH:MM)
LOCA	ATION: SIMS AVE Junction Lording for Geylang.
	DETAILS OF VEHICLE
	DINSURANCE COMPANY: A1G
*	C)POLICY NUMBER: 2100 488 963 - 03
	DIPOLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
	ALMAKE & MODEL: Toyota Altis
	f)TYPE:(SALOON / COUPE / MPV /V AN / LORRY / MOTORCYCLE./ OTHERS) g)VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
	h) PURPOSE OF USING AT ACCIDENT TIME: Pungonal
	ILARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
	IF NO, PLEASE STATE (THIRD PARTY CLAIM) REPORTING ONLY)
2.	A) NAME: KWANG KONG HOCK (MALE / FEMALE)
	b)NRIC/FIN/PASSPORT: 5/6/1824 CONTACT: 767783
	CIADDRESS: 3091 Androvale Rd #06- +3 5(541307)
4	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER
₩uc of passang&	DRIVER
Clincluding driver	a)NAME: ACANG 1999
()	b) NRIC/FIN/PASSPORT: 5/6/18247 CONTACT: 5/54/309, c) ADDRESS: 309/ Approvale Rd #66-73: 5/54/309,
	A STATE OF THE STA
·	*d)DATE OF BIRTH: (09/12/1963)(DD/MM/YYYY)
	6) OCCUPATION: (INDOOR DOUTDOOR) f) YEARS OF DRIVING EXPRERIENCE: 3945
4	WAS DRIVED AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / (NO)
	IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:
5.	a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS
6	b)ROAD SURFACE: (DRY / WET / OTHERS WAS ANYBODY INJURED (YES / NO)
7.	alreported to police (YES / NO)
	IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE
the of narrowser	a) VEHICLE NUMBER: XD 1618 MODEL:
(Including driver)	b) DRIVER'S NAME: NAVAEETHAN VENUGOPAL
()	C) NRIC/FIN/FASSFORT.
() 9.	AN VEHICLE NUMBER: MODEL:
* No of passanger	el DRIVER'S NAME:
(Induding driver	f) HRIC/FIN/PASSPORT:CONTACT:
()	
	La Vince @ aval

Cimail = Stevenkwang @ grail com

fax =

VIDEO = | Front Only



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

: Kwang Keng Hock Name of Policyholder

: 11 Nov 2020 To 10 Nov 2021 Period of Insurance

: 1ZRX571489 Engine No.

: MR053REH104550466 Chassis No.

Vehicle No.

Issued Date

: SGN6418H

Policy No.

: 2100488963-03

Endorsement No.

: 16 Oct 2020

ABOUT THE COVER

: TOYOTA COROLLA ALTIS 1.6 DUAL Make/Model

Engine Capacity/Tonnage: 1,598.00 CC : NA

Sum Insured : Market Value

First Year of Registration : 2016

Insuring with COE/PARF : Yes

Driver Restriction Person or Classes of Persons Entitled to Drive*:

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

Off Peak Car : No

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

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.

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)

Kwang Keng Hock - \$800 (Own Damage). \$800 (Flood Cover)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)
Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
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: United Overseas Bank Limited

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). 10037661

0030210000

Reg 3 AIG ASIA PACIFIC INSURANCE PL

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

ny #09-16 AIG Building S079120 | T.+65 6419 3000 | ww





AUTOPLUS PRIVATE VEHICLE

Policy No.

: 2100488963-03

Period of Insurance : 11 Nov 2020 to 10 Nov 2021

Issued Date : 16 Oct 2020

Engine Capacity/Tonnage: 1,598.00 CC

ABOUT THE POLICYHOLDER

Name of Policyholder

: Kwang Keng Hock

Address

: Blk 309A Anchorvale Road

#06-73

SINGAPORE 541309

Occupation/Nature of Business: Self Employed/Freelancer

ABOUT THE VEHICLE

Registration No. : SGN6418H

: MR053REH104550466

Seating Capacity: 4 Make/Model

: TOYOTA COROLLA ALTIS 1.6 DUAL

Hire Purchase Company/Employer's Loan

: United Overseas Bank Limited

First Year of Registration : 2016

ABOUT THE COVER

Sum Insured

Chassis No.

: Market Value

Off Peak Car

Engine No.

Body Type

: No

: Sedan

: 1ZRX571489

Driver Restriction

: NA

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive :

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

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

Mileage Declaration

km

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.

Other Key Policy Benefits:

Act of God, Walver of Excess, PA Insured-\$50000, Dealer (Pirst 3 years from original registration) + AIG Authorised Workshops, Key Replacement Cover-\$800, In-Car Camera Excess Walver, NCD Protector, PA to Authorised Driver / Unnamed Passengers-\$10000, Strike, Riots and Civil Commotions, Loss of Use 1500cc - 1600cc Optional

EXCESS

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

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver

Kwang Keng Hock - \$800 (Own Damage), \$800 (Flood Cover)

PREMIUM

Premium GST (7%)

: \$:\$ 1,178.26 82.48

Total

: \$

1,260.74

Your Premium includes the following discount(s):

Safe Driver Discount - 5.00%, Loyalty Discount - 5.00%, No Claim Discount - 50%