ASS. REC. BY: STER 1 MEF: A/6	,
AS	SIGNMENT
	CAAA (11/9H 76/4/18
From: Dale:	Type: M.Car / M.Cycle / Bus / Van / Lorry /.Text / Prime Mover /
Ealimaled Cost:	
OD TP/WS/JP RES / OD RES / EVA / INV / MY	Make: KIA Catens cc 185
To Inspect Vehicle No:	11 11 0
el Workshop m/s	Colour A/C: Insured / Std / NI / N
of	8b.Reading ; S/// ) TACADIO, Insured 7 std 7 mm.
	Eng/No:
insured:	CNO: KNIAHM 815-VJ 7205417
Policy No.	Gen. Cond: Good / Fair / Poor / Burnt
Claims No.	Steering: Inprider / Jemmed / Leaked / Burnt or
Sum Insured: Excess:	Braket Inforder / Jammed / Leaked / Burnt or
(Client's Record)	Modi: Nii / S/Rim / STO A/Rim or
fake of Veh:	-1 $000000$
13	
(Policy Condition)	R:
emark: The veh had commenced its	a .
repair at the time of inspection.	TOYO / YOKO or 3
al as Markai Value	Front Rear
al. or Market Value:  AC Accident Rood: Consistent? : Yes or No	R/Bal, 4 . mm . R/Bal. 4 m
	UBal. 4 mm UBal. 4 n
IA / PR Seen: Consistent? : Yes or No	D.O.A. 8/1/21 , D.O.I. 11/1/21
st. Repairs: days Res.: Yes or No	CIVIL N COLLIAGO
rm Sum: % 3 Val.: Yes or No	·   Survey held Bi
	Des. of Damages : Frt / Rear / O/S N/S / U/C Rooftop or
	IT
A / REV / REP. / 24 HRS Vehicle: IN / OU	Of started due to collis
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Vehicle: IN / Outlet: IN / Outl	The 'Uld ! Charals frame ! Body Structure affected due to collis
Vehicle: IN 700  Person Contacted:  Person Contacted:  Action / Instruction  MV - 79,000	The 'U/C / Charsis frame / Body Structure affected due to collis
Vehicle: IN / OU	The 'UiC / Charsis frame / Body Structure affected due to collis
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Vehicle: IN 700  Sile: Person Contacted:  Date / Time Action / Instruction  MV - 79,000  iso/Time, File Plass to?  : Prell. Report  : Final Report	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:
Vehicle: IN 700  Sale: Person Contacted:  Date / Time Action / Instruction  MY - 79,000  Ne/Time, File Pass to?  Prell. Report  : Final Report	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  8 • RS_SI
Vehicle: IN 700  Sale: Person Contacted:  Date / Time Action / Instruction  MY - 79,000  Aug/Time, File Pass to? Prell. Report  : Final Report  ale/Time, File Return to?	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  8 - RS_SI  Interview (\$
Vehicle: IN 700    Date / Time   Action / Instruction	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  1 Site Insp (\$ ) _8 + RS_Si  1 Interview (\$ ) Photos  1 Tech. Inva (\$ )
Vehicle: IN 700  Sale: Person Contacted:  Date / Time Action / Instruction  MY - 79,000  Ale/Time, File Pass to? Prell. Report  : Final Report  ale/Time, File Return to?	Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  8 - RS_SI  Interview (\$



## CYCLE & CARRIAGE KIA PTE LTD PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

### **ESTIMATE**

GST Reg No : MR-8500111-X

g No : 199405410K Invoice Name & Address	Owner Name & Vehicle Info		
AIG Asia Pacific Insurance Pte.	Cust No/Name Reg No/Reg Date	/Ng Boon Chye Andrew @ Adhwa Ng SMA6469H / 26/04/201	
Ltd. MOTOR CLAIM DEPARTMENT 78 SHENTON WAY #08-16	Date In/Mileage Chassis No		
AIG BUILDING	Engine No	D4FDJH551779	
SINGAPORE 079120 Contact No 64191000	Make/Model Colour/Trim	KIA/CARENS 1.7 A D SX FL DY6  1D CLEAR WHITE / WK SATURN BLACK	

	-	Data/Time Printed	CSE	Operator		WIP No			
Account No	Terms	Date/Time Printed	BLC	442 / CocoLu		27036			
LAX00000	Credit	08/01/2021/ 16:04	NAME OF THE OWNER O		Qty U	nit Price	Disc%		ount
		Description of Good	S / Services					01100	4000.00
E PNT88000			LOOP IN DI	FAR DOOR LH	429 X 6			2410	
RENW FRT	BUMPER,	FRT FENDER LH, FRT I	DOOK LII, KI	LAK DOOK EN					
SIDE SIL				1 1				1750	2100.00
PNT98000		FRT BUMPER, FRT FEND	FR IH FRT	DOOR LH. REAR D	OOR LH			1750	
SPRAY PA	INT FOR	FRI BUMPER, FRI FERO	CK City Titl					l	
SIDE SIL	L LH,							l	160.00
E PNT88000	THETALL	FRT DOOR TRIMS AND	GLASS						160.00
	INSTALL	. FRI DOOR INTIIS AND	QE/100						160.00
E PNT88000	THETALL	REAR DOOR TRIMS AND	GLASS					00	120 00
	INSTALL	. KEAR DOOK TRITIS THE	grand .		П			80	120.00
M SUNDRY	ALANT FO	OR ACCIDENT PORTION	(C)		250				120.00
B WHEELALI	NMENT	N ACCIDENT	911						120.00
To Condi	ict Compi	uterize Full Wheel Al	Cignment	ט ט ט ט ט					30.00
A 90000001	ace comp	bearings.							30.00
CHECK W	IRING &	ELECTRICAL SYSTEM							120.00
A 10028901			-0.0					l	120.00
TO CARR	Y OUT DI	AGNOSTIC CHECK USING	HI-SCAN PR	RO TEST				l	
USING H	I-SCAN P	RO TEST						l	400.00
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Sundry M WHEEL	ACCV_ALII	MINIUM / CUT			1.00	704.00		l	563.20
M WHEEL	ED RIMPF	R / BR			1.00		20.00	l	556.00
M EMPLEM	-KIA /	186	1		1.00		20.00		60.80 9.60
M BRACKE	T-FR BUM	IPER UPK SIDE MIG	-		1.00		20.00	1	9.60
M BRACKE	T-FR BUM	IPER SIDE, LH			1.00		20.00		60.00
	**** EDO	NT WHEEL, LH			1.00	/5.00	20.00	1	00.00

Confirm & accepted by

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.

Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered any additional parts or labour which may be required that a after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a after work has started and needed for repairs or replacement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in Page 1 of 2



## CYCLE & CARRIAGE KIA PTE LTD PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

Co Reg No : 199405410K

### **ESTIMATE**

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 64191000	Cust No/Name Reg No/Reg Date Date In/Mileage Chassis No Engine No Make/Model Colour/Trim		

Account No	Terms	Date/Time Printed	CSE	Operator		WIP No		
LAX00000	Credit	08/01/2021/ 16:04	BLC	442 / CocoLu		27036		
		Description of Goo	ds / Servi	ces	Qty	Unit Price	Disc%	Amount
M PANEL-FE	NDER, LH	/ Din			1.00	425.00	20.00	340.00
M INSULATO	R-FENDER	LH			1.00		20.00	38.40
M LAMP ASS	Y-HEAD, LH				1.00	1558.00		1246.4
		DOOR, LH /			1.00	1097.00		877.6
M PANEL AS:			121		1.00	977.00		781.6
		JON TIME OTH,	Ne C		1.00		20.00	10.4
		I NAME AN CHI	gec N C		1.00		20.00	11.2
		TRAME TR, LM			1.00		20.00	8.8
		5. 5. 70.000	, ,		1.00		20.00	9.6
		RR, LH / RC	7		1.00		20.00	7.2
		DUTRER, LH	$\sim 1$		J1.00	1612.00		1289.6 952.0
		-FR AXLE	(0)	tima	157.25	1190.00		343.2
M ARM COMP		LWR, SH / KI	5		1.00	832.00		665.6
M GEAR ASS M BEARING-	영화 - (급위하) 그 구입하다.	NG 11			1.00	251.00		200.8
M BEARING- M KNUCKLE-		0.7			1.00	344.00		275.2
M STRUT AS					1.00	335.00		268.0
M BUMPER-R					1.00		20.00	33.6
M BEARING-					1.00		20.00	42.4
	T SPRING				1.00	47.00		37.60
	R ASSY-S				1.00	104.00	20.00	83.20
		STABILIZER, LH -			1.00	94.00	20.00	75.20
	-FR STAB	7			1.00	274.00	20.00	219.20
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the Repai	rer or the ic	spray painting		MULMA				
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Dade orio	e are subject	to confirmation		×		Net	•	16,796.0
Third part	v survey is on	a Without Prejudice basis	1		7% GST on	16796.0	1878 1878	1175.7
- No illegal	modification(	s) is allowed			/4 031 ON	10/30.0	•	11/3./
The second secon	isamie)	must be resurveyed and	n.		To	tal Payabl	e	17,971.7
is subject	to final appro	val from Insurance Company			10	tal layabi	<del></del>	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Authorized	signator	y and company stamp	_					

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.

Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

1321180002 / CYCLE & CARRIAGE AUTOMOTIVE PTE LTD SCIAZI 1900027 CTCLE & CARRIAGE AUTOM FNTRY DATE & TIME: 09/01/2021 11:10 (SGT) SUBMITTED BY: TAN SHIEH YUEN SUBMITTED BY: TAN SHIEH YUEN VERSION: 1 (09/01/2021 11:10 (SGT))



## SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 willful 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.

Vehicle Registration Number

Alternative Phone No

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

09/01/2021 11:10 (SGT) Date of Submission 08/01/2021 11:54 (SGT) Date of Accident Sengkang E Ave & Sengkang E Dr, Singapore SENGKANG EAST AVE-SENGKANG EAST DR **Exact Location of Accident** Additional Location Information Singapore Country/State of Loss

## NEWS DETAILS OF OWN VEHICLE

SMA6469H

INSURED/POLICYHOLDER Is company? NG BOON CHYE ANDREW @ ADHWA NG ABDULLAH Name Of Registered Owner SXXXX799A NRIC No ANBC649@YAHOO.COM Email Address (Phone) +65-93376688 Mobile Phone No +65-93376688

### VEHICLE PARTICULARS

Kia Manufacturer Carens Model Variant Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to Yes your vehicle? Private car Vehicle Category

### INSURANCE COMPANY

Name of Insurance Company AIG Comprehensive Type of Coverage Fleet Policy 1800039665 Policy Number Cover Note Number

#### DRIVER

Name of Driver SARAH NG ADHWA NRIC No. TXXXX819I Date Of Birth 29/11/2001 Occupation Indoor

<b>I</b> //	
of Driving Pass	40.03.0000
ving experience	13/07/2020 6 MONTHS
Lender	Female
Mobile Number	(Phone) +65-90029400
Alt. Phone Number	-
Email Address	SARAHNG2911@GMAIL.COM
Address	1 RIVERVALE LINK #08-07
Address complement	-
Postcode	545118
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?  Vehicle Registration Number of Other Vehicle Owned by Driver	No
Venicle Registration Number of Other Venicle Owned by Driver	Page
Insurance Company of Other Vehicle Owned by Driver	*
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet
OTHER INFORMATION	
OTHER INFORMATION	
to the second of the secon	No
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance?	No
DETAILS OF POLICE ACTION  Was the accident reported to the police?	Yes
Police Station Name	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	•
CIRCUMSTANCES OF ACCIDENT	
REFER TO ATTACHMENT COLLISION-HEAD TO SIDE	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No
P25	
EDETAILS OF OTHE	R VEHICLE PROPERTY 1
Vehicle Registration Number	SHD3933Y
Vehicle Manufacturer	
Vehicle Model	150 150
Vehicle Variant	100 100
Vehicle Colour	~~ ≝
Vehicle Category	Taxi
Name of Driver	420can(#7X

/	
/	
noct Number	0.00
THE RESIDENCE PROPERTY AND ADDRESS OF THE PARTY OF THE PA	
Address complement	3
Postcode Company Name	
rance Company Warne	
Nature Of Damage Nature Of Damage	i le
"- at property definated in accident	
No. Of Passenger (Including Driver)	
No. OT 1 933	

## INJURED 1

Name of injured person	UNKNOWN
A Jdrocc	-
Address Complement	Ē
Post Code	•
mate Age Years Old	=
	- SHD3933Y
Injured person in which vehicle?	273
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

### SKETCH PLAN

## IMPORTANT NOTICE

- 1. Rease 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
- 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 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)

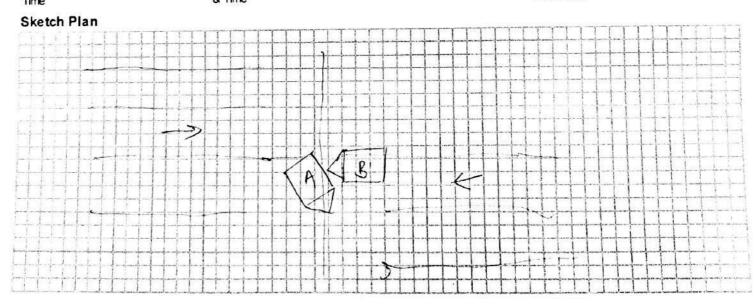
Lunderstand, acknowledge, agree and consent that :

- (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' 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' 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



1	was homing to the noise of a 1- unchar with two office an firming in
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	front of me The light was over, and me has other one had turned, so
	of white direction and will moving quite fail, I did not see it and was already
	half exce horning when it hit my far. I was raining of ne time.
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### Declaration

IWe declare the foregoing particulars are true in every respect.

Share of the same

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

Witnessed by Reporting Centre Personnel



# CHEMINOS TO THE REPORT OF THE PROPERTY CO.

## KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: NG BOON CHYE ANDREW @ADHWA NG ABDULLAH

CHERT SELECTION OF THE PROPERTY OF THE PROPERT

period of Insurance

: 26 Apr 2020 To 25 Apr 2021

the second is the second of th

Engine No.

: D4F DJH551779

Chassis No. : KNAHU815VJ7205410 Vehicle No.

SMAP AFAF

Policy No.

1 14/1/14/5/11

Endorsement No. Issued Date

: CA ASA 21/10

## ABOUT THE COVER ACTOR (MICHIGAN ACTION AND ACTION ACTOR ACTO

Make/Model

KIA Carens 1.7 Diesel SX

Engine Capacity/Tonnage: 1,685.00 CC

Sum Insured : Market Value

First Year of Registration : 2018

**Driver Restriction** 

Off Peak Car : No

: NA

Insuring with COLIPARE

Person or Classes of Persons Entitled to Drive\*;

a) The Policyholder

b) Any other person who is driving on the Policyholder's cycler or with his/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she ments 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 (married) is uncertainty in uncerta

Age Condition

; All Age Condition

Limitation as to use\* :

This Policy does not cover use for him or reward, driving fust, racing, pace-making, reliability trial or speed-feating, the carriage of grade other than switches in transfer with any take of 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 Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Fct, 1961 (Makeysis, Section 8 of the Motor Vehicles (Third-Party Risks and Compensation 9 of the Motor Vehicles (Makeysis) (Make

#### EXCESS MANDATON

Section 1

Fire . SO Own Damage - \$0 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

NG BOON CHYE ANDREW @ADHWA NG ABDULLAH

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

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

1 Cycle & Carnage Body & Paint Centre Add 209 Pandain Gardens Singliprice 099399 59904909.

2 Cycle & Carnage Authorised Service Centre (For accident reporting & windscreen claim only). Add: 330 Ubl Rd 3 Singliprice 409950 67451000.

3 Cycle & Carnage Authorised Service Centre (For accident reporting & windscreen claim only). Add: 241 Alexandra Road Singliprice 159931 64278800.

4 Cycle & Carnage Authorised Service Centre (For accident reporting & windscreen claim only). Add: 600 Sin Ming Ave Singliprice 575733 69328000.

For other: Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6336 6200. Alternatively, you may refer to AIG website www wg 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: HL Bank

I/We hereby certify that the policy to which this Certificate of Insurance rolates 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 (Arnendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504622233

C&CKICP2 - ERICL

239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

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Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

1 of 3 Report No. T/20210108/2100

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/01/2021 17:32			Vide Report No.:	Station Diary No.: 87			
Informant	t's Partici	ılars	5 1000 ANGESTION 15 RT				
Name of I SARAH N		A	Address: 1 RIVERVALE LINK #08-07 SINGAPORE 545118				
ID Type / ID No.: NRIC NO / T0136819I			Contact No.: Home/Office:	Mobile: 90029400			
Nationality: SINGAPORE CITIZEN			Email:				
Sex: Age: Date of Birth: Female 19 29/11/2001			Type of Informant: Driver	Institution / School Name:			
Race: Chinese			Language:	Institution / School Hame.			
Occupation:			Driving Licence Information: Class: 3A	Date of Expiry:			

Seneral Infor	mation of the Accident	Delate	Date/Time of	Type of Location
Type of Accident:	Injury Conveyed By Ambular	Drink nce Drive: No	Accident: 08/01/2021 12:00	
Location: SENGKANG	EAST DRIVE			
				- LO ad Limit:
Weather:	13	Road Surface: Wet		Road Speed Limit:
Weather: Raining Traffic Flow:	1			Road Speed Limit:  Traffic Volume:

Details of V	ehicle Invo	lved	Model	Color	Condition	No of Passenge
Vehicle No.	Туре	Make	Model	00.0.		0
SHD3933Y	Taxi				Seriously	0
SMA6469H	Car				Damaged	1



2 of 3

Report No. T/20210108/2100

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

**CONTINUATION OF REPORT** 

### Brief Details.

On 08/01/2021 at 1200hrs, I was driving along Sengkang East drive in my vehicle, SMA 6469H and everything was normal. As soon I reached the traffic junction of Sengkang East drive, I was getting ready to make a right turn into Sengkang East Avenue. I wish to state that I was the third vehicle in line for the right turn and it was raining at the point of time.

After the two vehicles in front of me had made the turn, I started making the turn when suddenly, one Taxi, SHD 3933Y came from the opposite direction of the road and collided onto my vehicle. It was when Traffic police came down and subsequently, the taxi driver was conveyed to the hospital due to this injuries. I was not injured from this accident. The damages are serious dents on the front of the car which rendered my car unusable and had to be towed away.

I am lodging this report for record and insurance purposes.





3 of 3 Report No. T/20210108/2100

police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

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.

The Report	Signature Of Informant:
Signature Of Officer Recording The Report: F / Sgt 1 ONG YU HAN	A thurs
Signature Of Interpreter:  Not applicable	Date/Time: 08/01/2021 17:32
Officer In Charge Of Case: TP / GIT /	Classification Of Case:
Staff Sgt QHAIRIL BIN ZULKLI LLL Contact No.: 65476187	
Authentication Stamp	