

# NATIONAL Assessment Centre Services.

[ver 1 Jan 05]

NA2100979

Date In: 08/02/2001 15:58	Job description	Date & Time Completed	Done by
Ref No: N/A/MG21001571/Y	SAS e-Milling		
Veh No: GBE 3874	E-mail (by date 2hrs, A/C 2hrs)		
D.O.A: 29/01/2001 09:20	1-Motor Clutch Repair		
(1) TP: Reporting Only	1-Motor W/O (With 1hr OD 2hrs, TP 4hrs)		
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner / VHS		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Ref: 1571/Y	Veh No: LU 9590B	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 ( )	
Process: (\$	Loading: \$1,000 ( ) / \$2,000 ( )	

( ) Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repair.
( ) Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

1) Apply for Transport Allowance ( ) / Courtesy Car ( )
2) QC Check / Post Repair Inspection ( )
3) Upload Resurvey Photo (Repair Cost > \$3000) ( )

Injury: ( )

NA2100979	1) All Accident Reporting (330)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$10)	
Contact No:	3) TP: Towing Fee \$40/45	
Damaged Portion:	4) PT: Follow Through Survey \$120	
	5) PT: Follow Through Survey (Resurvey) \$30	
	6) TP: Follow Through Survey (Resurvey) \$30	
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QC Checked by (Engr-In-Charge):	Fee Charged
	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 Submission	02/02/2021 15:58 (SGT)
Date of Accident	29/01/2021 09:20 (SGT)
Exact Location of Accident	Tampines Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF3187U
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KST AUTO RENTAL PTE LTD
Company Reg No	2XXXXX860W
Email Address	kstteam@singnet.com.sg
Mobile Phone No	(Phone) +65-92314300
Alternative Phone No	+65-92314300

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle

### INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	999993817
Cover Note Number	-

### DRIVER

Name of Driver	MUHAMMAD SHAHRIN BIN SHABIRIN
NRIC No	SXXXX068F

Date Of Driving Pass	20/02/2014
Driving experience	6 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92314300
Alt. Phone Number	-
Email Address	shrnboy6498@gmail.com
Address	BLK 452 HOUGANG AVENUE 10 #5-567
Address complement	-
Postcode	530452
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLU9590B
Vehicle Manufacturer	Kia
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-

Nature Of Damage	.....	-
Details of property damaged in accident	.....	-
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 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)**  
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.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan

A) GBE 31874

B) SLU 9590B

30/1/21 1152HOURS

02/02/2020

Amplitude 1000

Sketch Plan diagram showing a grid with a central vertical line and a horizontal line. The grid is divided into four quadrants. The top-left quadrant contains the text 'A) GBE 31874'. The top-right quadrant contains the text 'B) SLU 9590B'. The bottom-left quadrant contains the text '30/1/21 1152HOURS'. The bottom-right quadrant contains the text '02/02/2020'. The central vertical line is labeled 'Amplitude 1000'.

Describe Circumstances of the Accident

ON 29/01/2021 AT ABOUT 09.20 HRS I WAS AT TAMPINES ROAD TO MAKE A RIGHT TURN TOWARDS KPE, SLOW MOVING TRAFFIC B/L TURNING, SUDDENLY I FELT A BANG ON MY RHOR. I CAME DOWN & SAW A CAR S2495903 BANG BACK THE RHOR OF MY VAN GBF 3874 THAT ALL.

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



# ACCIDENT STATEMENT

ACCIDENT DATE: (29 / 01 / 2021) (DD/MM/YYYY), TIME: (09 : 20) (HH:MM)

LOCATION: TAMPINES ROAD

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: 98F 3187 4  
 b) INSURANCE COMPANY: ALG  
 c) POLICY NUMBER:  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL:  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: KST AUTO CONTROL PTE LTD (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: CONTACT:  
 c) ADDRESS:

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: MUHAMMAD SHAHRIN BIN SHABIRIN (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 59348068F CONTACT: 92314300  
 c) ADDRESS: BLK 452, HOUGANG AVE 10,  
 #05-567 (S) 530452

\*d) DATE OF BIRTH: (23 / 12 / 1993) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE:

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)  
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLW9590B MODEL: KIA  
 b) DRIVER'S NAME:  
 c) NRIC/FIN/PASSPORT: CONTACT:

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: MODEL:  
 e) DRIVER'S NAME:  
 f) NRIC/FIN/PASSPORT: CONTACT:

Email = shrnboy6498@gmail.com

Fax =

VIDEO =

\* No of passengers  
 (including driver)  
 (1)

\* No of passengers  
 (including driver)  
 ( )

\* No of passengers  
 (including driver)  
 ( )





HOTLINE TEL: (65) 6419-3000

**CERTIFICATE OF INSURANCE**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA) and Road Transport (Amendment) Act 2019

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

COMPREHENSIVE		COMMERCIAL MOTOR		POLICY EXCESS		REFER TO ITEM 6	
CERTIFICATE NO.	GBF3187U			WINDSCREEN EXCESS			S\$100.00
POLICY NO.	999993817			SUM INSURED			MARKET VALUE
1) VEHICLE REGISTRATION NO.				INSURING WITH COE/PARF			
2) NAME OF INSURED				GBF3187U			
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT				XST AUTO RENTAL PTE LTD			
4) DATE OF EXPIRY OF INSURANCE				12 April 2020			
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE				11 April 2021			
Any person who is driving on the insured's order or with their permission.							
S\$1,000.00 section 1 excess is applicable for driver who is between 21 years to 70 years old with minimum 1 year of driving experience where vehicle tonnage is below 2 tons.							
S\$1,500.00 section 1 excess is applicable for driver who is between 21 years to 70 years old with minimum 1 year of driving experience where vehicle tonnage is below 3 tons.							
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court or Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.							
6) LIMITATION AS TO USE							
1) Use for social, domestic, pleasure purposes and business purposes of insured.							
2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.							
3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.							
The Policy does not cover: 1) Use for tuition, driving test, racing, pace making, rally, trial or speed testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.							
LOSS OF USE				Not included			
HIRE PURCHASE COMPANY				NA			

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019.

Issued in Singapore 03 Jun 2020

AIG Asia Pacific Insurance Pte. Ltd.

155005-000  
Koh Tong Poh Peter  
AIG Building  
78 Shenton Way (Gems Room)  
Singapore 079120

ORIGINAL

AUTHORISED REPRESENTATIVE

SSPOEC



Transaction ref 20160908142918080356

The owner and vehicle particulars for Vehicle No. GBF3187U as at 08 Sep 2016 are as follows:

1. Name	: KST AUTO RENTAL PTE LTD
2. Identification No. Type	: Company
3. Identification No.	: 200806860W
4. Place Of Passport Issue	: -
5. Registered Address	: 3021A UBI ROAD 1 #01-42 SINGAPORE 408715
6. Mailing Address	: -
7. Vehicle No.	: GBF3187U
8. Effective Date of Ownership	: 08 Sep 2016
9. Original Registration Date	: 08 Sep 2016
10. First Registration Date	: 08 Sep 2016
11. Vehicle Type	: A50 - Goods (Closed) Van/Van Panel (Delivery)
12. Vehicle Scheme	: Normal
13. Attachment 1	: No Attachment
14. Attachment 2	: -
15. Attachment 3	: -
16. Vehicle Make	: TOYOTA
17. Vehicle Model	: TOYOTA HIACE VAN TURBO 5 DR MANUAL
18. Year of Manufacture	: 2016
19. Primary Colour	: White
20. Secondary Colour	: -
21. Passenger Capacity	: 2
22. Chassis/Trailer Chassis No.	: JTFHT02P800201950 / -
23. Propellant/Emission Standard	: Diesel / Euro V
24. Engine No./Motor No.	: 1KD2635234 / -
25. Engine Capacity(cc)/Power Rating(kW)	: 2982 / -
26. Maximum Power Output(kW/bhp)	: - / -
27. Unladen Weight(kg)	: 1740
28. Maximum Laden Weight(kg)	: 2800
29. Open Market Value	: \$27,952.00
30. PARF Eligibility	: No
31. PARF Eligibility Expiry Date	: -
32. Minimum PARF Benefit	: \$0.00
33. IU Label No.	: -
34. COE No.	: 2016090805000518H
35. COE Expiry Date	: 07 Sep 2026
36. COE Category	: -
37. Quota Premium/Prevailing Quota Premium	: \$48,087.00
38. Actual Quota Premium/PQP Paid	: \$44,911.00
39. Actual ARF Paid	: \$1,398.00
40. CO2 Emission(g/km)	: 216.00
41. Actual CEVS Rebate Utilised	: -
42. CEVS Surcharge Paid	: -
43. Actual Green Vehicle Rebate Utilised	: -
44. Vehicle Lifespan Expiry Date	: 07 Sep 2036
45. Road Tax Amount	: \$213.00
46. Road Tax Start Date	: 08 Sep 2016
47. Road Tax End Date	: 07 Mar 2017
48. Remarks	: This vehicle requires side marking. The vehicle is registered under Early Turnover Scheme.