

NATIONAL Assessment Centre Services

part 1 Jan'03

| | | | |
|--------------------------|--|-----------------------|---------|
| Date In: 04/02/21 | Job description | Date & Time Completed | Done by |
| Ref No NA/AIG21001705/13 | SAS e-filing | | |
| Veh No GBG9920A | E-mail (within 3hrs, AIC 2hrs) | | |
| ICCA 03/02/21 11:00 | 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: GBF57766 | 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 repolar. |
| () Total Loss Case: to e-mail Insurer URGENTLY. |
| Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: (|

| | |
|---|---------|
| Remarks: | 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: | Location: |
| | |
| | |
| | |
| | |

| | | | | |
|---------------------------------|-----------|---|-------------|---------|
| Claims Particulars: | NA2101613 | Invoice Itemization | Amount (\$) | Remarks |
| Driver/Owner: | | 1) AR: Accident Reporting (\$30); | 30 | |
| Contact No: | | 2) DA: Damage Assessment (\$100); INC (\$30) | | |
| Damaged Portion: | | 3) TR: Towing Fee \$40/\$45 | | |
| QC Checked by (Engi-In-Charge): | | 4) PT: Follow-Through Survey \$120 | | |
| Auditors Comments: | | 5) PT: Follow-Through Survey (Resurvey) \$30 | | |
| Est. 1: | | For claiming against INC Only (wef 10 Jan 2003) | | |
| Est. 2: | | 6) TR: Re-inspection \$75 | | |
| | | 7) NI: Idao DA + SMRT Survey \$160 | | |
| | | 8) NTUC Additional Services:- | | |
| | | Q1: | | |
| | | *NS: Courtesy Car / Tpt Allowance \$3 | | |
| | | *NG: Repair Co-ordination \$10 | | |
| | | *NT: Post Repair Inspection \$25 | | |
| | | *NI: DV / Collect Excess Coordination \$3 | | |
| | | TP (NI1): TP (Inc in INC) against INC \$20 | | |
| | | 9) NI2: Idao Mobile \$0 | | |
| | | Invoice dated | Fee Charged | |
| | | 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 Submission | 04/02/2021 17:33 (SGT) |
| Date of Accident | 03/02/2021 11:00 (SGT) |
| Exact Location of Accident | Hougang Ave 3, Singapore |
| Additional Location Information | B4 LORONG AH SOO |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | GBG9920A |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|-------------------------------|
| Is company? | Yes |
| Name Of Registered Owner | FIVESTARS INDUSTRIAL SUPPLIES |
| Company Reg No | 4XXXX000C |
| Email Address | aaroniu3088@gmail.com |
| Mobile Phone No | (Phone) +65-98210379 |
| Alternative Phone No | +65-98210379 |

VEHICLE PARTICULARS

| | |
|--|---------------------|
| Manufacturer | Nissan |
| Model | Nv200 |
| 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 - Reporting only |
| Vehicle Category | Commercial vehicle |

INSURANCE COMPANY

| | |
|---------------------------|---------------|
| Name of Insurance Company | AIG |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | 1800001479-03 |
| Cover Note Number | - |

DRIVER

| | |
|----------------|---------------|
| Name of Driver | CHIA BOON HEE |
| NRIC No | SXXXX319F |
| Date Of Birth | 21/10/1955 |
| Occupation | Outdoor |

| | |
|--|-------------------------|
| Date Of Driving Pass | 28/04/1976 |
| Driving experience | 44 YEARS AND 10 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-98210379 |
| Alt. Phone Number | - |
| Email Address | aaroniu3088@gmail.com |
| Address | BLK 756 WOODLANDS AVE 4 |
| Address complement | #12-287 |
| Postcode | 730756 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Other |
| 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

PLS REFER TO THE ATTACHED STATEMENT.

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 | GBF5776G |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Commercial vehicle |
| Name of Driver | GOH SOON TIONG |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |

| | |
|---|---|
| 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' 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

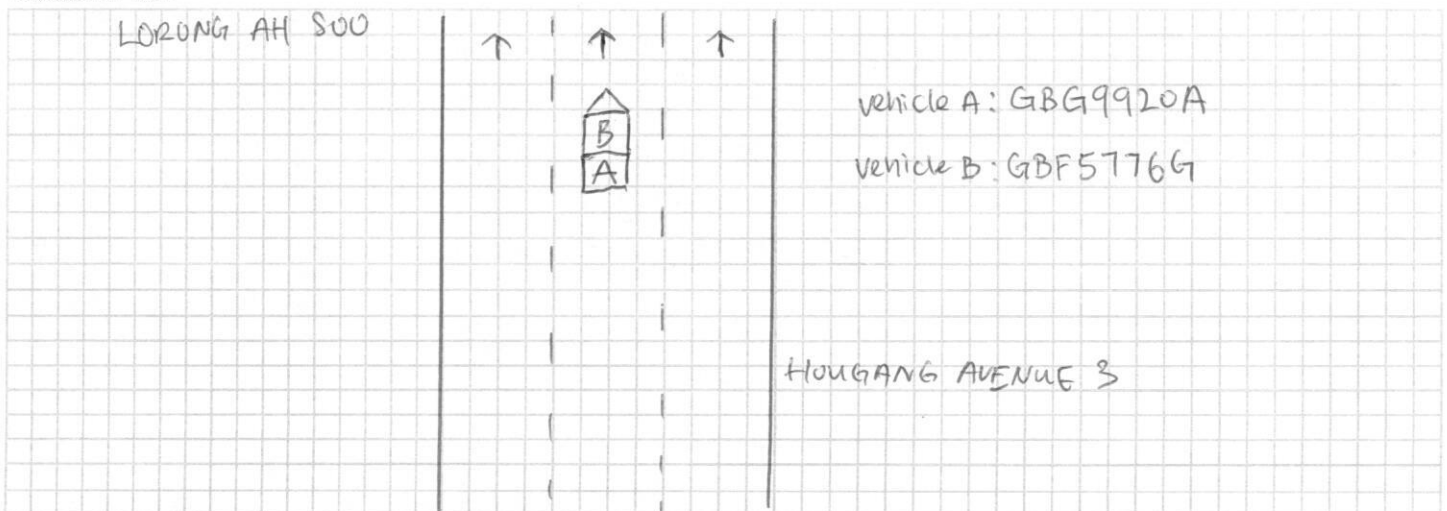
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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

 04/02/21
Witnessed by Reporting Centre Personnel

Sketch Plan

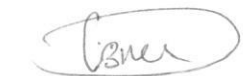


Describe Circumstances of the Accident

On 03/02/2021 at about 1100am, I was travelling along Hounsmy Ave
3. just before Lorong Ah-soo junction. The front vehicle brake
and I follow suit. However, my vehicle couldn't stop in time
and collided onto vehicle GBF5776G. We took photos and exchange
particulars and file a reports to insurance.)

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

 04/02/21

Witnessed by Reporting Centre
Personnel

Date of Accident : 3/2/2021 Accident Time: 1100 am (24-HR-Format)
 Accident Place : HOUGANG AVENUE 3 before Lorong Ah soo
 Vehicle No. (Car Plate No.) : GBG 9920A Make/Model: NISSAN NV200
 Insurance Company : AIG Policy No: _____
 Owner or Company Name /IC No. : CHIA BOON HEE 51174319F
 Owner or Company Contact No. : 9821 0379 Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : CHIA BOON HEE 51174319F
 DRIVER'S Date Of Birth : 21/10/1955 DRIVER'S License Pass Date 28/4/1976
 Relationship of Owner & Driver : Spouse \ Parent \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : 756 woodlands Avenue 4 #12-287 S(730756)
 DRIVER'S Contact No./ Alt No. : 1) _____ 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : zaroniu3088@gmail.com
 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): 01
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at time of accident: Private use \ Work Purpose
 Any Injury (If YES, Pls state): _____

Other Party Driver's Particular (if any)

| | |
|--|------------------------------|
| Vehicle. No: <u>GBF 5776G</u> | Vehicle. No: _____ |
| Vehicle Make \Model: <u>NISSAN NV200</u> | Vehicle Make \Model: _____ |
| Name Driver: <u>GOH SOON TIONG</u> | Name Driver: _____ |
| IC No. Driver/Contact: _____ | IC No. Driver/Contact: _____ |

* **NEW – Passenger's name & gender:**

913



CERTIFICATE OF INSURANCE

NISSAN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : Fivestars Industrial Supplies
Period of Insurance : 20 Dec 2020 To 19 Dec 2021
Engine No. : K9KE628D410284
Chassis No. : VSKYBAM20Z0156336

Vehicle No. : GBG9920A
Policy No. : 1800001479-03
Endorsement No. :
Issued Date : 11 Nov 2020

ABOUT THE COVER

Make/Model : NISSAN NV 200

Engine Capacity/Tonnage : 0.6 Tonnage

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2017

Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive* :

a) Any person who is driving on the Policyholder's order or with their permission.

b) 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* :

1) Use in connection with the Policyholder's business.

2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.

3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing; and b) use whilst drawing a trailer except the towing of anyone disabled using a mechanically propelled vehicle c) use for any purpose in connection with Motor Trade.

Loss Of Use (7 Days) Commercial Auto

* 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 - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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

1 Tan Chong Motor Sales Add: 913 Bl Timah Road Singapore 589623 64694091 64694092 64694093

2 Autolion Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666

3 TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513

4 TC AutoClinic Add: No 1, Sixth Lok Yang Road Singapore 628099 62622212

5 Tan Chong Motor Sales Add: 17 Lor 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: United Overseas Bank Limited

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).

0500610330

TAN CHONG CREDIT PTE LTD-KKT

911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Eng Kiat See