

NATIONAL Assessment Centre Services.

(wef 1 Jan'05)

SN0821400002

Date In: 26/04/2021 14:52	Job description	Date & Time Completed	Done by
Ref No: N/A/A/GD10057314	SAS e-filing		
Veh No: SLJ 36335	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 21/04/2021 20:05	I-Motor Claim Form		
OD: TP Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SJV 7966H	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 repaler.
() Total Loss Case : to e-mail Insurer URGENTLY.
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks:	(INC hotline: 6788 6616)	Date & Time Completed	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	Actions

<p>NA2102692</p> <p>Claimant's Particulars:</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments:</p> <p>Pat. 1:</p> <p>Pat. 2 / 3:</p>	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
	Item	Description	Fee/Bill	Add/Bill
	1) AR: Accident Reporting (\$30);			
	2) DA: Damage Assessment (\$100);	INC (\$80)		
	3) TF: Towing Fee	\$40/\$45		
	4) FT: Follow-Through Survey	\$120		
	5) FT: Follow-Through Survey (Resurvey)	\$30		
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection	\$75		
	7) N1: Idao DA + SMRT Survey	\$160		
8) NTUC Additional Services:-				
OD:				
*N5: Courtesy Car / Tpl Allowance		\$5		
*N6: Repair Co-ordination		\$10		
*N7: Post Repair Inspection		\$25		
*N8: DV / Collect Excess Coordination		\$5		
TP (N11): TP (N'n INC) against INC		\$20		
9) N12: 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	26/04/2021 14:52 (SGT)
Date of Accident	25/04/2021 20:05 (SGT)
Exact Location of Accident	Bukit Batok East Ave 3, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ3633J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TANG LING YING
NRIC No	SXXXX155B
Email Address	kellytly@hotmail.com
Mobile Phone No	(Phone) +65-94557097
Alternative Phone No	+65-94557097

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1197

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100492432-04
Cover Note Number	-

DRIVER

Name of Driver	TANG LING YING
NRIC No	SXXXX155B

Date Of Birth	31/12/1972
Occupation	Indoor
Date Of Driving Pass	08/08/2008
Driving experience	12 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-94557097
Alt. Phone Number	+65-94557097
Email Address	kellytly@hotmail.com
Address	1 BUKIT BATOK STREET 25 #10-06
Address complement	-
Postcode	658882
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	YEO KARN LEE
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20210426/7013

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	SJV7966H
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TANG LING YING
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLJ3633J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	YEO KARN LEE
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLJ3633J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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.


[Signature]

Policyholder's Signature / Date & Time

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

[Signature] 26/04/2021
Witnessed by Reporting Centre Personnel

Sketch Plan

BUKIT BATOK WEST AVE 3		A: SLJ 3633 J B: SJV 7966 H
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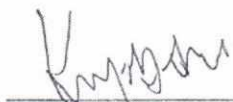
Describe Circumstances of the Accident

On 25/04/2021, at about 20:05hrs, I was travelling along Bukit Batok West Ave 3 towards Bukit Batok Central. I was driving on the middle lane of 3 lanes. Upon reaching the X-Junction between Bukit Batok West Ave 3 and Bukit Batok West Ave 2, I slowed down and stopped. After a few seconds, I felt a great impact from the rear. I alighted and realised vehicle B had collided onto the rear portion of my vehicle.

POLICE REPORT 1/20210426/7013

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



26/04/2021

Witnessed by Reporting Centre Personnel

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 25-Apr-2021

ACCIDENT TIME: 2005HRS

LOCATION: BUKIT BATOK EAST AVENUE 3

VEHICLE NUMBER: SLJ3633J

INSURED NAME: TANG LING YING

NRIC / FIN: S7274155B

CONTACT: 94557097

MAKE: NISSAN

MODEL: QASHQAI 1.2 DIG-T CVT ABS 2WD
5DR

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

() Yes, If No, Pls Select: (☒) Third Party () Reporting Only

INSURANCE COMPANY: AIG

TYPE OF POLICY: Comprehensive

POLICY NUMBER: 2100492432-04

EXPIRY DATE: 29-Nov-2021

NAME DRIVER: TANG LING YING

NRIC / FIN: S7274155B

CONTACT: 94557097

DATE OF BIRTH: 31-Dec-1972

DRIVING PASS DATE: 08-Aug-2008

OCCUPATION: Indoor

GENDER: Female

EMAIL ADDRESS: kellytly@hotmail.com

ADDRESS OF DRIVER: 1 BUKIT BATOK STREET 25 #10-06 SINGAPORE 658882

Relationship Of The Driver With The Insured: Employee

Number Of Passenger Include Driver: 1 Driver + 1 Passenger(s)

NAME	NRIC/FIN/BC	GENDER	INJURED
TANG LING YING	S7274155B	Female	<input checked="" type="checkbox"/>
YEO KARN LEE		Female	<input checked="" type="checkbox"/>

INJURY DETAILS: 1 Driver, 1 Passenger(s)

Insurance Company Of Driver's Own Vehicle:

Weather Conditions: Clear

Road Surface: Dry

Was Any Foreign Vehicle Involved In This Accident? No

Convey By Ambulance: No

Was There Any Video Capture By Car Camera? No

Was There Accident Reported To The Police? Yes

Police Report Number: T/20210426/7013

Details Of 3rd Party	Name	NRIC	Contact	No.of Paxs(incl' driver)
Veh B SJV7966H				Not Sure



SINGAPORE POLICE FORCE



T/20210426/7013

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 4

Report No. T/20210426/7013

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/04/2021 13:03	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: TANG LING YING		Address: 1 BUKIT BATOK STREET 25 #10-06 SINGAPORE 658882	
ID Type / ID No.: NRIC NO / S7274155B		Contact No.: Home/Office: Mobile: 94557097	
Nationality: MALAYSIAN		Email: kellytly@hotmail.com	
Sex: Female	Age: 48	Date of Birth: 31/12/1972	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Accountant		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/04/2021 20:05	Type of Location: Straight Road
Location: BUKIT BATOK EAST AVENUE 3				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One 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	Conditio	No of
SJV7966H	Car					1
SLJ3633J	Car	NISSAN	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR	Red		1



**SINGAPORE
POLICE FORCE**



T/20210426/7013

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210426/7013

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLJ3633J	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100492432-04	30/11/2020	29/11/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Passenger				
Name	YEO KARN LEE		ID No.	NIL
Related Vehicle	SLJ3633J (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL
Driver				
Name	TANG LING YING		ID No.	S7274155B
Related Vehicle	SLJ3633J (Car)		Contact No.	94557097
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	26/04/2021		Date	26/04/2021
No. of Days granted Medical Leave		03	Degree of	Slight

Brief Details.

On 25/04/2021, at about 20:05hrs, I was travelling along Bukit Batok West Avenue 3 towards Bukit Batok Central. I was driving on the middle lane of 3 lanes. Upon Reaching the X-Junction between Bukit Batok West Avenue 3 and Bukit Batok West Avenue 2, I slowed down and stopped. After a few seconds, I felt a great impact from the rear. I alighted and realised vehicle SJV7966H had collided onto the rear portion of my vehicle.

On 26/04/2021, I went to Unihealth 24-hr Clinic to seek medical attention and was given 3 days MC.

I am lodging this report for insurance claims purpose.



**SINGAPORE
POLICE FORCE**



T/20210426/7013

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210426/7013

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20210426/7013

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210426/7013

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
SYED ZAYID MUHAMMAD BIN SYED ABDUL
WAHID ALHINDUAN
Contact No.: 65476404

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
26/04/2021 13:03

Classification Of Case:

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tang Ling Ying
Period of Insurance : 30 Nov 2020 To 29 Nov 2021
Engine No. : HRA2351014A
Chassis No. : SJNFEEAJ11U1816487

Vehicle No. : SLJ3633J
Policy No. : 2100492432-04
Endorsement No. :
Issued Date : 02 Nov 2020

ABOUT THE COVER

Make/Model : NISSAN QASHQAI 1.2 DIG-TURBO
Engine Capacity/Tonnage : 1,197.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2016
Insuring with COE/PAF : 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
Mileage Condition : Unlimited Mileage
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), 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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2
 Property Damage - \$0

Windscreens : \$100

Named Driver and Excess (where applicable)

Tang Ling Ying - \$600 (Own Damage), \$600 (Flood Cover)

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

1. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
2. TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 628099 62622212
3. Autolution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666
4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
5. Tan Chong Motor Sales Add: 17 Lorong 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: MayBank

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).

0500610530

TAN CHONG CREDIT PTE LTD - SMY

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.

SSPLLC

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	155B
Vehicle Details	
Vehicle No.:	SLJ3633J
Vehicle to be Exported:	Yes
Intended Deregistration Date:	26 Apr 2021
Vehicle Make:	NISSAN
Vehicle Model:	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
Primary Colour:	Red
Manufacturing Year:	2016
Engine No.:	HRA2351014A
Chassis No.:	SJNFEAJ11U1816487
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$18,725.00
Original Registration Date:	30 Nov 2016
First Registration Date:	30 Nov 2016
Transfer Count:	0
Actual ARF Paid:	\$13,725.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Nov 2026
PARF Rebate Amount:	\$10,293.00
Intended COE Rebate Details	
COE Expiry Date:	29 Nov 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$50,951.00
COE Rebate Amount:	\$28,490.00
Total Rebate Amount:	\$38,783.00

The information contained herein is correct as at 26 Apr 2021

OK