NATION	11. Assessment Centre	Services					
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	0/05/21 0910	i-Motor Clair	n Form	X			
OD (11) Reporting Only		i-Motor W/O (Within: OD 2hrs. TP 4hrs)					
		i-Photo Uploaded					
TP Insurer:		Assessment/Su	rvey Report	1	1		
		Ass't Report by Fax / Hand to Owner/Wksp					
	sp / INC Assign Wksp / QW: (Tel:	Fax:		
TP Particul:		SKV167G	INC ()/Non-INC()			
Owner / Dr				Tel:)	
Policy No:		od: ()	Cover Type: ()	
	ifirmed by : (D . C	Date:	Time:	1.00921		
				%; P. 21-79%. F: 80	1-10-20]		
		arranty: YES ()/NO()			
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1) Apply for	Transport Allowance () / Co	ourtesy Car ()				
2) QC Check	/ Post Repair Inspection	()					W
3) Upload Re	esurvey Photo [Repair Cost > \$30	000] ()				
Injury: -							
Date/Time	Actions		25 445 345				
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							1/5
SERVIVE	NA2102954		Invoice Prep	paration Checklist		Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-			1) AR : Accident		(\$80)		
			3) TF : Towing F	ce	\$40.'\$45		
Priver/Owner:			4) FT : Follow-T	nrough Survey hrough Survey (Resurvey)	\$120 \$30		
Contact No:			For claiming a	gainst INC Only (wef 10 Jan 2	005) \$75		
amaged Portion:			6) TR : Re-inspec 7) N1 : Idae DA	SMRT Survey	\$160		
		5	8) NTUC Addition	onel Services +			
C Checked by (Engr-In-Charge):			*N5: Courtesy	Car / Tpt Allowance	\$5		
			*N6: Repair C *N7: Post Rep	air Inspection	\$25		
auditors' Comments :-				lect Excess Coordination (Non INC) against INC	\$5 \$20		
at. 1:			9) N12: Idac Mo	bile	30		
nt. 2 / 3;	nt. 2 / 3:		Invoice dated	ivee Charg Fae Charg	100		the United States of Adjusters

SN09215K0008 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 20/05/2021 15:14 (SGT) SUBMITTED BY: Roslinda Binte A. Wahab VERSION: 1 (20/05/2021 15:14 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

This Form must be completed by the Policyholder and/or the Authorised Driver Internation provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

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.

The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

20/05/2021 15:14 (SGT) 20/05/2021 09:10 (SGT) 65 Circuit Rd, Block 65, Singapore 370065 FOOD CENTRE CARPARK Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLX5497Z

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No. Email Address Mobile Phone No

Alternative Phone No

No

LEE CHEE WEI ANDREW

SXXXX279D

A17DREW@GMAIL.COM (Phone) +65-93833899

+65-93833899

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission

CC

Nissan

Qashqai

Private use

No - Claiming third party

Private car

Auto

1200

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number

Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd.

Comprehensive

No

1800032937-03

DRIVER

Name of Driver NRIC No

LEE CHEE WEI ANDREW SXXXX279D



03/11/1978 Date Of Birth Outdoor Occupation 06/05/2002 Date Of Driving Pass 19 YEARS Driving experience

Gender (Phone) +65-93833899 Mobile Number

+65-93833899 Alt. Phone Number A17DREW@GMAIL.COM Email Address BLK 308A PUNGGOL WALK Address

#10-426 Address complement 821308 Postcode Is the driver the policyholder? Yes 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

Collided into Parked Vehicle Type of Accident

Weather Conditions Dry Road Surface

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)

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? No Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SKV167G Vehicle Registration Number Vehicle Manufacturer Vehicle Model

Vehicle Variant Vehicle Colour

Private car Vehicle Category

Name of Driver (Phone) +65-82226380 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

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

Witnessed by Reporting Centre

Sketch Plan

Circuit Road Market & Food Contra R:SKV167G Block 65

Describe Circumstances of the Accident vehicle about Block Darked LVOS Centre Vehicle 011 Vehicle and 1,500 Siclo CEVENGE

Declaration

Time

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

EHICLE NO: SLX5497Z	MAKE & MODEL: NISSAN GASHGAI AUTO/ MANUAL					
ATE OF ACCIDENT:	20/05/2021 cc: 1-2					
ME OF ACCIDENT:	ON (O HRS					
OCATION OF ACCIDENT:	Block 65 Circuit Road Food Centre Carpark.					
XACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT / PRIVATE USE- / PRIVATE HIRE					
AME OF OWNER:	Lee Chee Wei, Andrew					
EL NO:	H/P: 93833899 OFFICE: HOME:					
RIC:	S7833279D					
DDRESS:	BIK 308A Punggal Walk #10-426 S(821308)					
MAIL:	altdrew @ gmail.com					
LAIM TYPE:	OD / THIRD PARTY / REPORTING ONLY					
LEET POLICY:	YES /NO?					
NSURANCE COMPANY:	AIG					
YPE OF COVERAGE:	Comprehensive → / Third Party / Third Party Fire & Theft					
POLICY NO:	1800032937-03					
NAME OF DRIVER:	AS ABOVE / IF NO: —					
NRIC:	ANY PASSENGER: NO					
DATE OF BIRTH:	03/11/1978 LICENCE PASSED DATE: 06/01/2015					
OCCUPATION:	OUTDOOR / INDOOR					
GENDER:	MALE / FEMALE					
CONTACT NO:	H/P: — OFFICE: HOME:					
ADDRESS:						
(A-5) T(2)(A)(5) (A)(5)	t					
EMAIL : DOES DRIVER OWNED ANY VEHICLE:	NO/ IF YES, REG NO: INSURER:					
RELATIONSHIP:	Owner.					
110 11 11 110 110 110 110 110 110 110 1	CLEAR / RAINING / OTHERS:					
WEATHER CONDITION:	DRY / WET / OTHER:					
ROAD SURFACE:	NO / IF YES, WHO?					
ANY INJURIES: NAME & CONTACT:						
	-					
NAME & CONTACT:	NO / IF YES, WHERE?					
POLICE REPORT:	NO / IF YES, WHO?					
NOTICE OF INTENDED PROSECUTION GIVEN?	SKV167G ANY PASSENGERS: NO					
VEHICLE B REG NO:	- CONTACT NO: 8222 6380					
NAME OF DRIVER:	ANY PASSENGERS:					
VEHICLE C REG NO:	ANY PASSENGERS:					
VEHICLE D REG NO:	ANY PASSENGERS:					
VEHICLE E REG NO:	ANY PASSENGERS:					
VEHICLE F REG NO:	ANY PASSENGERS:					
VEHICLE G REG NO:	witness contact:					
ANY WITNESS? IF YES, NAME:	YES / NO					
WAS THERE ANY VIDEO CAPTURE? WAS THERE ANY AUDIO RECORDED?	YES / NO					
ACCIDENT SCENE PHOTOS TAKEN?	YES / NO					
ACCIDENT SCENE PHOTOS TAKEN	Left Hand Side Portion.					
Have you been approach by unknown person soliciting	g (s) / offering accident claims assistance? YES / NO					
WORKSHOP PARTICULAR:	N-51 Automotive					
CONTACT NO:	68420051 / 67440510					
CONTACT PERSON:	henand					
FAX NO:	67410510					
FAX NO: WORKSHOP EMAIL:	sales@n51.com.sg					



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Lee Chee Wei, Andrew (Li ZhiWei)

Period of Insurance

: 29 Mar 2021 To 28 Mar 2022

Engine No.

: HRA2584468A

Chassis No.

: SJNFEAJ11U2217271

Vehicle No.

: SLX5497Z

Policy No.

: 1800032937-03

Endorsement No. Issued Date

: 26 Mar 2021

ABOUT THE COVER

Make/Model

: NISSAN Qashqai 1.2 DIG-Turbo

Engine Capacity/Tonnage : 1,197.00 CC

Sum Insured : Market Value

First Year of Registration : 2018

: NA Driver Restriction

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience

Age Condition

: 35 years old and above

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 taition, 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

Windscreen: \$100

Named Driver and Excess (where applicable)

Lee Chee Wei, Andrew (Li ZhiWei) - \$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 hotine at +65 6338 5200. 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).

0500610535

TAN CHONG CREDIT PTE LTD - LKY

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.

SSPCUE