

NATIONAL Assessment Centre Services.

Form 1 Jan 03

210221670003

Date In: 07/06/2001 18:09	Job description	Date & Time Completed	Done by
Ref No: N/A/INC 210063564	SAS e-filing		
Veh No: SMC 984/G	E-mail (8 jobs 2hrs, AIC 2hrs)		
D.O.A: 01/06/2001 17:00	1-Motor Claims Form		
OD: TP / Reporting Only	1-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SMC 984/G	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 ()	

() 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 > \$9000] ()		

Injury: _____

Date/Time:	Location:

Driver/Owner:	1) All: Accident Reporting (\$30)	
Contact No:	2) DA: Damage Assessment (\$100)	INC (\$10)
Damaged Portion:	3) TP: Towing Fee	\$40/\$43
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey	\$120
	5) PT: Follow-Through Survey (Resurvey)	\$30
	6) TR: Re-inspection	\$75
	7) NI: Idas DA + SMRT Survey	\$160
	8) NIUC Additional Services:	
	ON:	
	• NI: Courtesy Car / Tpt Allowance	\$3
	• NI: Repair Coordination	\$10
	• NI: Post Repair Inspection	\$23
	• NI: DV / Collect Excess Coordination	\$3
	• NI: TP (NI) / TP (Non INC) against INC	\$20
	9) NI: Idas Mobile	\$0
	Invoice dated	Fee Charged
	Invoice dated	Fee Charged

2/2

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	02/06/2021 18:09 (SGT)
Date of Accident	01/06/2021 17:00 (SGT)
Exact Location of Accident	22 Upper Serangoon Cres, Singapore
Additional Location Information	CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDR2828Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TEO YEW KHENG
NRIC No	SXXXX997J
Email Address	alexteo2828@yahoo.com.sg
Mobile Phone No	(Phone) +65-96664595
Alternative Phone No	+65-96664595

VEHICLE PARTICULARS

Manufacturer	Infiniti
Model	Q50
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	1991

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100473352-05
Cover Note Number	-

DRIVER

Name of Driver	TEO YEW KHENG
NRIC No	SXXXX997J

Date Of Birth	16/12/1958
Occupation	Indoor
Date Of Driving Pass	29/11/1985
Driving experience	35 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96664595
Alt. Phone Number	+65-96664595
Email Address	alexteo2828@yahoo.com.sg
Address	22 UPPER SERANGOON CRESCENT #04-52
Address complement	-
Postcode	534025
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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	SMC9441G
Vehicle Manufacturer	Hyundai
Vehicle Model	Accent
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SPENCER GOH
Contact Number	(Phone) +65-87425952
Address	-
Address complement	-

Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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

↑

14 level

22 upper Serangoon Crescent

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Parked/Stationary

(A) SDR 28287

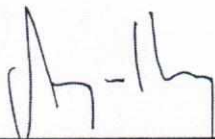
(B) SMC 94419

Describe Circumstances of the Accident

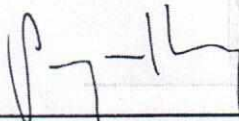
on 31/05/2021 @ about 1pm, I parked my vehicle in my house 1st level carpark and went home. On 01/06/2021, at about 5.30pm, The security came to my unit and told me that someone left a note to the guard house and the security show me the note. After which, I went down to take a look at my vehicle and I then found a hole on my vehicle windscreen there. I contacted the person whom hit my vehicle, the person told me that he did a reverse and hit onto my parked vehicle while trying to find a block number, on 02/06/2021, I send to my workshop to check on the damages and we would claim on the other party's insurance.

Declaration

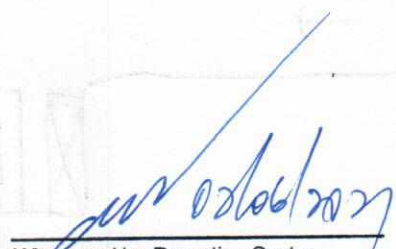
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel

Date of Accident : 01/06/2021 Accident Time: 5PM (24-HR-FORMAT)
Accident Place : inside 1st level carpark of 22 upper serangoon crescent
Vehicle Reg. No (Car plate No.) : SPK 2828Z
Vehicle Make/Model : Infiniti Q50 2.0T
Insurance Company : AIG Policy No. 2100473350-05
Owner or Company Names / IC NO: Teo Yew Kheng / 51302997J
Owner or Company Contact No. : 9666 4595 Owner's HP — Company Tel
DRIVER'S Name & IC no. : Teo Yew Kheng / 51302997J
DRIVER'S Date of Birth : 16/12/1958 DRIVER'S License Pass Date 29 Nov 1985
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner
DRIVER'S Address : 22 upper serangoon crescent #04-52 (S) SPK025
DRIVER'S Contact No / Alt No. : 1) 9666 4595 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc) Engineer
Email Address : Alex+eo2828@yahoo.com.sg
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Ins
Number of Passengers (including Driver): 0
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: SMC 9441G

Vehicle Make/Model: Hyundai Accent

Name DRIVER: Spencer Goh

IC No. DRIVER: _____

DRIVER'S Contact & add: 87425952

Vehicle Reg No: _____

Vehicle Make/Model: _____

Name DRIVER: _____

IC No. DRIVER: _____

DRIVER'S Contact & add: _____



CERTIFICATE OF INSURANCE

WEARNES AUTO PROTECTOR (INFINITI) PRIVATE VEHICLE

Name of Policyholder : TEO YEW KHENG
Period of Insurance : 28 Jun 2021 To 27 Jun 2022
Engine No. : 274AE038632A
Chassis No. : JN1BCAV37Z0480744

Vehicle No. : SDR2628Z
Policy No. : 2100473350-05
Endorsement No. : 000000000396203
Issued Date : 19 May 2021

ABOUT THE COVER

Make/Model : INFINITI Q50 2.0T

Engine Capacity/Tonnage : 1,991.00 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 \$5,000 as "Young and/or Inexperienced Driver Excess" ("YIDRE") 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 200000

* Limitations rendered inoperative by Section 6 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 - \$800

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

TEO YEW KHENG - \$800 (Own Damage), \$800 (Flood Cover)

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

1 Wearnes Automotive Pte Ltd, Add: 45 Leng Kee Road, Singapore 159103-63789333

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6230. 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: HONG LEONG FINANCE LTD

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).

0503801315

WEARNES AUTOMOTIVE - GMH (S)

45 LENG KEE ROAD

SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

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