NATIONAL Assessment Centre	Services well	Jan'osj ()	MO9217	60005						
Date In: 06 02 2000 12146	Jeb description		Date &Time	Completed	Done	p'n.				
Re[No: N/M/M/G2/007367/4	SAS e-filing									
Veh No: \$110,80820	E-mail (within Shrs, A	(IC 2hrs)		350						
D.O.A: 03 07 2021 22:35	i-Motor Claim Fo	rin								
X 11 11	i-Motor W/O (wit	hin: OD 2hrs,	TP 4hrs)							
OD : TR. / Reporting Only	i-Photo Uploaded									
5 0.	Assessment/Survey	Report								
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp									
Preferred Wksp / INC Assign Wksp / QW: (Tol:	Fax:).)				
TP Particulars: Veh No:	28020	INC()/Non-INC	().						
Owner / Driver: (Tel:)					
Policy No: (·) Perio	d: ()	Cover Type:).					
Confirmed by : (A STATE OF THE STA	ite:	Tim)					
	te-Est. Status (WO):		%; P: 21-79%	6. P: 80-100	26]					
		NO()								
Excess: (\$) Loading: \$1,000	()/\$2,000() ~107 (484~1	January 100 .	THE STATE OF THE S	- TOTAL -					
General Remarks					M . 1					
() Walk-In Customer; Customer's inform		ntial & Stric	ctly NO refer o	f repairer.						
() Total Loss Case : to e-mail Insurer				:	 					
Drive-In ()/ Towed-In (); Invoice:	YES()/NO() ; To	wing Co: (1	A Grant William	<u>, , , , , , , , , , , , , , , , , , , </u>				
Remarks: (INC hothus: 6788 5616)			Date&Time C	omple 3d	Done	by				
1) Apply for Transport Allowance ()/Cou	rtesy Car ()									
2) QC Check / Post Repair Inspection	()		<u> </u>							
3) Upload Resurvey Photo [Repair Cost > \$300	0] ()			<u>·. </u>						
Injury:										
Date/Lime Actions			7 - 7	10.000 SV	MODELL.					
200 P. C.	,					·				
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Liumant's Particulars	2) D	R : Accident R A : Damage A	ssessment (\$100)							
river/Owner:	4) F	F: Towing Fee F: Follow-Thr	ough Survey	\$40/\$4 \$12						
ontact No:	57 12	C. Follow-Thr	ough Survey (Res	ef 10 Jan 2005)						
	6) T	R: Re-inspecti	ion	37.	-					
amaged Portion:	7) N	1: Idao DA + : TUC Addition	SMRT Survey	. 316						
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C Checked by (Engr-In-Charge):	. •1	V6: Repair Co-	Car / Tpt Allowand cordination		0					
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nditors' Comments::2	T	P (N11) : TP (Non INC) against	INC S2	OI I	·				
		12: Idao Mobi	le	Fee Charged		antife Feder				
t. 2/3; :		ice dated		Fee Charged	Wallis.					

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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 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.

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 06/07/2021 12:46 (SGT) Date of Accident 03/07/2021 22:35 (SGT) **Exact Location of Accident** AYE, Singapore Additional Location Information TOWARDS TUAS AFTER CLEMENTI ROAD EXIT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Private car

Auto

1598

No - Claiming third party

Vehicle Registration Number SMW8033C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner KOH TECK YONG NRIC No SXXXX737F

Email Address ahchun1212@hotmail.com Mobile Phone No (Phone) +65-98235665 Alternative Phone No +65-93833203

VEHICLE PARTICULARS

Manufacturer Toyota Model Corolla Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission CC

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 2070173513 Cover Note Number

DRIVER

Name of Driver TAN WEI YU NRIC No TXXXX511Z

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured	05/04/2001 Outdoor 18/03/2020 1 YEAR AND 4 MONTHS Male (Phone) +65-93833203 - ahchun1212@hotmail.com BLK 690A WOODLANDS DRIVE 50 #09-279 - 731690 No VALET
Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	No -
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Raining Wet
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? PASSENGER 1	No 2 No - Yes 2
Name Gender	KOH TECK YONG Male
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Was there any audio recorded?	Yes Yes WITH OWNER No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour	GBJ6506S - - -

	Vehicle Category	Commercial vehicle
*	Name of Driver	Commercial vehicle
	Contact Number	-
	Address	-
	Address complement	-
	Postcode	<u> </u>
	Insurance Company Name	•
	Natura Of Damaga	•
	Details of property damaged in assident	**
	No. Of Passenger (Including Driver)	¥:
	No. Of Fassenger (including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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)

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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (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.

Witnessed by Reporting Driver's Signature (If driver is not the policyholder) / Date Policyholder's Signature / Date & Time AFTHE. Sketch Plan AYE TOWARDS TURS (LAMKUL)1 KORD 65065

1.60			41	Annidant
Doscriba	Circumstances	OT	tne	Accident

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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

CLAIMS & REVONUN COM SE.

Date of Accident	: 03/07 202 Accident Time: 22 135 (24-HR-FORMAT)						
Accident Place	: MYE towards Twas after Climenti Road Exit						
Vehicle Reg. No (Car plate No.)	: Smw 8033 C Vehicle Make/Model; Toyota AHIS						
Insurance Company	: AIG Policy No. 207-0173513						
Name of Registered Owner	: Company / Individual roy TECK YONG						
ID of Registered Owner	: Co Reg No: Owner's NRIC No: \$ 1720737						
	: Co Contact No: Owner's Contact No: 255 565						
DRIVER'S Name	: TAN WET YOU DRIVER'S NRIC NO: TOITOSINE						
DRIVER'S Date of Birth	: 06/04/ 2001 DRIVER'S License Pass Date 18 minery 2002						
Relationship bet. Owner & Driver	; Spouse \ Parents \Children\ Sibling \ Employee\ Others: \\\u00e4\epsilon\						
DRIVER'S Address	PFC-70 # 02 JUZIG 2014)000W A OPE 118 79A;						
DRIVER'S Contact No./ Alt No.	:1) 9383 3293 2)						
DRIVER'S Occupation	: INDOOR \OUDOOR (eg. working inside or outside of an ofc)						
Email Address	: AHCHUN 1212 @ HOTMATL. COM						
Weather & Road Surface	CLEAR & DRY \ RAINING & WET \AFTER RAIN & WET						
Reporting Type	Reporting Only \ Claim Other Party \ Claim Own Insurance						
Was the accident reported to the po Was there any video Captured by c Exact purpose for which vehicle was Any injuries, if yes(name of the	ar camera: YBS \ NO						
Vehicle Reg No: GBT 6506 S	Vehicle Reg No:						
Vehicle Make Model:	Vehicle Make\Model:						
Name DRIVER:							
IC No. DRIVER:							
DRIVER'S Contact & add:	DRIVER'S Contact & add:						
1) KOH TECK KINE	(M)						



CERTIFICATE OF INSURANCE

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: KOH TECK YONG

Period of Insurance

: 11 Dec 2020 To 10 Dec 2021

Engine No.

: 1ZR0G40877

Chassis No.

: MR2BE3BE600012179

Vehicle No.

: SMW8033C

Policy No.

: 2070173513

Endorsement No.

Issued Date

: 11 Dec 2020

ABOUT THE COVER

Make/Model

: TOYOTA COROLLA ALTIS 1.6

Engine Capacity/Tonnage: 1,598.00 CC

Sum Insured : Market Value

First Year of Registration : 2020

Driver Restriction

Insuring with COE/PARF : Yes

Off Peak Car : No

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 "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 text, 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 (Melaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$600 Thaft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

KOH TECK YONG - \$600 (Own Damage), \$600 (Flood Cover)

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

1.Toyota Bodycare Centre (For accident repair & accident reporting). Add; 2 Pandan Crescent Singapore 128462 Tel: 9631 1188 2.Toyota Bodycare Centre (For accident repair & accident reporting). Add: 17 Ubi Road 4 Singapore 408811 Tel: 5631 1638

For other Approved Reporting Centres/AlG Authorised Repairers, please contact our 24-hour accident emergency hodine at +65 6338 6200. Alternatively, you may refer to AlG website www.alg.sg or AlG SG Mobile App. Simply search and download "AlG SG" from IT unes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

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).

0504667213

INCHCAPE AUTO TOYOTA - BSTL027

AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature.

33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Dalloan Alleen Zabak