

# NATIONAL Assessment Centre Services

Date In: 16/08/21	Job description	Date & Time Completed	Done by
Ref No: NA/AIG21008557/13	SAs e-filing		
Veh No: SMP91236	E-mail (w/In: 8hrs, M/C 2hrs)		
D.O.A: 13/08/21 1440	i-Motor Claim Form		
OD: (TP) Reporting Only	i-Motor W/O (Within: O/E 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: SLS2008Z	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%; F: 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 repairer.

( ) 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

NA2103752	<b>Invoice Preparation Checklist</b>		Ant (\$) 1st Bill	Ant (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);			
	2) DA : Damage Assessment (\$100); INC (\$80)			
Driver/Owner:	3) TF : Towing Fee \$40/\$45			
Contact No:	4) FT : Follow-Through Survey \$120			
Damaged Portion:	5) FT : Follow-Through Survey (Resurvey) \$30			
QC Checked by (Engr-In-Charge):	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR : Re-inspection \$75			
Auditors' Comments :-	7) N1 : Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
Cat. 1:	OD:			
Cat. 2 / 3:	*N5: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
	TP (N11) : TP (N-11) against INC \$20			
	9) N12: Idac Mobile \$0			
	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	16/08/2021 14:48 (SGT)
Date of Accident	15/08/2021 14:40 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	TWDS SLE B4 ANG MO KIO AVE 1
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP9123G
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHNG KENG CHENG,ALEX(ZHUANG JINGCHENG)
NRIC No	SXXXX295Z
Email Address	alexchn117@gmail.com
Mobile Phone No	(Phone) +65-97934028
Alternative Phone No	+65-97934028

#### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Note
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	1198

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900232549
Cover Note Number	-

#### DRIVER

Name of Driver	CHNG KENG CHENG,ALEX(ZHUANG JINGCHENG)
NRIC No	SXXXX295Z

Date Of Birth	17/01/1985
Occupation	Indoor
Date Of Driving Pass	26/09/2005
Driving experience	15 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97934028
Alt. Phone Number	+65-97934028
Email Address	alexchn117@gmail.com
Address	BLK 106 JALAN DUSUN
Address complement	#04-25
Postcode	320106
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle 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	TAY YI LIN
Gender	Female

#### 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	SLS2008Z
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)	-

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMF8651H
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	CHNG KENG CHENG,ALEX(ZHUANG JINGCHENG)
Gender	Male
Phone No	(Phone) +65-97934028
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SMP9123G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

### INJURED 2

Name of injured person	TAY YI LIN
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SMP9123G
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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan

CTE TWDS SLE BY AMK AVE 1

VEH A: SM79123G  
VEH B: SLS2088Z  
VEH C: SMF8661H


### Describe Circumstances of the Accident


ON THE STATED DATE & TIME I WAS TRAVELLING ON  
THE 1ST LANE ON CTE TOWARDS SLE BEFORE AMK AVE 1 EY17  
AS THE TRAFFIC WAS SLOW THE VEH IN FRONT OF ME SLOWED DOWN  
& CAME TO A STOP, & I HAD FOLLOWED SUIT, SUDDENLY I FELT  
AN IMPACT FROM THE REAR OF MY VEH & REALIZED VEH BEARING  
PLATE SCS 2008Z HAD COLLIDED ONTO MY VEH & HENCE MY  
VEH WAS PUSH TO THE FRONT & COLLIDED INTO THE VEH IN FRONT  
OF ME.

### 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

 16/08/21  
Witnessed by Reporting Centre  
Personnel

Date of Accident : 15/8/21 Accident Time: 1440 (24-HR-Format)  
 Accident Place : CTE TOWARDS SLE BEFORE AVE MD KIO AVE 1  
 Vehicle No. (Car Plate No.) : SM091236 Make/Model: NISSAN NOTE  
 Insurance Company : AIG Policy No: 1900232549  
 Owner or Company Name /IC No. : CHNE KENG CHENG, ALEX / S85032952  
 Owner or Company Contact No. : 9793 4028 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
 DRIVER'S Name / IC No. : CHNE KENG CHENG, ALEX / S85032952  
 DRIVER'S Date Of Birth : 17/11/1985 DRIVER'S License Pass Date 26/9/2005  
 Relationship of Owner & Driver : Spouse\Parent\Children\Sibling\Employee\Others: OWNER  
 DRIVER'S Address : BLK 106 JALAN DUSUN #04-25 RS 320106  
 DRIVER'S Contact No./ Alt No. : 1) 9793 4028 2) \_\_\_\_\_  
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
 Email Address : ALEXCHNE117@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): 2  
 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): DRIVER, PASSENGER

**Other Party Driver's Particular (if any)**

Vehicle. No: <u>SLS 2008Z</u>	Vehicle. No: <u>SMF 8151 H</u>
Vehicle Make \Model: _____	Vehicle Make \Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

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

TAY YI LIN FEMALE



# CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Chng Keng Cheng, Alex (Zhuang Jingcheng)  
**Period of Insurance** : 22 Oct 2019 To 21 Oct 2021  
**Engine No.** : HR12046560K  
**Chassis No.** : JN1TAAE12Z0983302

**Vehicle No.** : SMP9123G  
**Policy No.** : 1900232549  
**Endorsement No.** :  
**Issued Date** : 30 Oct 2019

### ABOUT THE COVER

**Make/Model** : NISSAN NOTE 1.2 (SUPERCHARGED/NON-SUPERCHARGED)  
**Engine Capacity/Tonnage** : 1,198.00 CC **Sum Insured** : Market Value **First Year of Registration** : 2019  
**Driver Restriction** : NA **Off Peak Car** : Yes **Insuring with COE/PAF** : 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 "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\*** :

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

**Windscreen** : \$100

**Named Driver and Excess** (where applicable)

Chng Keng Cheng, Alex (Zhuang Jingcheng) - \$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.com.sg](http://www.aig.com.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: OCBC Bank Ltd

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).

0500610414

TAN CHONG CREDIT PTE LTD-TWY

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 589623 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Manile*

**AIG Asia Pacific Insurance Pte. Ltd.**  
 AUTHORISED REPRESENTATIVE

SSCNFY