

ASS. REC. BY:

REF:

AGZ/21009084/kv

Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD/TP/WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s

of

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_

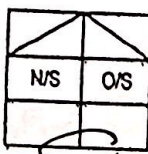
Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_

Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_

Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_

05 days

Res.: Yes or No

Lum Sum: \_\_\_\_\_

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_

Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: \_\_\_\_\_

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: \_\_\_\_\_

Honda Fit (A)

c.c

1339

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

209930

T/Radio:

Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: \_\_\_\_\_

GE6

1155189

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: NII / SRIm / STD A/RIm or

Tyre Size: F: \_\_\_\_\_

R: \_\_\_\_\_

205/45 R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Wind Force

Front

Rear

R/Bal. \_\_\_\_\_

7 mm

R/Bal. \_\_\_\_\_

3

mm

L/Bal. \_\_\_\_\_

7 mm

L/Bal. \_\_\_\_\_

3

mm

D.O.A. \_\_\_\_\_

26/8/21

D.O.I. \_\_\_\_\_

30/8/2021

Survey held at \_\_\_\_\_

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

1 / GIA &amp; EM not ready

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S - RS. SI

Fees

Others

TOTAL

Add Fee: \_\_\_\_\_

Site Insp (\$ \_\_\_\_\_)

Interview (\$ \_\_\_\_\_)

Tech Invs (\$ \_\_\_\_\_)

Weekend (\$ \_\_\_\_\_)

Report Format :

Lump Sum / I.B.I: (\$ \_\_\_\_\_)

## 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              | 28/08/2021 09:28 (SGT)                      |
| Date of Accident                | 26/08/2021 14:45 (SGT)                      |
| Exact Location of Accident      | Singapore                                   |
| Additional Location Information | TAMPINES AVE 9 SLIP ROAD TO TAMPINES AVE 10 |
| Country/State of Loss           | Singapore                                   |

### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SKB8188Z

#### INSURED/POLICYHOLDER

Is company?

No

Name Of Registered Owner

HONG JIAFENG AARON

NRIC No

SXXXX004B

Email Address

aaronhong1983@gmail.com

Mobile Phone No

(Phone) +65-96288965

Alternative Phone No

+65-96288965

#### VEHICLE PARTICULARS

Manufacturer

Honda

Model

FIT 1.3G

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?

No - Claiming third party

Vehicle Category

Private car

Transmission

Auto

CC

1339

#### INSURANCE COMPANY

Name of Insurance Company

NTUC Income Insurance Co-operative Ltd

Type of Coverage

Comprehensive

Fleet Policy

No

Policy Number

5110477412-02

Cover Note Number

-

#### DRIVER

Name of Driver

HONG JIAFENG AARON

NRIC No

SXXXX004B

 Accident report SF0F218R0002

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## SKETCH PLAN

### IMPORTANT NOTICE

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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")

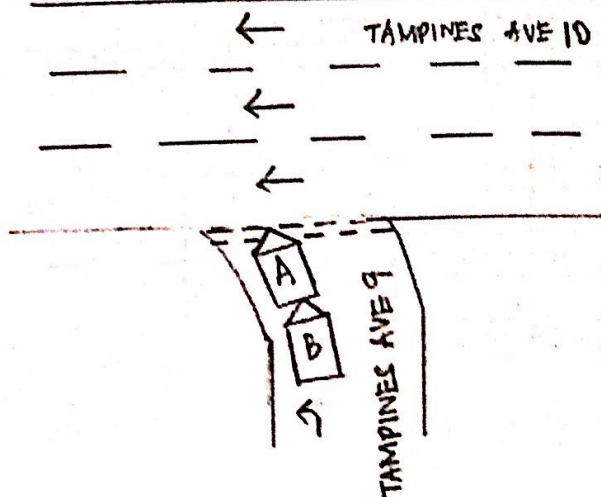
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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  
27.8.21  
Sketch Plan

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

Witnessed by Reporting Centre Personnel



|  |                               |
|--|-------------------------------|
| Date Of Birth  | 09/06/1983                    |
| Occupation   | Indoor                        |
| Date Of Driving Pass   | 27/10/2003                    |
| Driving experience   | 17 YEARS AND 10 MONTHS        |
| Gender   | Male                          |
| Mobile Number  | (Phone) +65-96288965          |
| Alt. Phone Number  | +65-96288965                  |
| Email Address  | aaronhong1983@gmail.com       |
| Address  | BLK 109 LENGKONG TIGA #08-277 |
| Address complement   | -                             |
| Postcode   | 410109                        |
| 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?  | No  |
| Was any injured conveyed to hospital by ambulance?  | -   |
| Was any other vehicle or property damaged?  | Yes |
| Number of Passengers (Including Driver)   | 1   |
| 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

REFER TO SKETCH PLAN.

NOTE: VEHICLE REPAIR AT OWNER W/SHOP - THIAM HENG HUAT

#### 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 | SMM4461D            |
| Vehicle Manufacturer        | -                   |
| Vehicle Model               | -                   |
| Vehicle Variant             | -                   |
| Vehicle Colour              | -                   |
| Vehicle Category            | Private car         |
| Name of Driver              | THAM PHUI HENG ERIC |
| -                           | SXXXX976E           |