

NATIONAL Assessment Centre Services, (url: https://www.nationalassessmentcentre.com), **SM0821940001**

Date In:	Job description	Date & Time Completed	Done by
23/09/2021 11:42	SAS e-illing		
Ref No: NPA/A1421009961	1-Motor Claim Form		
Veh No: SMU TACA	1-Motor W/O (w/inter: 00 sheet, TP 4hrs)		
D.O.A: 06/09/2021 18:00	1-Photo Uploaded		
(1) TP Reporting Only	Assessment/Survey Report		
TP Insurer:	Assessment Report by Fax/Hand to Owner/Visit		

Preferred Wreck / INC Ass'n Wreck / OW: ()
 TP Brand/Type: () Vch No: **FBR 109C** INC () / Non-INC ()
 Owner / Driver: ()
 Policy No: () Period: () Cover Type: ()
 Confirmed by: () Date: ()
 Insured/Driver Liability: () % [Note- Est Status (WO): NI: 0-20%, PI: 21-79%, P: 80-100%]
 Year of Registration: () Warranty: YES () / NO ()
 Process: () Loading: \$1,000 () / \$2,000 ()

() Will-In Contract / Customer's Information strictly Confidential & strictly NO Refor of repair
 () Total Loss Case / to e-mail Insurer URGENTLY
 Drive-In () / Towed-In () / Invoice: VRS () / NO () / Towing Co: ()
 1) Apply for Transport Allowance () / Courtesy Car ()
 2) QC Check / Post Repair Inspection ()
 3) Upload Resurvey Photo (Repair Cost > \$9,000) ()

Injury: ()

Injury	Amount

XIA2103970

Item	Amount
1) All Accident Report (50)	
2) DA Survey Assessment (\$100)	\$100.00
3) PPI Follow Up	\$130
4) PPI Follow Through Survey	\$30
5) PPI Follow Through Survey (Resurvey)	\$30
6) PPI Follow Through Survey (w/TP) (w/TP)	\$75
7) PPI Follow Through Survey (w/TP) (w/TP)	\$160
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50) PPI Follow Through Survey	

Driver/Owner: ()
 Contract No: ()
 Damaged Portion: ()
 QC Checked by (Engi-In-Charge): ()
 Date: ()
 Invoice dated: ()
 Invoice dated: ()

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 23/09/2021 11:42 (SGT)
Date of Accident 06/09/2021 18:00 (SGT)
Exact Location of Accident 10 Tampines Central 1, Singapore 529536
Additional Location Information BASEMENT 2 CARPARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMU7441A

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner SIM HUI KIAN
NRIC No SXXXX324Z
Email Address jeslyn.huantrading@gmail.com
Mobile Phone No (Phone) +65-92774349
Alternative Phone No +65-92774349

VEHICLE PARTICULARS

Manufacturer Subaru
Model Forester
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 1995

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2070125239-01
Cover Note Number -

DRIVER

Name of Driver SIM HUI KIAN
NRIC No SXXXX324Z

Date Of Birth	23/04/1969
Occupation	Outdoor
Date Of Driving Pass	24/02/1993
Driving experience	28 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-92774349
Alt. Phone Number	+65-92774349
Email Address	jeslyn.huantrading@gmail.com
Address	BLK 613A TAMPINES NORTH DRIVE 1 #13-202
Address complement	-
Postcode	521613
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	Side Swipe
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

PLEASE REFER TO SKETCH PLAN (TYPE OF COLLISION IS HEAD TO SIDE)

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	FBR109C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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) -

SKETCH PLAN

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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

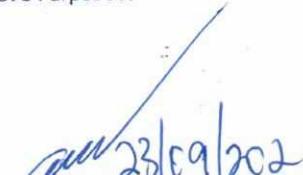
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

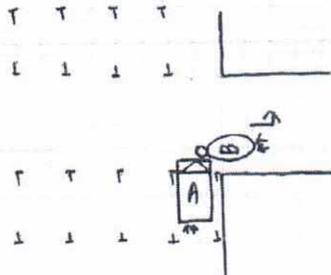


Driver's Signature (If driver is not the policyholder) / Date & Time


23/09/2021
Witnessed by Reporting Centre Personnel

Sketch Plan

Tampines 1 Basement 2 Carpark



Vehicle A: SMU7441A
Vehicle B: FBR109C

Describe Circumstances of the Accident

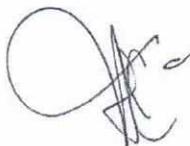
On the stated date & time, I, vehicle A (SMU7441A) was going out from the carpark lot and the carpark was one way. As I was slowly moving out, suddenly vehicle B (PBR109C) coming from the opposite direction and collided onto the front right portion of my vehicle causing damages.

Declaration

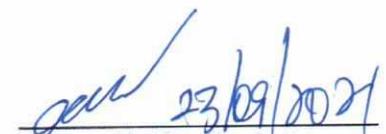
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel

Date of Accident: 06/9/2021 Accident Time: 1800hrs (24-HR-FORMAT)
 Accident Place: Tampines 1 Basement 2 Carpark
 Vehicle Reg. No (Car plate No.): SMU 7441A Vehicle Make/Model: Subaru Forester
 Insurance Company: AIG Policy No: 267015239-01
 Name of Registered Owner: Company / Individual Sim Hui Kian
 ID of Registered Owner: Co Reg No: - Owner's NRIC No: S6913324Z
 Co Contact No: - Owner's Contact No: 9277 4349

DRIVER'S Name: Sim Hui Kian DRIVER'S NRIC No: S6913324Z

DRIVER'S Date of Birth: 23 April 1969 DRIVER'S License Pass Date: 24 Feb 1993

Relationship bet. Owner & Driver: Spouse / Parents / Children / Sibling / Employee / Others: owner

DRIVER'S Address: APT BIK 613A Tampines North Drive 1 #13-202 S (501613)

DRIVER'S Contact No. / Alt No.: 1) 9277 4349 2) -

DRIVER'S Occupation: INDOOR / OUTDOOR (eg. working inside or outside of an org)

Email Address: jeslyn.huantrading@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): 01 Passenger Name: - Gender: M/F

Was the accident reported to the police? YES / NO Passenger Name: - Gender: M/F

Was there any video Captured by car camera: YES / NO Any Injuries: YES / NO Injured Name: -

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: <u>FBR109C</u>	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
ID No. DRIVER: _____	ID No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

Other Party Driver's Particulars (if any)

Vehicle Reg No: _____	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
ID No. DRIVER: _____	ID No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____



CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Sim Hui Kian
 Period of Insurance : 27 Aug 2021 To 26 Aug 2022
 Engine No. : FB20YG86828
 Chassis No. : JF1SK7KL5KG014697

Vehicle No. : SMU7441A
 Policy No. : 2070125239-01
 Endorsement No. :
 Issued Date : 10 Aug 2021

ABOUT THE COVER

Make/Model : SUBARU Forester 2.0i-S Eyesight
 Engine Capacity/Tonnage : 1,995.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2020
 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 "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 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 - \$800 Theft - \$0 Flood Cover - \$800

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Sim Hui Kian - \$800 (Own Damage), \$800 (Flood Cover)

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

1. Motor Image Enterprises Pte Ltd Add: 19 Lorong 8 Toa Payoh Singapore 319255 64170100

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.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

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).

0500619207
 TAN CHONG CREDIT SUBARU-ANT

911 BUKIT TIMAH ROAD
 SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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

SSPTLA