

NATIONAL ASSOCIATION OF CERTIFIED SERVICE PROVIDERS, INC. **0082130005**

Date In: **12/14/2021** 16:01
 Ref No: **12/14/2021 16317**
 Date Out: **12/14/2021** 14:50

(31) **TPV** Reporting Only

TP Insurer

Preferred Wksp / HMO / Aetna / Wisc / QW /

TP Insured / Driver /

Owner / Driver /

Policy No /

Period /

Cover Type /

Continued by /

Date /

Time /

Insured / Driver / License / % (Now - Est Status (WO) / N/A - 2021 / P: 21-79% / P: 80-100%)

Year of Registration /

License / \$ / Loss / \$1,000 / \$2,000 /

() Walk-In Customer / Customer's Information is/very confidential & should NO refer of reputation

() Total Loss Case / to e-mail Insurer URGENTLY

Drive-In / Towed-In / Involves VRS / / NO / Towing Cost /

1) Apply for Transport Allowance / Courtesy Car /

2) QC Check / Post Repair Inspection /

3) Upload Repair Photo (Repair Cost > \$5000) /

Injury /

NAD104445

Driver / Owner /

Continued No /

Continued Portion /

QC Checked by (Engineer - Check only)

	Available
1) All Accident Information (Q0)	
2) All Damage Information (Q100)	
3) All Repair Information (Q100)	
4) All Follow-Up Information (Q100)	
5) All Follow-Up Repair Information (Q100)	
6) All Follow-Up Repair Information (Q100)	
7) All Follow-Up Repair Information (Q100)	
8) All Follow-Up Repair Information (Q100)	
9) All Follow-Up Repair Information (Q100)	
10) All Follow-Up Repair Information (Q100)	
11) All Follow-Up Repair Information (Q100)	
12) All Follow-Up Repair Information (Q100)	
13) All Follow-Up Repair Information (Q100)	
14) All Follow-Up Repair Information (Q100)	
15) All Follow-Up Repair Information (Q100)	
16) All Follow-Up Repair Information (Q100)	
17) All Follow-Up Repair Information (Q100)	
18) All Follow-Up Repair Information (Q100)	
19) All Follow-Up Repair Information (Q100)	
20) All Follow-Up Repair Information (Q100)	
21) All Follow-Up Repair Information (Q100)	
22) All Follow-Up Repair Information (Q100)	
23) All Follow-Up Repair Information (Q100)	
24) All Follow-Up Repair Information (Q100)	
25) All Follow-Up Repair Information (Q100)	
26) All Follow-Up Repair Information (Q100)	
27) All Follow-Up Repair Information (Q100)	
28) All Follow-Up Repair Information (Q100)	
29) All Follow-Up Repair Information (Q100)	
30) All Follow-Up Repair Information (Q100)	
31) All Follow-Up Repair Information (Q100)	
32) All Follow-Up Repair Information (Q100)	
33) All Follow-Up Repair Information (Q100)	
34) All Follow-Up Repair Information (Q100)	
35) All Follow-Up Repair Information (Q100)	
36) All Follow-Up Repair Information (Q100)	
37) All Follow-Up Repair Information (Q100)	
38) All Follow-Up Repair Information (Q100)	
39) All Follow-Up Repair Information (Q100)	
40) All Follow-Up Repair Information (Q100)	
41) All Follow-Up Repair Information (Q100)	
42) All Follow-Up Repair Information (Q100)	
43) All Follow-Up Repair Information (Q100)	
44) All Follow-Up Repair Information (Q100)	
45) All Follow-Up Repair Information (Q100)	
46) All Follow-Up Repair Information (Q100)	
47) All Follow-Up Repair Information (Q100)	
48) All Follow-Up Repair Information (Q100)	
49) All Follow-Up Repair Information (Q100)	
50) All Follow-Up Repair Information (Q100)	
51) All Follow-Up Repair Information (Q100)	
52) All Follow-Up Repair Information (Q100)	
53) All Follow-Up Repair Information (Q100)	
54) All Follow-Up Repair Information (Q100)	
55) All Follow-Up Repair Information (Q100)	
56) All Follow-Up Repair Information (Q100)	
57) All Follow-Up Repair Information (Q100)	
58) All Follow-Up Repair Information (Q100)	
59) All Follow-Up Repair Information (Q100)	
60) All Follow-Up Repair Information (Q100)	
61) All Follow-Up Repair Information (Q100)	
62) All Follow-Up Repair Information (Q100)	
63) All Follow-Up Repair Information (Q100)	
64) All Follow-Up Repair Information (Q100)	
65) All Follow-Up Repair Information (Q100)	
66) All Follow-Up Repair Information (Q100)	
67) All Follow-Up Repair Information (Q100)	
68) All Follow-Up Repair Information (Q100)	
69) All Follow-Up Repair Information (Q100)	
70) All Follow-Up Repair Information (Q100)	
71) All Follow-Up Repair Information (Q100)	
72) All Follow-Up Repair Information (Q100)	
73) All Follow-Up Repair Information (Q100)	
74) All Follow-Up Repair Information (Q100)	
75) All Follow-Up Repair Information (Q100)	
76) All Follow-Up Repair Information (Q100)	
77) All Follow-Up Repair Information (Q100)	
78) All Follow-Up Repair Information (Q100)	
79) All Follow-Up Repair Information (Q100)	
80) All Follow-Up Repair Information (Q100)	
81) All Follow-Up Repair Information (Q100)	
82) All Follow-Up Repair Information (Q100)	
83) All Follow-Up Repair Information (Q100)	
84) All Follow-Up Repair Information (Q100)	
85) All Follow-Up Repair Information (Q100)	
86) All Follow-Up Repair Information (Q100)	
87) All Follow-Up Repair Information (Q100)	
88) All Follow-Up Repair Information (Q100)	
89) All Follow-Up Repair Information (Q100)	
90) All Follow-Up Repair Information (Q100)	
91) All Follow-Up Repair Information (Q100)	
92) All Follow-Up Repair Information (Q100)	
93) All Follow-Up Repair Information (Q100)	
94) All Follow-Up Repair Information (Q100)	
95) All Follow-Up Repair Information (Q100)	
96) All Follow-Up Repair Information (Q100)	
97) All Follow-Up Repair Information (Q100)	
98) All Follow-Up Repair Information (Q100)	
99) All Follow-Up Repair Information (Q100)	
100) All Follow-Up Repair Information (Q100)	

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	15/11/2021 16:01 (SGT)
Date of Accident	13/11/2021 14:50 (SGT)
Exact Location of Accident	Sixth Ave, Singapore
Additional Location Information	BEFORE LAUREL WOOD AVENUE T-JUNCTION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ5883G
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIEW YEW MENG, MARTIN (LIU YAOMING, MARTIN)
NRIC No	SXXXX736F
Email Address	martin.liew@gmail.com
Mobile Phone No	(Phone) +65-92996405
Alternative Phone No	+65-92996405

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E250
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	1800051164-03
Cover Note Number	-

DRIVER

Name of Driver	LIEW YEW MENG, MARTIN (LIU YAOMING, MARTIN)
NRIC No	SXXXX736F

Date Of Birth	27/10/1980
Occupation	Indoor
Date Of Driving Pass	10/09/2011
Driving experience	10 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92996405
Alt. Phone Number	+65-92996405
Email Address	martin.liew@gmail.com
Address	23 WEST COAST CRESCENT #07-10
Address complement	-
Postcode	128046
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)	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

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	SDZ1689Y
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	SKW7644U
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	LIEW YEW MENG, MARTIN (LIU YAOMING, MARTIN)
Gender	Male
Phone No	(Phone) +65-92996405
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLZ5883G
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' 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 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' 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.

[Signature]

Policyholder's Signature / Date & Time

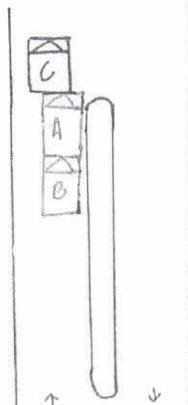
[Signature]

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

[Signature] 15/11/2021
Witnessed by Reporting Centre Personnel

Sketch Plan

Sixth Ave before Laurel
Wood Ave T-Junction



Vehicle A: SL258836
Vehicle B: SD216897
Vehicle C: SKW7644U

Describe Circumstances of the Accident

On the stated date & time, I, vehicle A (SLZ5883G) was travelling at the stated location. As the front vehicle slowed down and came to a stop, I followed suit. Out of sudden, I felt a huge impact from the rear portion of my vehicle. vehicle B (SDZ16B9Y) collided onto the rear portion of my vehicle causing me to surge forwards and collided onto vehicle C (SKW 7644U).

Declaration

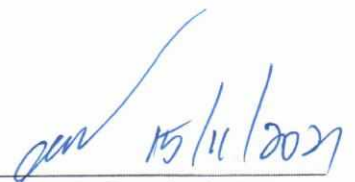
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



15/11/2021

Witnessed by Reporting Centre Personnel

JwG

Date of Accident : 13/11/2021 Accident Time: 1450hrs (24-HR-FORMAT)
 Accident Place : Sixth Ave before Laurel Wood Ave T-Junction
 Vehicle Reg. No (Car plate No.) : SLZ 5883G Vehicle Make/Model: M/B E250
 Insurance Company : AIG Policy No. 1800B1164-03
 Name of Registered Owner : Company / Individual Liew Yew meng, martin
 ID of Registered Owner : Co Reg No: — Owner's NRIC No: S8032736F
 : Co Contact No: — Owner's Contact No: 9299 6405

DRIVER'S Name : Liew Yew meng, Martin DRIVER'S NRIC No: S8032736F
 DRIVER'S Date of Birth : 27 Oct 1980 DRIVER'S License Pass Date 10 Sep 2011
 Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Other: owner
 DRIVER'S Address : 23 West Coast Crescent #07-10 Singapore 128046
 DRIVER'S Contact No / Alt No. : 1) 9299 6405 2) —
 DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an office)
 Email Address : martin.liew@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: Liew Yew meng, martin
 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>SDZ 1689Y</u>	Vehicle Reg No: <u>SKW 7644U</u>
Vehicle Make/Model: <u>—</u>	Vehicle Make/Model: <u>—</u>
Name DRIVER: <u>—</u>	Name DRIVER: <u>—</u>
IC No. DRIVER: <u>—</u>	IC No. DRIVER: <u>—</u>
DRIVER'S Contact & add: <u>—</u>	DRIVER'S Contact & add: <u>—</u>

Other Party Driver's Particulars (if any)

Vehicle Reg No: <u>—</u>	Vehicle Reg No: <u>—</u>
Vehicle Make/Model: <u>—</u>	Vehicle Make/Model: <u>—</u>
Name DRIVER: <u>—</u>	Name DRIVER: <u>—</u>
IC No. DRIVER: <u>—</u>	IC No. DRIVER: <u>—</u>
DRIVER'S Contact & add: <u>—</u>	DRIVER'S Contact & add: <u>—</u>



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : LIEW YEW MENG, MARTIN (LIU YAOMING, MARTIN)
Period of Insurance : 10 May 2021 To 09 May 2022
Engine No. : 27492031431315
Chassis No. : WDD2130452A429578

Vehicle No. : SLZ5883G
Policy No. : 1800051164-03
Endorsement No. :
Issued Date : 30 Mar 2021

ABOUT THE COVER

Make/Model : MERCEDES Benz E250 Sedan Avantgarde
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 : 2018
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 \$3,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 35 years old and above

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 2000cc

* 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)

LIEW YEW MENG, MARTIN (LIU YAOMING, MARTIN) - \$800 (Own Damage), \$800 (Flood Cover)

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

1. Cycle & Carriage Eunice Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818
2. Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

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: DBS 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).

0504612268

CYCLE & CARRIAGE - ANGIEN

239 ALEXANDRA ROAD
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.