

# NATIONAL Assessment Centre Services

Date In: 07/02/22	Job description	Date & Time Completed	Done by
Ref No: NA/ALG22001098/13	SAs e-filing		
Veh No: GBT82976	E-mail (within Mins. Ab. 2hrs)		
D.O.A: 10/22/2021 1000	i-Motor Claim Form		
OD TP: Reporting Only	i-Motor W/O (Within OD 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: SKE1779Z	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

NA2200208

## Invoice Preparation Checklist

Am't (\$)  
1st Bill

Am't (\$)  
Add Bill

### Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

### Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

- |   |      |
|---|------|
| 1) AR: Accident Reporting (\$30);               |      |
| 2) DA: Damage Assessment (\$100); INC (\$80)    |      |
| 3) TF: Towing Fee \$40/\$45                     |      |
| 4) FT: Follow-Through Survey \$120              |      |
| 5) FT: Follow-Through Survey (Resurvey) \$30    |      |
| For claiming against INC Only (wef 10 Jan 2005) |      |
| 6) TR: Re-inspection \$75                       |      |
| 7) N1: Idac DA + SMRT Survey \$160              |      |
| 8) NTUC Additional Services:-                   |      |
| OD:   |      |
| *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 (Non INC) against INC              | \$20 |
| 9) N12: Idac Mobile                             | \$0  |

Invoice dated \_\_\_\_\_ Fee Charged \_\_\_\_\_

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 GlA Records Management Centre established by the General Insurance Association of Singapore (GlA) 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	07/02/2022 09:33 (SGT)
Date of Accident	10/11/2021 10:00 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	EXIT TO PAYA LEBAR
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ8297G
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ZHUANG ENGINEERING PTE LTD
Company Reg No	2XXXXX103W
Email Address	qiyuan4321@gmail.com
Mobile Phone No	(Phone) +65-90903039
Alternative Phone No	+65-90903039

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2982

#### INSURANCE COMPANY

Name of Insurance Company	AIIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2070125606-01
Cover Note Number	-

#### DRIVER

Name of Driver	ZHUANG KAI
NRIC No	SXXXX250D



Date Of Birth	21/03/1961
Occupation	Outdoor
Date Of Driving Pass	01/01/1998
Driving experience	23 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90903039
Alt. Phone Number	-
Email Address	qiyuan4321@gmail.com
Address	BLK 13 PASIR RIS RISE
Address complement	#10-26
Postcode	518086
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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

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	SKE1779Z
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)	-

## 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 willful 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.

ZHUANG ENGINEERING PTE. LTD.

(UEN: 201907103W)

1085 EUNOS AVENUE 7A

#01-22 EUNOS INDUSTRIAL ESTATE

SINGAPORE 409535

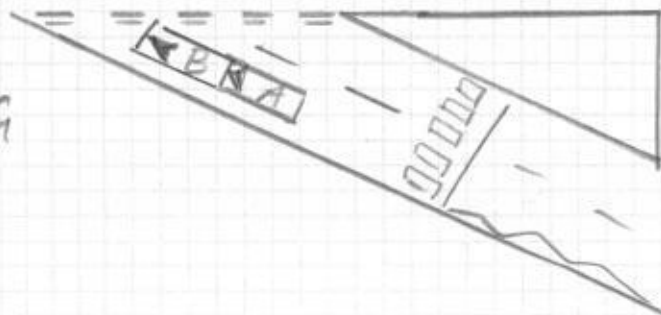
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

#### Sketch Plan

SUP RD  
PIE EXIT TO PAYA LEBAR



A - GBJ82979

B - SKE17792

**Describe Circumstances of the Accident**

I was travelling from PIE exit slip road to Paya  
Lebar Rd. Infront of my sudden stop and, have  
not enough time to react and my veh hit onto  
the rear portion of veh B.

**Declaration**

We declare the foregoing particulars are true in every respect.

ZHUANG ENGINEERING PTE. LTD  
(UEN: 201907103W)  
1085 EUNOS AVENUE 7A  
#01-22 EUNOS INDUSTRIAL ESTATE  
SINGAPORE 409525

Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel

shym 07/02/22



# ACCIDENT STATEMENT

ACCIDENT DATE: 10/11/2001 (DD/MM/YYYY), TIME: 10:00 (HH:MM)

LOCATION: PIE EXIT TO PAYA LEBAR

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBJ82976  
 b) INSURANCE COMPANY: AIG  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: Auto/Manual  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: \_\_\_\_\_  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: ZHUANG ENGINEERING PTE LTD (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: ZHUANG KAL (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S2717250D CONTACT: 90903039  
 c) ADDRESS: BLK 13 PAIR AIS RISE  
#10-26 (518086)

\* d) DATE OF BIRTH: 21/03/1961 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR) OUTDOOR

f) YEARS OF DRIVING EXPERIENCE: 01/10/1998

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) \_\_\_\_\_

b) ROAD SURFACE: (DRY / WET / OTHERS) \_\_\_\_\_

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKE1779Z MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

Email =

fax =

VIDEO =



# CERTIFICATE OF INSURANCE

## COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : ZHUANG ENGINEERING PTE LTD  
Period of Insurance : 09 Sep 2021 To 08 Sep 2022  
Engine No. : 1KD2866492  
Chassis No. : JTFHT02P100249449

Vehicle No. : GBJ8297G  
Policy No. : 2070125606-01  
Endorsement No. :  
Issued Date : 16 Aug 2021

### ABOUT THE COVER

Make/Model : TOYOTA HIACE 1.1 ton [Van]  
Engine Capacity/Tonnage : 1.1 Tonnage  
Driver Restriction : NA  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2019  
Insuring with COE/PARE : Yes

#### Person or Classes of Persons Entitled to Drive\*

a) Any person who is driving on the Policyholder's order or with their permission.  
b) 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\*

1) Use in connection with the Policyholder's business.  
2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.  
3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing; b) use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle; and c) use for any purpose in connection with Motor Trade.

Loss Of Use (7 Days) Commercial Auto

\* 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 - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.  
For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6336 6200. Alternatively, You may refer to AIG website [www.aig.sg](http://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: Daimler Financial Services Africa & Asia Pacific 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)

Insure Link Pte Ltd  
2 Kallang Avenue #08-16  
CT Hub S(339407)  
Off : 6444 4644  
Fax: 6444 0040

0501295000

INSURE LINK PTE LTD

2 KALLANG AVE #08-16 CT HUB

SINGAPORE 339407

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

CHEN JIAN LIN





AIG Asia Pacific Insurance  
Pte. Ltd.  
AIG Building, 78 Shenton Way  
#09-16  
Singapore 079120  
T: (65) 6419 3000  
www.aig.sg

Your Ref :GBJ8297G  
Our Ref : 0066836376SG-003

Date : 11 January 2022

ZHUANG ENGINEERING PTE LTD  
1085 EUNOS AVENUE 7A  
EUNOS INDUSTRIAL ESTATE #01-22  
SINGAPORE 409535

FINAL REMINDER  
Dear Sir/Madam,

WITHOUT PREJUDICE

**ACCIDENT INVOLVING GBJ8297G AND SKE1779Z ON 10 November 2021 AT PIE  
EXIT TO PAYA LEBAR Singapore**

We refer to the above matter.

We would like to inform you that we have received a claim from third party involved in the above auto accident.

Our record shows that you have not reported the accident to us. We would appreciate it if you could urgently file a report at our approved reporting centre.

You should also IMMEDIATELY forward us by hand any letters or Courts Summons received from the other party involved in the accident. You should not negotiate, admit liability or offer payment to them.

We would like to bring to your attention that under Policy Condition 5A, we shall have full discretion in the process and settlement of the said third party claim.

Your NCD (No Claim Discount) will be reduced by 30%(20% for motorcycle/commercial vehicles) if a claim is made under your policy.

To enable us to look into the matter immediately, please let us hear from you within seven (7) days from date of this letter. In accordance with the policy conditions, we reserve the right to repudiate the said claim to you should you not give proper notice to us of any occurrence which may give rise to it.

Kindly contact our Call Centre at (65) 6419-3000 if you have any further enquiries.

Yours faithfully,

**Claims Department**

AIG Asia Pacific Insurance Pte. Ltd.

*This is computer generated document, no signature is required.*