

NATIONAL Assessment Centre Services

Date In: 24/02/22	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA/11422001785/13	E-mail (within 3hrs/4hrs/2hrs):		
Veh No: SJ41013G	i-Motor Claim Form		
D.O.A: 23/02/22 1250	i-Motor W/O (Within: OD 2hrs; TP 4hrs)		
OD: (TP) Reporting Only	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: SJN4016L	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

NA2200514

Invoice Preparation Checklist

Amt (\$) 1st Bill Amt (\$) Add Bill

Claimant's Particulars :-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
Cat 1:	6) TR: Re-inspection \$75		
Cat 2/3:	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 30		
	Invoice date:	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 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	24/02/2022 14:03 (SGT)
Date of Accident	23/02/2022 12:50 (SGT)
Exact Location of Accident	Lentor Ave, Singapore
Additional Location Information	TOWARDS YISHUN AVE 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY1013G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE CHERNG WO
NRIC No	SXXXX751A
Email Address	ireneliow6111@gmail.com
Mobile Phone No	(Phone) +65-97325319
Alternative Phone No	+65-97325319

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Teana
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	2000

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100487923-05
Cover Note Number	-

DRIVER

Name of Driver	LEE CHERNG WO
NRIC No	SXXXX751A

Date Of Birth	08/12/1943
Occupation	Indoor
Date Of Driving Pass	01/01/1963
Driving experience	59 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97325319
Alt. Phone Number	+65-97325319
Email Address	irenelliow6111@gmail.com
Address	95 JALAN SENDUDOK
Address complement	#02-30
Postcode	769473
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

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	SJN4016L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KHOR TUCK KUAN
Contact Number	(Phone) +65-98232963
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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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.

Zee Sheng *Zee Sheng*

Policyholder's Signature / Date & Time

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

24/02/22
Witnessed by Reporting Centre Personnel

Sketch Plan



A - SJY 1013G

B - SJN 4016L

Describe Circumstances of the Accident

On the date 23/02/2022, I driving my car SJY 1013G Nissan Teana along Lenton Ave toward Yishun Ave 1, when I come to stop at the giveaway lane to waiting on coming vehicle clear. Suddenly I felt a strong impact from my back, I then come out to check and realised vehicle 'B' SON 4016 L hit my car from behind.

Declaration

We declare the foregoing particulars are true in every respect.

Teckeng LO

Policyholder's Signature / Date & Time

Teckeng LO

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

Shyue 24/02/22

Witnessed by Reporting Centre Personnel

VEHICLE NO: SJY10139	MAKE & MODEL: NISSAN TEANA 2.0 (AUTO) / MANUAL	
DATE OF ACCIDENT:	23/02/2022	CC: 2.0
TIME OF ACCIDENT:	1250	HRS
LOCATION OF ACCIDENT:	Lentor Ave toward Yishun Ave 1	
EXACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT (PRIVATE USE) / PRIVATE HIRE	
NAME OF OWNER:	LEE CHENG WO	
TEL NO:	H/P: 97325319	OFFICE: HOME:
NRIC:	S0611751A	
ADDRESS:	95, Jalan Senduduk #02-30 S' 769473	
EMAIL:	ireneliow6111@gmail.com	
CLAIM TYPE:	OD (THIRD PARTY) / REPORTING ONLY	
FLEET POLICY:	YES (NO)	
INSURANCE COMPANY:	AIG Asia Pacific Ins Pte Ltd	
TYPE OF COVERAGE:	(Comprehensive) / Third Party / Third Party Fire & Theft	
POLICY NO:	2100487923-05	
NAME OF DRIVER:	(AS ABOVE) / IF NO:	
NRIC:	S0611751A	ANY PASSENGER: 0
DATE OF BIRTH:	08/12/1943	LICENCE PASSED DATE: 01/01/1963
OCCUPATION:	OUTDOOR (INDOOR)	
GENDER:	(MALE) / FEMALE	
CONTACT NO:	H/P: 97325319	OFFICE: HOME:
ADDRESS:	95, Jalan Senduduk #02-30 S' 769473	
EMAIL:	IreneLiow6111@gmail.com	
DOES DRIVER OWNED ANY VEHICLE:	(NO) IF YES, REG NO:	NIL INSURER: NIL
RELATIONSHIP:	NIL	
WEATHER CONDITION:	(CLEAR) / RAINING / OTHERS:	
ROAD SURFACE:	(DRY) / WET / OTHER:	
ANY INJURIES:	(NO) IF YES, WHO?	
NAME & CONTACT:	NIL	
NAME & CONTACT:	NIL	
POLICE REPORT:	NO / IF YES, WHERE? NIL	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO / IF YES, WHO? NIL	
VEHICLE B REG NO:	8JN 4016 L	ANY PASSENGERS: 0
NAME OF DRIVER:	Khor Tuck Kuan	CONTACT NO: 9823 2963
VEHICLE C REG NO:		ANY PASSENGERS:
VEHICLE D REG NO:		ANY PASSENGERS:
VEHICLE E REG NO:		ANY PASSENGERS:
VEHICLE F REG NO:		ANY PASSENGERS:
VEHICLE G REG NO:		ANY PASSENGERS:
ANY WITNESS? IF YES, NAME:		WITNESS CONTACT:
WAS THERE ANY VIDEO CAPTURE?	YES (NO)	
WAS THERE ANY AUDIO RECORDED?	YES (NO)	
ACCIDENT SCENE PHOTOS TAKEN?	YES (NO)	
ACCIDENT PORTION:	rear portion	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance? YES / NO		
WORKSHOP PARTICULAR:	N-51 Automotive P/L	
CONTACT NO:	68420051 / 67440510	
CONTACT PERSON:		
FAX NO:	67410510	
WORKSHOP EMAIL:	sales@n51.com.sg	



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Lee Cherng Wo
Period of Insurance : 31 Oct 2021 To 30 Oct 2022
Engine No. : MR20043026R
Chassis No. : MNTBBAL33Z0005957

Vehicle No. : SJY1013G
Policy No. : 2100487923-05
Endorsement No. :
Issued Date : 08 Oct 2021

ABOUT THE COVER

Make/Model : NISSAN TEANA 2.0 PREMIUM

Engine Capacity/Tonnage : 1,997.00 CC

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2016

Insuring with COE/PARE : 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 - \$1600 Theft - \$0 Flood Cover - \$1600

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Lee Cherng Wo - \$1600 (Own Damage), \$1600 (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 Autelution Industrial Add: 19 Ubi Road 4 Singapore 408623 64906666

4 Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093

5 Tan Chong Motor Sales Add: 17 Lorong 6 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.sg or AIG 5.0 Mobile App. Simply search and download "AIG SG" from iTunes or Google Play

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

I/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).

0500610000

TAN CHONG CREDIT PTE LTD

913, SUKUT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589623 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

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