

NATION 11 Assessment Centre Services *Sub 22470005*

Date In: <i>07/04/2022 16:47</i>	Job Description	Date & Time Completed	Done by
Ref No: <i>X138/114200032354</i>	SAS e-filing		
Veh No: <i>SPR 6922A</i>	E-mail (within state, Ab, 2hrs)		
DOA: <i>06/04/2022 19:24</i>	i-Motor Claim Form		
OD: <i>(P) Reporting Only</i>	i-Motor W/O (Within 0.1 2hrs, 1P 4hrs)		
TP Insurer	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars:	Veh No: <i>GBL 8447m</i>	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] ()		

Date/Time	Actions

Claimant's Particulars :-	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Driver/Owner:	1) AR : Accident Reporting (\$30),		1st Bill	Add Bill
Contact No:	2) DA : Damage Assessment (\$100); INC (\$30);			
Damaged Portion:	3) TF : Towing Fee \$40/\$45			
QC Checked by (Engr-In-Charge):	4) FT : Follow-Through Survey \$120			
Auditors' Comments :-	5) FT : Follow-Through Survey (Resurvey) \$30			
Ent 1:	For claiming against INC Only (wef 10 Jan 2005)			
Ent 2 / 3:	6) TR : Re-inspection \$75			
	7) N1 : idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	• 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: Blue 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 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	07/04/2022 16:47 (SGT)
Date of Accident	06/04/2022 19:24 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	(TUAS) BEFORE BKE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR6922A
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	TSURUMI (SINGAPORE) PTE LTD
Company Reg No	1XXXXX808W
Email Address	supersonicrun123@gmail.com
Mobile Phone No	(Phone) +65-91529990
Alternative Phone No	+65-91529990

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	Commercial vehicle
Transmission	Auto
CC	1997

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100404044-07
Cover Note Number	-

DRIVER

Name of Driver	RYOICHI HIKITA
Passport No/FIN	GXXXX277K

Date Of Birth	16/10/1980
Occupation	Indoor
Date Of Driving Pass	15/10/2019
Driving experience	2 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91529990
Alt. Phone Number	-
Email Address	supersonicrun123@gmail.com
Address	140 HILLVIEW AVENUE #02-07
Address complement	-
Postcode	669600
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Raining
Road Surface	Wet

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

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	GBL3447M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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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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' 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

Witnessed by Reporting Centre Personnel

Sketch Plan

PIE (7MAS) BEFORE BKE

A = SKR 6922A

B = GBL 3447M



Describe Circumstances of the Accident


ON THE STATED DATE & TIME, I WAS TRAVELLING
STRAIGHT. AS THE TRAFFIC IS HEAVY THE CAR INFRONT OF
ME CAME TO A STOP. I FOLLOWED. OUT OF A SUDDEN I
FELT A HUGE IMPACT ON MY REAR. I GOT DOWN AND
REALISED VEH B HIT ONTO ME.

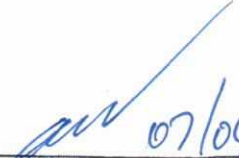
Declaration

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

 07/04/2022
Witnessed by Reporting Centre
Personnel

VEHICLE NO: SKR 6922 A

MAKE & MODEL: NISSAN TEANA

AUTO / MANUAL

DATE OF ACCIDENT	06 / 04 / 2022	*C.C.
TIME OF ACCIDENT	7.24 AM / (PM)	
LOCATION OF ACCIDENT	PIE (TUAS) BEFORE BICE	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	TSURUMI (SINGAPORE) PTE LTD	
EMAIL	SUPERSONIC RUN 123 @GMAIL.COM	Office. MOBILE /
NRIC	197802808 W	
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY	
FLEET POLICY	YES / NO ?	
INSURANCE CO.	AIG	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	2100404044 - 07	
NAME OF DRIVER	AS ABOVE / (IF NO.) RYOICHI HIKITA	
NRIC	66293277K	
DATE OF BIRTH	16 / 10 / 1980	
ANY PASSENGER	YES / (NO):	
NAME OF PASSENGER	X	
GENDER OF PASSENGER	MALE / FEMALE X	
OCCUPATION	Outdoor / (Indoor)	
DATE OF DRIVING PASS	15 / 12 / 2019	
GENDER	(Male) / Female	
CONTACT NO.	Mobile: 9152 9990 Office. Home. /	
EMAIL		
ADDRESS	140 HILLVIEW AVE #02 - 07	
DOES DRIVER OWN OTHER VEHICLES?	(NO) / If yes, Reg No. INSURER	
RELATIONSHIP	(Employee) / If No.	
WEATHER CONDITION	Clear / (Raining) / Other:	
ROAD SURFACE	Dry / (Wet) / Other:	
ANY INJURIES	(NO) / If yes, Who?	
CONTACT NO.		
POLICE REPORT	(NO) / If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO/IF YES, WHO?	
VEHICLE B NO.	GBL 3447 M Any Passenger:	
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / (NO)	
WAS THERE ANY AUDIO RECORDED?	YES / (NO)	
SCENE ACCIDENT PHOTOS TAKEN?	YES / (NO)	
**WORKSHOP:		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / (NO)	



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tsurumi (Singapore) Pte Ltd
Period of Insurance : 28 Feb 2022 To 27 Feb 2023
Engine No. : MR20038577R
Chassis No. : MNTBBAL33Z0003463

Vehicle No. : SKR6922A
Policy No. : 2100404044-07
Endorsement No. : 000000000434768
Issued Date : 02 Mar 2022

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 : 2015

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

Any person who is driving on the Policyholder's order or with their 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 S\$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* :

Mileage Condition : Unlimited Mileage

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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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. Autolution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666

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

5. Tan Chong Motor Sales Add: 19 Lorong 8 Toa Payoh Singapore 319255 63570753

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: NA

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).

0500610443

TAN CHONG CREDIT - KLY

913 BUKIT 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.

SSCSAN

1005363860/ADL