

NATIONAL Assessment Centre Services

Date In: 18/04/2022	Job description	Date & Time Completed	Done by
Ref No: Nm / AIG 22003528 / Am4	SAS e-filing		
Veh No: SMG 3852Y	E-mail (within 8hrs. AIG 2hrs)		
D.O.A: 14/04/2022 17:10	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: GBF 4126P	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
	Mobile Reporting

NA 220/031 / NA220/049	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			1st Bill	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) iT : 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 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	18/04/2022 18:35 (SGT)
Date of Accident	14/04/2022 17:10 (SGT)
Exact Location of Accident	934 Tampines Street 91, Singapore
Additional Location Information	BETWEEN BLK 928 & 934 (CARPARK LOT 185)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG3852Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAY GEK SIE, EUNICE (DAI YUSHI, EUNICE)
NRIC No	SXXXX239J
Email Address	abc8627e@gmail.com
Mobile Phone No	(Phone) +65-96940744
Alternative Phone No	+65-96940744

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	Cx-3
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	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800151300-02
Cover Note Number	-

DRIVER

Name of Driver	WONG EE KEAN
NRIC No	SXXXX260Z

Date Of Birth	21/06/1984
Occupation	Indoor
Date Of Driving Pass	26/07/2005
Driving experience	16 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96883138
Alt. Phone Number	-
Email Address	abc8627e@gmail.com
Address	120 FABER DRIVE
Address complement	-
Postcode	129430
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	ISAAC TAY
Gender	Male

PASSENGER 2

Name	EZANN TAY
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT : G/20220418/7066.

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	GBF4126P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-97325797
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

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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' 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

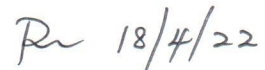
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel

Sketch Plan

Vehicle A: SMG 3852Y

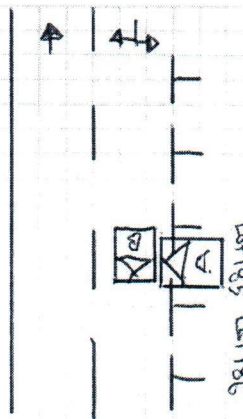
Vehicle B: GBF 4126P

Between B1K 928 & 934 Tampines

at 91 Carpark Lot 185.

B1K
928

B1K
934



Describe Circumstances of the Accident

Handwritten notes in the 'Describe Circumstances of the Accident' section:

Police Report

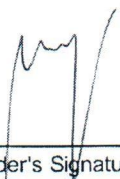
To


G/2022 04/18/7066


rfm

Declaration

I/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

 18/4/22
Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



G/20220418/7066

1 of 2

POLICE REPORT (NP299)

Report No. G/20220418/7066

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 18/04/2022 16:13	Vide Report No.	Station Diary No.
Name Of Informant WONG EE KEAN	Address 120 FABER DRIVE SINGAPORE 129430	
ID Type / ID No. NRIC NO / S8417260Z	Contact No. Home/Office:	Mobile: 96883138
Nationality SINGAPORE CITIZEN	Email Address eekean@gmail.com	
Occupation Business consultant	Sex Female	Age 37
Institution/School Name	Date of Birth 21/06/1984	Race Chinese
Date/Time Of Incident 14/04/2022 17:10 - 14/04/2022 17:15	Location Of Incident 934 TAMPINES STREET 91 TAMPINES PALMSRING SINGAPORE 520934	

Brief details.

On the stated date and time, I Veh A (SMG3852Y) wanted to exit my parking lot.

As I had inched out, I noticed oncoming traffic, VEH B (GBF4126P), from my right.

Hence, I came to a stop to give way.

Several seconds later, VEH B (GBF4126P) hit onto my stationary VEH A (SMG3852Y).

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/04/2022 16:13
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20220418/7066

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220418/7066

Subjects Involved			
Victim			
Person Name	WONG EE KEAN		
ID Type	NRIC NO	ID No	S8417260Z
Gender	Female	Age	37
Race	Chinese	Language	English
Occupation	Business consultant	Address	120 FABER DRIVE SINGAPORE 129430
Mobile No	96883138	Is Informant A Victim?	Yes
Person Name	WONG EE KEAN (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/04/2022 16:13
Officer In-Charge Of Case:	Classification Of Case:

SINGAPORE ACCIDENT STATEMENT

Accident Date: 14/4/2022		Time: 17:10h		(hh:mm) 24 hr format	
Location Between Blk 928 & 934 Tampines St 91 Carpark Lot 185					
Vehicle Number SM63852Y (A) (1998cc)					
Insured Name Tay Gek Sie, Eunice					
NRIC / FIN S7926239J			Contact Number 9694 0744		
Make mazda		Model cx3			
Are you claiming under your own insurance policy for repair to your vehicle?					
() Yes If No, Pls select: (✓) Third Party () Reporting					
Insurance Company AIG					
Type of Policy () Comprehensive () Third Party Fire & Theft () TP Only					
Policy Number 1800151300-02					
Name of Driver Wong Ee Kean () Same as Insured					
NRIC / FIN S8417260Z			Contact Number 9732 5797 9688 3138		
Date of Birth 21/06/1984					
Driving Pass Date 26 Jun 2005					
Occupation (✓) Indoor () Outdoor					
Gender () Male (✓) Female					
Email Address abc2627e@gmail.com () NO EMAIL					
Address of Driver 120 Faber Drive (S) 129430					
Was driver an employee of the Insured's Company? () Yes (✓) No					
If No, Relationship of the Driver with the Insured					
() Owner () Spouse (✓) Friend () Relative () Children () Sibling					
Does the Driver Own Any Other Vehicle? () Yes (✓) No					
If Yes, Vehicle Registration Number of Driver's Own Vehicle					
Insurance Company of Driver's Own Vehicle					
Weather Conditions (✓) Clear () Raining () Others					
Road Surface (✓) Dry () Wet () Others					
Was any foreign vehicle involved in this accident? () Yes (✓) No					
Was anybody injured in the accident? () Yes (✓) No					
If yes, injured detail					
Was there any video captured by Car Camera? () Yes (✓) No					
Was the Accident reported to the Police? () Yes (✓) No If yes attach police report					
DETAILS OF 3 rd party		Name / Nric		Contact	
Veh B GBF 4126P → tel: 9732 5797					
Veh C					
Veh D					
Veh E					
Veh F					

* 2 passenger

(1) Isaac Tay (M)

(2) Ezann Tay (F)



CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tay Gek Sie, Eunice (Dai Yushi, Eunice)
Period of Insurance : 18 Dec 2021 To 17 Dec 2022
Engine No. : PE31308121
Chassis No. : JM6DK2W7AK0412524

Vehicle No. : SMG3852Y
Policy No. : 1800151300-02
Endorsement No. :
Issued Date : 02 Dec 2021

ABOUT THE COVER

Make/Model : MAZDA CX3 2.0 SkyActiv
Engine Capacity/Tonnage : 1,998.00 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/PARF : 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 S\$53,000 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 1500cc - 1600cc Optional

* 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)

Tay Gek Sie, Eunice (Dai Yushi, Eunice) - \$600 (Own Damage), \$600 (Flood Cover)

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

1. Trans Eurokars Pte Ltd Add. 27A Tanjong Penjuru, Singapore 609042 63310608

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: HONG LEONG FINANCE LTD

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).

0503599190

ARF (AP) PTE LTD - MAZDA

7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX
SINGAPORE 069111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPAILU