

**NATIONAL Assessment Centre Services:** (wef 1 Jan 08) **SA0822660001**

Date In: 06/06/2022 10:24	Job description	Date & Time Completed	Done by:
Ref No: NBN/AIG 22005357	SAS e-filing		
Veh No: SMD 6582J	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 04/06/2022 12:07	i-Motor Claim Form		
OD TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

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

TP Particulars: Vch No: **GRU 7914** 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	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

**NA2201532**

Statement Particulars:

Driver/Owner: \_\_\_\_\_

Contact No: \_\_\_\_\_

Damaged Portion: \_\_\_\_\_

C Checked by (Engr-In-Charge): \_\_\_\_\_

Auditors Comments:

1.1: \_\_\_\_\_

1.2/3: \_\_\_\_\_

Invoice Preparation Checklist		Am't (\$)	Am't (\$)
		Inc Bill	Lead Bill
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) NI: 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		
TE (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 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	06/06/2022 10:24 (SGT)
Date of Accident	04/06/2022 12:07 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	TOWARDS CITY (PIE CHANGI)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP6582J
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN GAN PING
NRIC No	SXXXX378J
Email Address	petertgp1215@gmail.com
Mobile Phone No	(Phone) +65-96398832
Alternative Phone No	+65-96398832

#### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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	1900166354-01
Cover Note Number	-

#### DRIVER

Name of Driver	TAN GAN PING
NRIC No	SXXXX378J

Date Of Birth .....	15/12/1968
Occupation .....	Outdoor
Date Of Driving Pass .....	01/07/1992
Driving experience .....	29 YEARS AND 11 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96398832
Alt. Phone Number .....	+65-96398832
Email Address .....	petertgp1215@gmail.com
Address .....	BLK 174 ANG MO KIO AVENUE 4 #08-677
Address complement .....	-
Postcode .....	560174
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 .....	2
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? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
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? .....	Yes
Reasons for not uploading a video of the accident .....	WITH OWNER
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBG7991H
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-



*Vehicle Category	Commercial vehicle
Name of Driver	BRANDON STEVE STEWART
-NRIC No	SXXXX052A
Contact Number	(Phone) +65-80232044
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	GBJ9628D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	MIAH RANI
Passport No/FIN	GXXXX285N
Contact Number	(Phone) +65-80210907
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	TAN GAN PING
Gender	Male
Phone No	(Phone) +65-96398832
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SMP6582J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## IMPORTANT NOTICE

## SKETCH PLAN

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' 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.
- (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 - SMT 6582J  
Vehicle B - GBG 7991H  
Vehicle C - GBJ 9628D

CITE TOWARD CITY (PIE CHANGI)

The sketch plan is drawn on a grid. It shows three vehicles, labeled A, B, and C, arranged in a horizontal line. Above the line, the text 'CITE TOWARD CITY (PIE CHANGI)' is written. Below the line, there are three boxes, each containing a letter: 'C', 'A', and 'B' from left to right. Arrows point from each box towards the left, indicating the direction of travel.



Describe Circumstances of the Accident

As per police report.

Report No : T/20220605/7007

*[A large, stylized blue signature or scribble is written across the lined area.]*

Declaration

I/We declare the foregoing particulars are true in every respect.

*[Signature]*  
Policyholder's Signature / Date &  
Time

*[Signature]*  
Driver's Signature (if driver is not the policyholder) / Date  
& Time

*[Signature]* 06/06/2022  
Witnessed by Reporting Centre  
Personnel



# SINGAPORE POLICE FORCE

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20220605/7007

1 of 4

Report No. T/20220605/7007

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/06/2022 13:10		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TAN GAN PING			Address: 174 ANG MO KIO AVENUE 4 #08-677 SINGAPORE 560174		
ID Type / ID No.: NRIC NO / S6847378J			Contact No.: Home/Office: Mobile: 96398832		
Nationality: SINGAPORE CITIZEN			Email: PETERTGP@YAHOO.COM.SG		
Sex: Male	Age: 53	Date of Birth: 15/12/1968	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 2B,2A,3		Date of Expiry:

## General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/06/2022 12:10	Type of Location: CTE exit to PIE (Changi)
Location:  CENTRAL EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBG7991H	Van	TOYOTA	Hiace	Silver	Slightly Damaged	1
GBJ9628D	Lorry	TOYOTA	DYNA	White	Slightly Damaged	1





**SINGAPORE  
POLICE FORCE**



T/20220605/7007

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220605/7007

**CONTINUATION OF REPORT**

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMP6582J	Car	MITSUBISHI	OUTLANDE R 2.0 CVT	Brown		0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMP6582J	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900166354-01	08/10/2021	07/10/2022

**Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

Driver

Name	BRANDON STEVE STEWART	ID No.	S9525052A
Related Vehicle	GBG7991H (Van)	Contact No.	80232044
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Driver

Name	MIAH RANI	ID No.	G2340285N
Related Vehicle	GBJ9628D (Lorry)	Contact No.	80210907
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: 04/03/2025
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL





**SINGAPORE  
POLICE FORCE**



T/20220605/7007

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220605/7007

**CONTINUATION OF REPORT**

Driver				
Name	TAN GAN PING		ID No.	S6847378J
Related Vehicle	SMP6582J (Car)		Contact No.	96398832
Hospital/Clinic	ANG MO KIO MEDICAL CENTRE		Class of Driving Licence & Expiry	Class: 2B,2A,3 Date of Expiry: NIL
Date	05/06/2022		Date	05/06/2022
No. of Days granted Medical Leave	03	Degree of	Slight	

Brief Details.

I was driving along CTE towards CITY (PIE Changi).

Vehicle (GBJ9628D) ahead me jam brake and my vehicle stop on time

suddenly I felt an impact on my rear portion. due to the impact my vehicle was push forward and hit onto

front vehicle.

Vehicle (GBG7991H) can't stop on time.

It was a 3 car chain collision.

I have 2 videos of 82MB each.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20220605/7007

4 of 4

Report No. T/20220605/7007

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPB /  
TAY CHUN KEEN  
Contact No.: 65476436

NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:  
05/06/2022 13:10

Classification Of Case:



NO. SMP 65823		MAKE & MODEL : M. OUTLANDER		AUTO MANUAL	
DATE OF ACCIDENT		04 / 06 / 2022		C.C. 1998	
TIME OF ACCIDENT		1207 AM / (PM)			
LOCATION OF ACCIDENT		CTE TOWARD CITY (PIE CHANG)			
EXACT PURPOSE USED AT TIME OF ACCIDENT		EMPLOYMENT / PRIVATE USE / PRIVATE HIRE			
NAME OF OWNER		TAN GAN PING			
EMAIL: PETERTG@1215@gmail.com		Office:		MOBILE: 9639 8832	
NRIC		5684 73783			
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.		1900166354-01			
NAME OF DRIVER		AS ABOVE IF NO: -			
NRIC		15 / 12 / 1968			
DATE OF BIRTH		YES / NO: -			
ANY PASSENGER		MALE / FEMALE -			
NAME OF PASSENGER		Outdoor / Indoor			
GENDER OF PASSENGER		01 / 07 / 1992			
OCCUPATION		Male / Female			
DATE OF DRIVING PASS		Mobile: Office: Home:			
GENDER		BLK 174 ANG MO KIO AVE 4 #08-677 S(560174)			
CONTACT NO.		NO / If yes: Reg No. INSURER.			
EMAIL:		Employee / If No.			
ADDRESS		Clear / Raining / Other:			
DOES DRIVER OWN OTHER VEHICLES?		Dry / Wet / Other:			
RELATIONSHIP		No / If yes: Who? TAN GAN PING			
WEATHER CONDITION		9639 8832			
ROAD SURFACE		No / If yes: Where? 10481 AVE 3 S(408865)			
ANY INJURIES		NO/IF YES: WHO?			
CONTACT NO.		Any Passenger: 01			
POLICE REPORT		BRANDON STEVE STEWART (59525052A)			
NOTICE OF INTENDED PROSECUTION GIVEN?		8023 2044			
VEHICLE B NO.		Any Passenger: 01			
ME		6867991H			
CONTACT NO.		Any Passenger:			
VEHICLE C NO.		8023 2044			
VEHICLE D NO.		Any Passenger: 01			
VEHICLE E NO.		Any Passenger:			
VEHICLE F NO.		Any Passenger:			
WITNESS		Any Passenger:			
VEHICLE CONTACT NO.					
AS THERE ANY VIDEO CAPTURE?		YES / NO			
AS THERE ANY AUDIO RECORDED?		YES / NO			
WERE ACCIDENT PHOTOS TAKEN?		YES / NO			
**WORKSHOP:					
Have you been approach by unknown person soliciting (s) /					
reg accident claims assistance?		YES / NO			





# CERTIFICATE OF INSURANCE

## CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : TAN GAN PING  
Period of Insurance : 08 Oct 2021 To 07 Oct 2022  
Engine No. : 4J11BH5508  
Chassis No. : GF7W0601885

Vehicle No. : SMP6582J  
Policy No. : 1900166354-01  
Endorsement No. :  
Issued Date : 01 Sep 2021

### ABOUT THE COVER

Make/Model : MITSUBISHI Outlander 2.0 Elegance/Sports  
Engine Capacity/Tonnage : 1,998.00 CC  
Driver Restriction : NA  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2019  
Insuring with COE/PAFF : 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

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)

TAN GAN PING - \$600 (Own Damage), \$600 (Flood Cover)

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

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708688

4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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](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: 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).

0504620227

CYCLE & CARRIAGE-GEORG

239 ALE

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.

SSPOCC