

NATIONAL Assessment Centre Services

Date In: 04/07/22	Job description	Date & Time Completed	Done by
Ref No: NA/A1622006318/13	SAS e-filing		
Veh No: GBL7716A	E-mail (within 8hrs. AP 2hrs)		
D.O.A: 03/07/22 0905	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: SNG154L 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

Claimant's Particulars :-	Invoice Preparation Checklist		Ant (\$)	Ant (\$)
			1st Bill	Add Bill
Driver/Owner:	1) AR : Accident Reporting (\$30);			
Contact No:	2) DA : Damage Assessment (\$100); INC (\$80)			
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			
Cat. 1:	For claiming against INC Only (wef 10 Jan 2005)			
Cat. 2/3:	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 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	04/07/2022 11:34 (SGT)
Reported by	Driver
Date of Accident	03/07/2022 09:05 (SGT)
Exact Location of Accident	Woodlands Ave 2, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBL7916A

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	VISIONICS ENGINEERING PTE. LTD
Company Reg No	2XXXXX160E
Email Address	autohub325@gmail.com
Mobile Phone No	(Phone) +65-68518215
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Townace
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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220035499

DRIVER

Name of Driver	NICHOLAS NAVEEN ROBERT ANTONY
Passport No/FIN	GXXXX335T
Date Of Birth	05/12/1983
Occupation	Outdoor

Date Of Driving Pass	24/07/2021
Driving experience	1 YEAR
Gender	Male
Mobile Number	(Phone) +65-97240231
Alt. Phone Number	-
Email Address	autohub325@gmail.com
Address	BLK 766 WOODLANDS CIRCLE
Address complement	#10-344
Postcode	730766
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 - Change/cross lane
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	SAFI
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Woodlands East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007679999
Police Station Address	3 Woodlands Drive 63 Singapore 737890
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20220703/2022

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNG154L
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Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ANG SWEE MUAY
NRIC No	SXXXX057Z
Contact Number	(Phone) +65-96931313
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.
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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' 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.



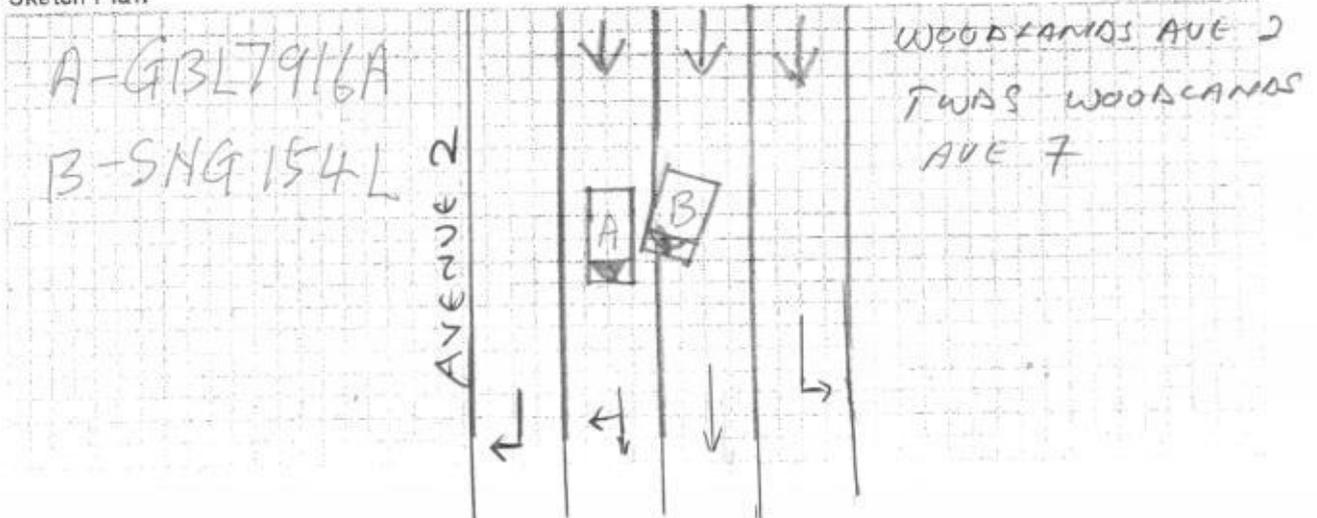
Policyholder's Signature / Date & Time

Roslin A-722

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

ROSLINDA BINTE A. WAHAB
Witnessed by Reporting Centre Personnel 04/07/22

Sketch Plan



Describe Circumstance of the Accident

Pls refer to the police report is T/20220703/2022

Declaration

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



Policyholder's Signature / Date & Time

[Handwritten Signature]
A.T-22

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

ROSLINDA BINTI A. WAHAB

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) 04/07/22



SINGAPORE POLICE FORCE

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999



T/20220703/2022

1 of 3

Report No. T/20220703/2022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
03/07/2022 10:28

Vide Report No.:
L/20220703/0092

Station Diary No.:
37

Informant's Particulars

Name of Informant: NICHOLAS NAVEEN ROBERT ANTONY			Address: APT BLK 766 WOODLANDS CIRCLE #10-344 SINGAPORE 730766		
ID Type / ID No.: FIN NO / G3466335T			Contact No.: Home/Office:		Mobile: 97240231
Nationality: INDIAN			Email:		
Sex: Male	Age: 38	Date of Birth: 05/12/1983	Type of Informant: Driver		
Race: Indian			Language: English		Institution / School Name:
Occupation: Van driver			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 03/07/2022 00:00	Type of Location: Straight Road
Location: WOODLANDS AVENUE 2			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBL7916A	Van	TOYOTA	TOWN ACE 1.5GL AUTO		Slightly Damaged	0
SNG154L	Car	MERCEDES BENZ	GLB200 PREMIUM PLUS AMG LINE 7SEATER		Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20220703/2022

2 of 3

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20220703/2022

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NICHOLAS NAVEEN ROBERT ANTONY	ID No.	G3466335T
Related Vehicle	GBL7916A (Van)	Contact No.	97240231
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	ANG SWEE MUAY	ID No.	S1807057Z
Related Vehicle	NIL	Contact No.	96931313
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 03/07/2022 at about 0905hrs, I was driving my vehicle GBL7916A along Woodlands Ave 2 towards Woodlands Ave 7. After the junction Woodlands Ave 5 X Woodlands Ave 2, and I was on the right lane towards Woodlands Ave 7, the vehicle SNG154L on the middle lane turns into my lane and swipe from the left of my car. I then immediately emergency brake and horn the vehicle and called for police assistance.

My vehicle has scratches on the left near to the driver's door. No one injured and no government property damaged.

Subsequently, police arrived and I was advice to lodge a traffic accident report at nearby police station reference: L/20220703/0092.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999



T/20220703/2022

3 of 3

Report No. T/20220703/2022

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:
L /
Other XIE SIBIN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
03/07/2022 10:28

Officer In Charge Of Case:
TP / GIT /
STAFF SGT ROIZMAN BIN MOHAMED
POSARI
Contact No.: 65476131

Classification Of Case:

NP168

ACCIDENT STATEMENT

ACCIDENT DATE: (03/07/22) (DD/MM/YYYY), TIME: (09:05) (HH:MM)

LOCATION: WOODLANDS AVE 3

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBL7916A
- b) INSURANCE COMPANY: AIG
- c) POLICY NUMBER: 7220035499
- d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
- e) MAKE & MODEL: TOYOTA PROUNCE (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)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: VISIONICS ENGINEERING PTE LTD (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: _____ CONTACT: 68518015
- c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: NICHOLAS NAVEEN ROBERT ANTONY (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: G3466335T CONTACT: 97240231
- c) ADDRESS: BLK 766 WOODLANDS CIRCLE
#10-344 (730766)

*d) DATE OF BIRTH: (05/12/1983) (DD/MM/YYYY)

- e) OCCUPATION: (INDOOR / OUTDOOR)
- f) YEARS OF DRIVING EXPERIENCE: 24/07/2021

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: SN4 154L MODEL: _____
- b) DRIVER'S NAME: ANG SWEE M494
- c) NRIC/FIN/PASSPORT: 518070572 CONTACT: 96931312

9. THIRD PARTY VEHICLE

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

email = autohub325@gmail.com

fax =

video =

* No of passenger
(including driver)

(2)

SAFI (M)

* No of passenger
(including driver)

()

* No of passenger
(including driver)

()



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder : VISIONICS ENGINEERING PTE LTD
Period of Insurance : 11 Apr 2022 To 10 Apr 2023
Engine No. : 2NRG760550
Chassis No. : S403M0010885

Vehicle No. : GBL7916A
Policy No. : 7220035499
Endorsement No. :
Issued Date : 07 Apr 2022

ABOUT THE COVER

Make/Model : TOYOTA TOWNACE [Van]
Engine Capacity/Tonnage : 0.88 Tonnage **Sum Insured** : Market Value **First Year of Registration** : 2022
Driver Restriction : NA **Off Peak Car** : No **Insuring with COE/PARF** : 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 \$553,000 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.

* 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 can be carried out at the repairer of Your choice (unless specifically excluded by Us).
 For 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: United Overseas Bank Limited

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, 1999 (Malaysia).

0504710000
 1F INSURANCE AGENCY PTE LTD
 68 KAKI BUKIT AVE 6 #01-22 ARK@KB
 SINGAPORE 417896
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 This computer generated document does not require a signature.

1F Insurance Agency Pte Ltd