

NATIONAL Assessment Centre Services

Date In: 25/07/22	Job description	Date & Time Completed	Done by
Ref No: NM/A1622007061/ARS	SAS e-filing		
Veh No: SLV2813A	E-mail (within 8hrs. AP, 2hrs)		
D.O.A: 23/07/22 1018	i-Motor Claim Form		
OD: (P) 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: SLL6425M	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 (ADRIAN)

NA2201967

NA2202001

Invoice Preparation Checklist

Am't (\$)
1st Bill

Am't (\$)
Add Bill

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2/3:

- 1) AR: Accident Reporting (\$30);
- 2) DA: Damage Assessment (\$100); INC (\$80)
- 3) TP: 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) N1: Idac DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- ON*
- *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	25/07/2022 18:28 (SGT)
Reported by	Both
Date of Accident	23/07/2022 10:18 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	LIM TECK KIM RD TURNING LEFT TO TANJONG PAGAR RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV2813A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG QI RUI
NRIC No	SXXXX556Z
Email Address	feliciatan80@hotmail.com
Mobile Phone No	(Phone) +65-96822400
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	FORESTER 2.0XT CVT AWD SR
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.
Policy Number / Cover Note Number	1700069194-04

DRIVER

Name of Driver	NG QI RUI
NRIC No	SXXXX556Z
Date Of Birth	19/12/1971
Occupation	Indoor

Date Of Driving Pass	17/08/2017
Driving experience	4 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96822400
Alt. Phone Number	-
Email Address	feliciatan80@hotmail.com
Address	BLK 712 WOODLANDS DR 70
Address complement	#04-93
Postcode	730712
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	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)	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	PASSENGER
Gender	Female

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?	Yes
Reasons for not uploading a video of the accident	WITH WORKSHOP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL6425M
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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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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.

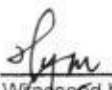
(collectively the "Purposes")

(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

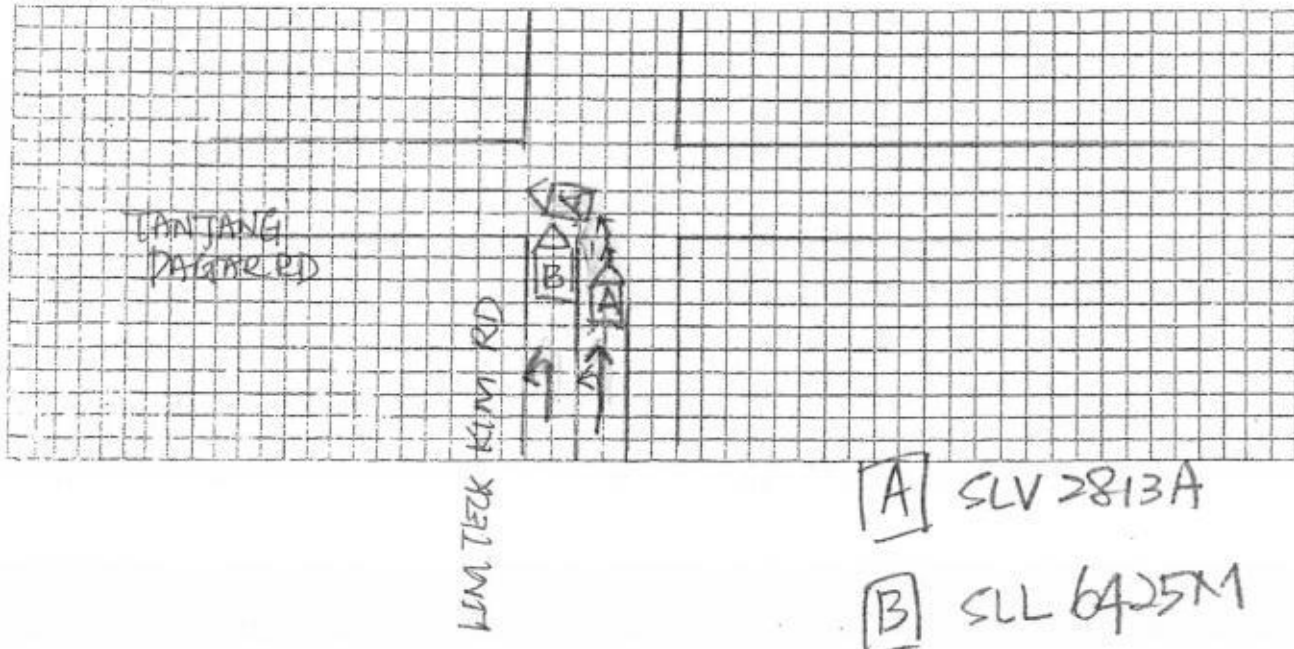
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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

 25/07/22
Witnessed by Reporting Centre Personnel

Sketch Plan




Describe Circumstances of the Accident

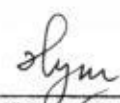
I WAS DRIVING ALONG LIM TECK KIM RD IN THE MIDDLE
LANE TURNING LEFT TOWARDS TANJANG PAGAR RD. ON
MY LEFT SIDE LANE SHOULD BE TURN LEFT ARROW ONLY
BUT THE DRIVER OF VEHICLE NO. SLL 6425M DRIVING
STRAIGHT AGAINST TRAFFIC RULE & HIT TO MY CAR
LEFT BACK & DOOR.

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

 25/07/22
Witnessed by Reporting Centre
Personnel

ACCIDENT STATEMENT

ACCIDENT DATE: 23 / 07 2022 (DD/MM/YYYY), TIME: 10.18 AM (HH:MM)

LOCATION: LIM TEK KIM RD TURNING LEFT TO TANJANG

PAGAR RD

1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SLV 2813A
 b) INSURANCE COMPANY: AIG
 c) POLICY NUMBER: 17000 69.94-04
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: SUBARU NEW FORESTER 2.0 XT
 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 (YES/NO)
 IF NO, PLEASE STATE THIRD PARTY CLAIM / REPORTING ONLY

2. INSURED / POLICY HOLDER

a) NAME: NG QI RUI (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S71465562 CONTACT: 96822400
 c) ADDRESS: BLK 712 WOODLANDS DRIVE TO #04-93
SINGAPORE 730712

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No of passengers
 (including driver)
(2)

DRIVER
 a) NAME: UNKNOWN FEMALE
 b) NRIC/FIN/PASSPORT: CONTACT: 96822400
 c) ADDRESS:

d) DATE OF BIRTH: 19 / 12 / 1971 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) YEARS OF DRIVING EXPERIENCE: 17 Aug 2017, 5 YEARS

3. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? YES / NO

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

4. a) WEATHER CONDITION: CLEAR / RAINING / OTHERS

b) ROAD SURFACE: DRY / WET / OTHERS

5. WAS ANYBODY INJURED? YES / NO

6. a) REPORTED TO POLICE? YES / NO

IF YES, PLEASE STATE WHICH POLICE STATION:

7. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: SLL 6425 M MODEL: MADAZ

b) DRIVER'S NAME:

c) NRIC/FIN/PASSPORT: CONTACT:

8. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: MODEL:

e) DRIVER'S NAME:

f) NRIC/FIN/PASSPORT: CONTACT:

No of passengers
 (including driver)
()

No of passengers
 (including driver)
()

mobile Reporting Email = feliciatan80@hotmail.com

fax =

video = YES



CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Ng Qi Rui
Period of Insurance : 24 Oct 2021 To 23 Oct 2022
Engine No. : FA20CB20671
Chassis No. : JF1SJK85JG099934

Vehicle No. : SLV2813A
Policy No. : 1700069194-04
Endorsement No. :
Issued Date : 20 Sep 2021

ABOUT THE COVER

Make/Model : SUBARU New Forester 2.0XT
Engine Capacity/Tonnage : 1,998.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
Insuring with COE/PAF : 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 \$1,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 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, racing, speed-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.

Limit of Use : 1500cc - 1800cc

* Limitations mentioned in Schedule 3 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Section 96 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 - \$2400; Theft - \$0; Flood Cover - \$2400

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Ng Qi Rui - \$2400 (Own Damage), \$2400 (Flood Cover)

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

1. Motor Image Enterprise Pte Ltd, Aste, 19 Lorong 8, Tan Pagar Singapore 319258 6175109

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6100. Alternatively, you may refer to AIG website www.aig.sg or AIG GC Mobile App. Simply search and download "AIG SG" App (Google or Google Play).

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

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).

0500619210

TAN CHONG CREDIT SUBARU-JAN

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE
SINGAPORE 589623

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

7A, JALAN WING ANN, TRANS BUKIT TIMAH, SINGAPORE 110604

AIG Asia Pacific Insurance Pte. Ltd.