

NATIONAL Assessment Centre Services

Date In 02/09/22	Job description	Date & Time Completed	Done by
Ref No NA/AL622008121/13	SAS e-filing		
Veh No GU9999R	E-mail (within 2hrs, APT 2hrs)		
DOA 30/08/22 2011	i-Motor Claim Form		
OD / TP / <u>Reporting Only</u>	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: SKK 1167H	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

NA2202394	Invoice Preparation Checklist		Amst (\$)	Amst (\$)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		1st Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TP: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) FT: 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 (N-n 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 Actual 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	02/09/2022 09:47 (SGT)
Reported by	Driver
Date of Accident	30/08/2022 20:11 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	8 KAKI BUKIT LVL 3 CARPARK AFT GANTRY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GU9999R
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	STZ INTERNATIONAL PTE LTD
Company Reg No	2XXXXX104N
Email Address	jonathan.chng37@gmail.com
Mobile Phone No	(Phone) +65-87838181
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Canter
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 - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7210094904

DRIVER

Name of Driver	JONATHAN CHNG SOON PENG
NRIC No	SXXXX017B
Date Of Birth	12/10/1962
Occupation	Outdoor

Date Of Driving Pass	19/10/1981
Driving experience	40 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81880905
Alt. Phone Number	-
Email Address	jonathan.chng37@gmail.com
Address	BLK 889 TAMPINES ST 81
Address complement	#12-1054
Postcode	520889
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	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)	1
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	-

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

PSLS REFER TO THE ATTACHED STATEMENT

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	SKK1167H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-

Describe Circumstance of the Accident

My Lorry GU 9999 R (A), I'm driving toward to exit at 8, Kaki Bukit Ave 4, 3rd sty car park. I ~~was~~ saw that car park lot No. 3. I reverse to the car park lot 2 ~~and~~ and that's no any car behind me.

~~my lorry~~

I hear something once I reverse almost to the car park lot. and ~~B come out~~ I stop and come out from my lorry and saw the car (B) hit on my left side of my lorry.

I asked the driver why u see my lorry GU 9999 R reversing u still drive toward? and I saw his car (B) with the new Driver sign Δ, then I told him better make report.

And He call his Boss to come ~~out~~ and take a look. ~~It's~~ that's one group of people from this car B - I told them again, this is the small case and Nobody injured. so better report.

(A) lorry GU 9999 R

(B) BMW SKK 1167 H

Declaration

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



Policyholder's Signature / Date & Time

31 Aug 2022
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

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





ACCIDENT STATEMENT

31/08/22
C1 ✓

ACCIDENT DATE: (30/08/22) (DD/MM/YYYY), TIME: (20:11) (HH:MM)

LOCATION: 8 KAKI BUKIT LVL 3 CARPARK Aft GANTRY

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: G49999R
- b) INSURANCE COMPANY: AIG
- c) POLICY NUMBER:
- d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
- e) MAKE & MODEL: NISSAN URBAN SED 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)
- j) IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: STZ INTERNATIONAL PTE LTD (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: 201713104N CONTACT: 87838181
- c) ADDRESS:

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

- DRIVER
- a) NAME: JONATHAN CHNG SOON PENG (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: S1569017B CONTACT: 81880905
- c) ADDRESS: BLK 289 TAMPINES ST 41
12-1054 (520889)

- * d) DATE OF BIRTH: (12/10/1962) (DD/MM/YYYY)
- e) OCCUPATION: (INDOOR / OUTDOOR)
- f) YEARS OF DRIVING EXPERIENCE: 19/10/1981

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: SKK1167H MODEL:
- b) DRIVER'S NAME:
- c) NRIC/FIN/PASSPORT: CONTACT:

9. THIRD PARTY VEHICLE

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

No of passengers
(including driver)
(1)

No of passengers
(including driver)
()

No of passengers
(including driver)
()

01/09/22

yes - submitted

C1

Email = jonathan.chng37@gmail.com

fax =

VIDEO = No



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : STZ INTERNATIONAL PTE LTD
Period of Insurance : 17 Aug 2021 To 09 Oct 2022
Engine No. : 4P10B27753
Chassis No. : FEA01BA00528

Vehicle No. : GU9999R
Policy No. : 7210094904
Endorsement No. : 000000000440264
Issued Date : 07 Apr 2022

ABOUT THE COVER

Make/Model : MITSUBISHI FEA01BR2SDEB
Engine Capacity/Tonnage : 1.7 Tonnage
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2014
Insuring with COE/PARF : Yes

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" ("YIDER") 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.

Loss Of Use (7 Days) Commercial Auto

* 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 must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
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: Goldbell Financial Services Pte 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).

0504696022

ALLINK INSURANCE AGY-CV

BLK 153 BUKIT BATOK ST 11 #02-290

SINGAPORE 650153

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Hong Yen Chong



AIG Asia Pacific Insurance Pte. Ltd.
78 Shenton Way
#09-16
AIG Building
Singapore 079120
Co.Reg.No.201009404M

Policy/Reference No. 7210094904

07 Apr 2022

Private & Confidential

STZ INTERNATIONAL PTE LTD
6 TOA PAYOH INDUSTRIAL PARK
#01-1309 TOA PAYOH INDUSTRIAL PARK
SINGAPORE 319058

Dear STZ INTERNATIONAL PTE LTD

Endorsement For Policy No. 7210094904

We would like to inform you that the following endorsement(s) have been issued to your COMMERCIAL AUTOPLUS COMMERCIAL, Policy No. 7210094904.
POI Extension

For More Information

If you have any questions or require more information about these endorsements, please contact our customer service representatives Monday through Friday between 9am to 5pm at +65 6419 3000. Alternatively, you can send us an email at www.aig.sg.

Thank you for your continuing support. We look forward to serving you in all your general insurance needs.

Yours sincerely

Client and Policy Servicing

This is a computer-generated letter which requires no signature.