

ATIONAL Assessment Centre Services: [ver 1.3/08]

Date In: 06/09/2022 15:28	Job description	Date & Time Completed	Done by
Ref No: N/A/20220874/4	SAS e-filing		
Veh No: SMR 355C	E-mail (within 2hrs, 100 chrs)		
D.O.A: 05/09/2022 18:18	1-Motor Claim Form		
OD: TP / Reporting Only	1-Motor W/O (within 05.2hrs, TP 4hrs)		
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars: Yeh No: GBD 9800X	INC () / Non-INC ()	
Owner / Driver: (Tel:	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: (Date:	Time:
Insured/Driver Liability: (%)	[Note-Est. Status (WO): NI 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 5616)	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

NA2022392 / N/A 2022396	Invoice Preparation Checklist
Driver/Owner:	1) AR: Accident Reporting (\$30)
Contact No:	2) DA: Damage Assessment (\$100); INC (\$30)
Damaged Portion:	3) TP: Towing Fee \$10/\$45
C Checked by (Engi-In-Charge):	4) FT: Follow-Through Survey \$120
Auditors Comments:	5) PT: Follow-Through Survey (Resurvey) \$30
L 2/3:	For claiming against INC Only (ver 10 Jan 2005)
	6) TR: Re-inspection \$75
	7) NI: Ids DA + SMRT Survey \$160
	8) NIUC Additional Services
	OD:
	*N3: Courtesy Car / Tpt Allowance \$5
	*N4: Repair Coordination \$10
	*N7: Post Repair Inspection \$25
	*N8: DV / Colluc, Excess Coordination \$5
	TP (NI1): TP (Non INC) against INC \$20
	9) NI2: Leno 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	06/09/2022 15:28 (SGT)
Reported by	Both
Date of Accident	05/09/2022 18:10 (SGT)
Exact Location of Accident	Punggol Dr., Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMR355C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	HO CHOR HAN (HE CHULTAN)
NRIC No	SXXXX012B
Email Address	desmond.hch@gmail.com
Mobile Phone No	(Phone) +65-98627135
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fit
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	1495

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7210081736-01

DRIVER

Name of Driver	HO CHOR HAN (HE CHULTAN)
NRIC No	SXXXX012B
Date Of Birth	10/07/1981
Occupation	Outdoor

Date Of Driving Pass	23/05/2007
Driving experience	15 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98627135
Alt. Phone Number	-
Email Address	desmond.hch@gmail.com
Address	98 EDGEDALE PLAINS #14-40
Address complement	-
Postcode	828689
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	Collision - Head to Rear
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
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?	Yes
Police Station Name	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No	(Fax) +65-62181399
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20220906/2037

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	GBD9000X
Vehicle Manufacturer	Nissan
Vehicle Model	Nv200
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LEE PENG SOON
NRIC No	SXXXX446C
Contact Number	(Phone) +65-97707058
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	HO CHOR HAN (HE CHULTAN)
Gender	Male
Phone No	(Phone) +65-98627135
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SMR355C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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. 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

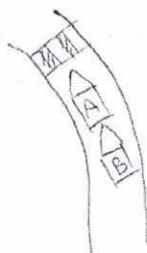
Driver's Signature (if driver is not the policyholder) / Date & Time

06/09/2022

Witnessed by Reporting Centre Personnel

Sketch Plan

Anggol Drive



A : SMR 355C

B : GBD9000X

Describe Circumstances of the Accident

Refer to Police Report NO. T/20220906/2037

Declaration

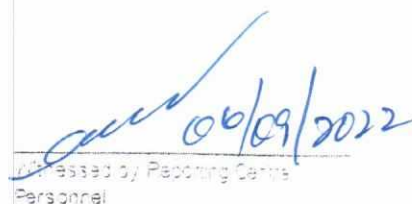
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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


Witnessed by Reporting Officer / Personnel



SINGAPORE POLICE FORCE



T/20220906/2037

1 of 4

Report No. T/20220906/2037

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
06/09/2022 12:59

Vide Report No.:

Station Diary No.:
40

Informant's Particulars

Name of Informant: HO CHOR HAN			Address: 98 EDGEDALE PLAINS #14-40 SINGAPORE 828689		
ID Type / ID No.: NRIC NO / S8120012B			Contact No.: Home/Office: 98627135 Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 41	Date of Birth: 10/07/1981	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: PRIVATE HIRE DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/09/2022 18:10	Type of Location: Slip Road
Location: PUNGGOL DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Pedestrian Crossing	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD9000X	Van	NISSAN	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC		Slightly Damaged	1
SMR355C	Car	HONDA	FIT HYBRID 1.5 AUTO	White	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999



T/20220906/2037

2 of 4

Report No. T/20220906/2037

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMR355C	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7210081736-01	06/08/2022	15/06/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEE PENG SOON	ID No.	S0053446C
Related Vehicle	GBD9000X (Van)	Contact No.	97707058
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	HO CHOR HAN	ID No.	S8120012B
Related Vehicle	SMR355C (Car)	Contact No.	98627135
Hospital/Clinic	CENTRAL 24HR CLINIC (HOUGANG)	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	05/09/2022	Date Discharge	05/09/2022
No. of Days granted Medical Leave	03	Degree of Injury	Serious

Brief Details.

On 05/09/2022 at about 1810hrs, I'm the driver bearing vehicle number SMR355C. I was driving along on the right lane of Punggol Dr as I was on my way home. I checked the left lane and it was clear so I signaled to the left and change lane. When I was reaching the slip road, I saw a bicycle approaching the zebra crossing. Hence, I slow down using engine break and did not engage throttle. The speed should be around 20-30km/h. When bicycle start to turn right toward zebra crossing, I start to brake and stop my vehicle.

Subsequently, the driver bearing NRIC Lee Peng Soon, S0053446C, bearing vehicle number GBD9000X, didn't managed to react on time and hit my rear vehicle. No ambulance was called to the scene. We exchanged particulars after the incident happened. I also went Central 24hr Clinic (Hougang) to get myself checked and I received 3 days of MC from 05/09/2022 to 07/09/2022.

I'm lodging this report for traffic police's actions and insurance purposes.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999



T/20220906/2037

3 of 4

Report No. T/20220906/2037

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999



T/20220906/2037

4 of 4

Report No. T/20220906/2037

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:

F /

SC AKMAL HAKIM BIN HAIRI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

06/09/2022 12:59

Officer In Charge Of Case:

TP / AEIT /

SR STAFF SGT FAHKRUL RAZI BIN SUHAIME

Contact No.: 65470000

Classification Of Case:

NP168

Date of Accident : 05/01/2022 Accident Time: 1810hrs (24-HR-FORMAT)
Accident Place : Punggol Drive
Vehicle Reg. No (Car plate No.) : SMR355C Vehicle Make/Model: Honda Fit
Insurance Company : AIG Policy No. 7210081736-01
Name of Registered Owner : Company / Individual Ho Chor Han (He Chultan)
ID of Registered Owner : Co Reg No: _____ Owner's NRIC No: S8120012B
: Co Contact No: _____ Owner's Contact No: 98627135
DRIVER'S Name : Ho Chor Han (He Ch^{Han}) DRIVER'S NRIC No: S8120012B
DRIVER'S Date of Birth : 10/07/1981 DRIVER'S License Pass Date 23/05/2007
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Owner
DRIVER'S Address : 98 Edgedale Plains #14-40 S(828689)
DRIVER'S Contact No/Alt No : 1) 98627135 2) _____
DRIVER'S Occupation : INDOOR OUTDOOR (eg. working inside or outside of an ofc)
Email Address : desmond.hch@gmail.com
Weather & Road Surface : CLEAR & DRY RAINING & WET AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including Driver): 1 Passenger Name: _____ Gender: M/F
Was the accident reported to the police? YES \ NO Passenger Name: _____ Gender: M/F
Was there any video Captured by car camera: YES \ NO Any Injuries: YES / NO Injured Name: Ho Chor Han (He Chultan)
Exact purpose for which vehicle was being used at the time of accident: Private Use \ Work purpose Injured Name: _____

Other Party Driver's Particulars (if any)

Vehicle Reg No: <u>GBD9000X</u>	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

Other Party Driver's Particulars (if any)

Vehicle Reg No: _____	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____



CERTIFICATE OF INSURANCE

RIDE SHARE PRIVATE VEHICLE

Name of Policyholder : Ho Chor Han
Period of Insurance : 06 Aug 2022 To 15 Jun 2023
Engine No. : LEB1448240
Chassis No. : GP51339760

Vehicle No. : SMR355C
Policy No. : 7210081736-01
Endorsement No. :
Issued Date : 14 Jun 2022 15:01

ABOUT THE COVER

Make/Model : HONDA FIT 1.5 [Sedan]
Engine Capacity/Tonnage : 1,495.00 CC
Sum Insured : Market Value
First Year of Registration : 2019
Driver Restriction : NA
Off Peak Car : No
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.

When the Vehicle is used for the carriage of passenger for hire or reward, such authorised driver must be named under the Policy and registered with an intermediary which facilitates the carriage of passengers for hire or reward.

Age Condition : 35 years old and above
Mileage Condition : Unlimited Mileage
Limitation as to use* :

Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired.
Use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired.

This Policy does not cover

- 1) use for driving tuition, driving test, racing, pace-making, reliability trial or speed-testing;
- 2) use whilst drawing a trailer except the towing (other than for reward) of anyone disabled using a mechanically propelled vehicle; and
- 3) 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 - \$2000 Theft - \$0 Flood Cover - \$2000

Section 2

Property Damage - \$2000

Windscreen : \$100

Named Driver and Excess (where applicable)

Ho Chor Han - \$2000 (Own Damage) \$2000 (Property Damage), \$2000 (Flood Cover)

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

Approved Reporting Centres/ AIG 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

If the vehicle is used for the carriage of passenger for hire or reward, such driver must be named under the Policy and registered with an intermediary which facilitates the carriage of passengers for hire or reward. Should you decide to include any other driver, please contact us. (Company reserves the right to accept/reject the inclusion of any Named Drivers)

Hire Purchase Company/Employer's Loan: Dickson Capital 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).

0503680000

KOH SHIYI

371 ALEXANDRA ROAD #10-14 AIA ALEXANDRA
SINGAPORE 159963 SP-LEGACY

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SHIYI KOH