

NATIONAL Assessment Centre Services: [with 1 job] **SNIP22978002**

Ref: 07/09/2022 15:14	Job description	Date & Time Completed	Done by
File No: NPA/11622008744	SAS e-filing		
Alt No: 66K 4262A	E-mail (with 1st, 2nd, 3rd)		
O.A: 03/09/2022 06:30	1-Motor Claim Form		
	1-Motor W/O (with 1st, 2nd, 3rd, 4th)		
	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Deferred Wksp / INC Ass'n Wksp / QW: ()
P Particulars: Yeh No: **PC 9210A** INC () / Non-INC ()
Owner / Driver: () Tel: ()
Policy No: () Period: () Cover Type: ()
Confirmed by: () Date: () Time: ()
Insured/Driver Liability: () % [Note: Est. Status (W/O): 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: ()
1) Apply for Transport Allowance () / Courtesy Car ()
2) QC Check / Post Repair Inspection ()
3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()
Date: () Time: () Done by: ()

Driver/Owner:	Invoice Preparation Checklist
Contact No:	1) AR: Accident Reporting (\$30)
Damaged Portion:	2) DA: Damage Assessment (\$100) RIC (\$30)
C Checked by (Engr-In-Charge):	3) TP: Towing Fee \$120
	4) FT: Follow-Through Survey \$120
	5) PT: Follow-Through Survey (Resurvey) \$30
	For claimant's use only (over 10 Jan 2005)
	6) TR: Re-inspection \$75
	7) NI: 1st DA + SMRT Survey \$160
	8) NTUC Additional Services
	9) NI: 1st Mobile
	10) NI: 2nd Mobile
	11) NI: 3rd Mobile
	12) NI: 4th Mobile
	13) NI: 5th Mobile
	14) NI: 6th Mobile
	15) NI: 7th Mobile
	16) NI: 8th Mobile
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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	07/09/2022 15:11 (SGT)
Reported by	Driver
Date of Accident	03/09/2022 06:30 (SGT)
Exact Location of Accident	Choa Chu Kang Way, Singapore
Additional Location Information	JUNCTION WITH CHOA CHU KANG AVENUE 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK4263A
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	TORNADO FOOD PTE LTD
Company Reg No	2XXXXX985E
Email Address	tornadofood@hotmail.com
Mobile Phone No	(Phone) +65-93363410
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	K2500
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	Manual
CC	2497

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070112406-02

DRIVER

Name of Driver	TEO KOON NGUAN
NRIC No	SXXXX225H
Date Of Birth	24/12/1964
Occupation	Outdoor

Date Of Driving Pass	10/01/2003
Driving experience	19 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93363410
Alt. Phone Number	-
Email Address	tornadofood@hotmail.com
Address	BLK 120 GEYLANG EAST CENTRAL #07-52
Address complement	-
Postcode	380120
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 - 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?	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

PLEASE REFER TO SKETCH PLAN

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	PC9210X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

IMPORTANT NOTICE

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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

Witnessed by Reporting Centre Personnel

Sketch Plan

40A CHU KANG WAY / 40A CHU KANG AVE 1 JURONG



A - GBR 4263A



B - PC 9210A

Describe Circumstances of the Accident

My lorry was stationary suddenly I felt
a great impact from the rear. I came out
and discovered a van PL 9218X had hit into
my rear portion of my vehicle.

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 Centre
Personnel

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 03 / 09 / 2022 (dd/mm/yy) Time of Accident: 06 : 30 (24-HR-FORMAT)

Vehicle No.: GBK4263A Vehicle Make & Model: KIA K2500

*Transmission : ☒ Manual ☐ Auto *C.c : 2497

Exact location of Accident: CHOA CHU KANG WAY & CHOA CHU KANG AVENUE 1 JUNCTION

Policyholder's Name: TORNADO FOOD PTE LTD NRIC/FIN/REG No.: 200505985E

*Policyholder's email address : TORNADOFOOD@HOTMAIL.COM

Driver's Name: TEO KOON NGUAN NRIC/FIN/REG No.: S1712225H

*Driver's email address : TORNADOFOOD@HOTMAIL.COM

Driver's Contact No.: 93363410 Company Contact No (If any): _____

Date of birth: 24/12/1964 Driving Pass Date: 10/01/2003

Driver's Address: BLK 120 GEYLANG EAST CENTRAL, #07-52, SINGAPORE (380120)

Insurance Company: AIG

Policy No.: 2070112406-02 Type of Coverage: Comprehensive / Third Party / Third Party, Fire & Theft

Relationship between Owner & Driver: (Please **CIRCLE** one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: _____

What do you wish to claim? (Please **TICK** one only)

☐ Own Insurance ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Type of Accident

☐ Chain Collision ☒ Head To Rear ☐ Side Swipe ☐ Other _____

Occupation (nature job) ☐ Indoor ☒ Outdoor *No. of Passengers / Including Driver): 1

*Passenger Name: _____ Gender: Male / Female

*Passenger Name: _____ Gender: Male / Female

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your car Car camera? ☐ Yes ☒ No

Any Injuries: ☐ Yes ☒ No (If YES) Injured Person' Name: _____

Injuries Sustain : _____ Injured Person in Which Vehicle: _____

Police Report filed: ☐ Yes ☒ No (If YES) Which Police Station: _____

The Other Party (S) Details:

1. Driver's Name / IC No: _____ Vehicle No: PC9210X

Driver's Contact No: _____ Insurance Company : _____

2. Driver's Name / IC No (If Any): _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company : _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: MY CAR CONSULTANT PTE LTD Contact No: 83447681



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : Tornado Food Pte Ltd
Period of Insurance : 28 Jul 2022 To 27 Jul 2023
Engine No. : D4CBJ699427
Chassis No. : KNCSJX76LK7327897

Vehicle No. : GBK4263A
Policy No. : 2070112406-02
Endorsement No. :
Issued Date : 07 Jul 2022 12:36

ABOUT THE COVER

Make/Model : KIA K2500
Engine Capacity/Tonnage : 1.6 Tonnage
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2020
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 S\$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*

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)

1. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000
2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800
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: 20 Leng Kee Rd Singapore 159094 64708600
5. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
6. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

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: HL Bank

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).

0500710050

FULCO-CORP SALES

22 UBI ROAD 4 FULCO BUILDING
SINGAPORE 408617 ANSP - MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 985E

Vehicle Details

Vehicle No.: GBK4263A
Vehicle to be Exported: Yes
Intended Deregistration Date: 06 Sep 2022
Vehicle Make: KIA
Vehicle Model: K2500 6MT
Primary Colour: Blue
Manufacturing Year: 2018
Engine No.: D4CBJ699427
Chassis No.: KNCSJX76LK7327897
Maximum Power Output: -
Open Market Value: \$31,390.00
Original Registration Date: 22 Jul 2020
First Registration Date: 22 Jul 2020
Transfer Count: 0
Actual ARF Paid: \$1,570.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 21 Jul 2030
COE Category: C - Goods Vehicle & Bus
COE Period(Years): 10
QP Paid: \$22,002.00
COE Rebate Amount: \$17,323.00
Total Rebate Amount: \$17,323.00

The information contained herein is correct as at 06 Sep 2022

OK