

NATIONAL Assessment Centre Services

Date In: 12/10/2022	Job description	Date & Time Completed	Done by
Ref No: NA/ AIG 22010082/13	SAS e-filing		
Veh No: SLT 5946 R	E-mail (within 8hrs. AIC 2hrs)		
D.O.A: 12/10/2022 10:45	i-Motor Claim Form		
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs. TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SNC 3227 L	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

NA 22028 33	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		1st Bill	Add Bill
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$30)			
Contact No:	3) TF : 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)			
	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 \$0			
	Invoice dated	Fee Charged		

Cat. 1:

Cat. 2 / 3:

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	12/10/2022 16:30 (SGT)
Reported by	Both
Date of Accident	12/10/2022 10:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PENANG RD & PENANG LANG JUNC
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT5946R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LO CHOON LIANG(LUO JUNLIANG)
NRIC No	SXXXX554E
Email Address	ivanlo_lights@yahoo.com.sg
Mobile Phone No	(Phone) +65-96548583
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1496

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1700071772-04

DRIVER

Name of Driver	LO CHOON LIANG(LUO JUNLIANG)
NRIC No	SXXXX554E
Date Of Birth	02/07/1973
Occupation	Indoor

Date Of Driving Pass	20/06/1995
Driving experience	27 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96548583
Alt. Phone Number	-
Email Address	ivanlo_lights@yahoo.com.sg
Address	BLK 127 PASIR RIS GROVE
Address complement	#04-05
Postcode	518178
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)	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

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	SNC3227L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	JUMANI BIN SUPANGAT

NRIC No	SXXXX838E
Contact Number	(Phone) +65-97853107
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

ACCIDENT STATEMENT

ACCIDENT DATE: (12/10/22) (DD/MM/YYYY), TIME: (10:45) (HH:MM)

LOCATION: PENANG RD A, PENANG LANG JUNG

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLT5946R
b) INSURANCE COMPANY: AIG
c) POLICY NUMBER: 1700071772-04
d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: MINI COOPER R50 (1996)
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) NO
IF NO, PLEASE STATE (THIRD PARTY CLAIM) REPORTING ONLY

2. INSURED / POLICY HOLDER

- A) NAME: LO CHON LIANG (LUO JUNLIANG) (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 57353554E CONTACT: 96548583
c) ADDRESS: BK 127 PASIR RIS GROVE
H04-05 (518178)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

*d) DATE OF BIRTH: (02/07/1973) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 20/06/1995

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) NO

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO) NO

7. a) REPORTED TO POLICE (YES / NO) NO

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SNC3227L MODEL: _____
b) DRIVER'S NAME: JUMANI BIN SUPANGAT
c) NRIC/FIN/PASSPORT: 51382838E CONTACT: 97853107

9. THIRD PARTY VEHICLE

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

Email = ivanlo_lights@yahoo.com.sg

fax = _____

VIDEO = Yes, with workshop

SKETCH PLAN

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

[Signature]
12/10/22

Policyholder's Signature / Date & Time

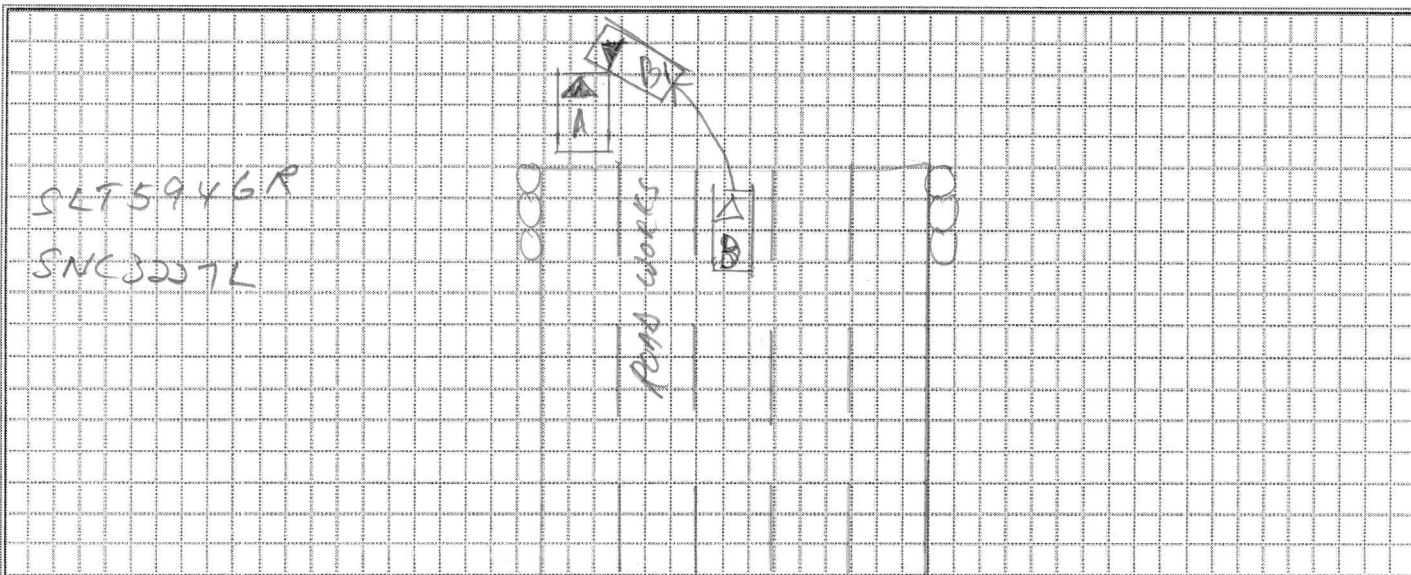
[Signature]
12/10/22

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

[Signature]
12/10/22

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

Sketch Plan



Describe Circumstance of the Accident

I was travelling straight along Penang Road on the extreme left straight/turning left lane. Suddenly veh B from the 3rd straight lane make a left turn into Penang Lane and hit onto my veh.


Declaration

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


12/10/22

Policyholder's Signature / Date & Time

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


12/10/22
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)



N 37% 12:43

AIGPOLI...T5946R-1

CERTIFICATE OF INSURANCE

VEHICLE

: LO CHOON LIANG (LUO JUNLIANG)
: 01 Nov 2021 To 31 Oct 2022
: LEB5962352
: RU31262335

Vehicle No. : SLT5946R
Policy No. : 1700071772-04
Endorsement No. :
Issued Date : 28 Sep 2021

: HONDA Vezel Hybrid
ge : 1,496.00 CC Sum Insured : Market Value First Year of Registration : 2017
: NA Off Peak Car : No Insuring with COE/PAF : Yes
Persons Entitled to Drive* :

in the Policyholder's order or with his/her permission,
holder or any authorised driver only if he/she meets the specified age condition.

at \$3,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

35 years old and above Mileage Condition : Unlimited Mileage

insurance purposes and for the Policyholder's business.
are or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or
connection with Motor Trade.

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
is included under these headings.

heft • \$0 Flood Cover • \$600

SS (where applicable)

MVG • \$600 (Own Damage), \$600 (Flood Cover)

NG CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

authorised Repairers (For claims related repairs)
can be carried out at the repairer of Your choice (unless specifically excluded by Us).
D 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
load "AIG SG" from iTunes or Google Play.

y/Employer's Loan: United Overseas Bank Limited

high 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
ia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

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

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AIGSGMOBILEAPP

g 5079120 | T +65 6419 3300 | www.aig.sg

AIG Asia Pacific Insurance Pte. Ltd.

TO HOTLINE: +65 6338 6200

HIS DOCUMENT IN YOUR CAR AT ALL TIMES.

Auto Emergency Hotline provide for you? What should I do in the event of an accident?

