

NATIONAL Assessment Centre Services (416) 291-2222 **SJY0822AK001**

Date In: 20/10/2022 11:58	Job Description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NB08/10/22010408/1	T-toll (while still A/C 2011)		
Vehicle: SJZ 1889L	i-Motor Claim Form		
D.O.A: 19/10/2022 15:50	i-Motor W/O (while OD still on line)		
CO: TP Reporting Only	i-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass't Report by Fax - Hand to Owner/Whse		

Preferred Wksp / INC Assgn Wksp / CW: () Tel: () Fax: ()

TP Particulars: Vch No: **SJY 8463U** INC () / Non-INC ()

Owner / Driver: () Tel: ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Title: ()

Insured Driver Liability: () (Note: List Status (WO): 100-3031, 2-21-79%, 3-80-100%)

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 reporter.

() Total Loss Cost: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks: () (INC Ref: 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: ()

Next Steps / Actions: ()

N/A 2029-27	Invoice Preparation Checklist		Amount Paid \$
Important Particulars:	1) AR: Accident Reporting (330)		
Name of Owner:	2) DA: Damage Assessment (310) INC (35)		
Contact No:	3) TP: Towing Fee (20/54)		
Damaged Portion:	4) PT: Yellow Through Survey (150)		
Checked by (Engr-In-Charge):	5) TR: Through Survey (220)		
Reported Damages:	6) TR: Inspection (37)		
	7) NI: NI/DA + SMPT Survey (240)		
	8) NTUC Additional Fee (20)		
	9) NI: Courtesy Car / Transport Allowance (5)		
	10) NI: Repair Coordination (15)		
	11) NI: Post Repair Inspection (20)		
	12) NI: DV / Critical Excess Coordination (5)		
	13) NI: TP / Critical Excess Coordination (20)		
	14) NI: Drive Home (10)		
	Invoice Date: () 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	20/10/2022 11:58 (SGT)
Reported by	Both
Date of Accident	19/10/2022 15:50 (SGT)
Exact Location of Accident	Woodlands, Singapore
Additional Location Information	WOODLANDS CHECK POINT TOWARDS JOHOR BAHRU
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ1489L
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	MUHAMMAD DANISH IBRAHIM BIN SULAIMAN
NRIC No	SXXXX538C
Email Address	danishibrahim1995@gmail.com
Mobile Phone No	(Phone) +65-91133349
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	325i
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	2497

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220101011

DRIVER

Name of Driver	MUHAMMAD DANISH IBRAHIM BIN SULAIMAN
NRIC No	SXXXX538C
Date Of Birth	11/02/1995
Occupation	Outdoor

Date Of Driving Pass	03/01/2015
Driving experience	7 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91133349
Alt. Phone Number	-
Email Address	danishibrahim1995@gmail.com
Address	BLK 754 PASIR RIS STREET 71 #02-122
Address complement	-
Postcode	510754
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 - Change/cross lane
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)	3
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	NURUL SALIZA BTE ROHAIZAD
Gender	Female

PASSENGER 2

Name	IDREES SALAHUDDIN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT G/20221020/7021

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	SJY8463U
Vehicle Manufacturer	Honda
Vehicle Model	Fit
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHEW KAI LING
NRIC No	SXXX032D
Contact Number	(Phone) +65-81022876
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	MUHAMMAD DANISH IBRAHIM BIN SULAIMAN
Gender	Male
Phone No	(Phone) +65-91133349
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SJZ1489L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	NURUL SALIZA BTE ROHAIZAD
Gender	Female
Phone No	(Phone) +65-93833981
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SJZ1489L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 3

Name of injured person	IDREES SALAHUDDIN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SJZ1489L
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 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 reputate 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 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.

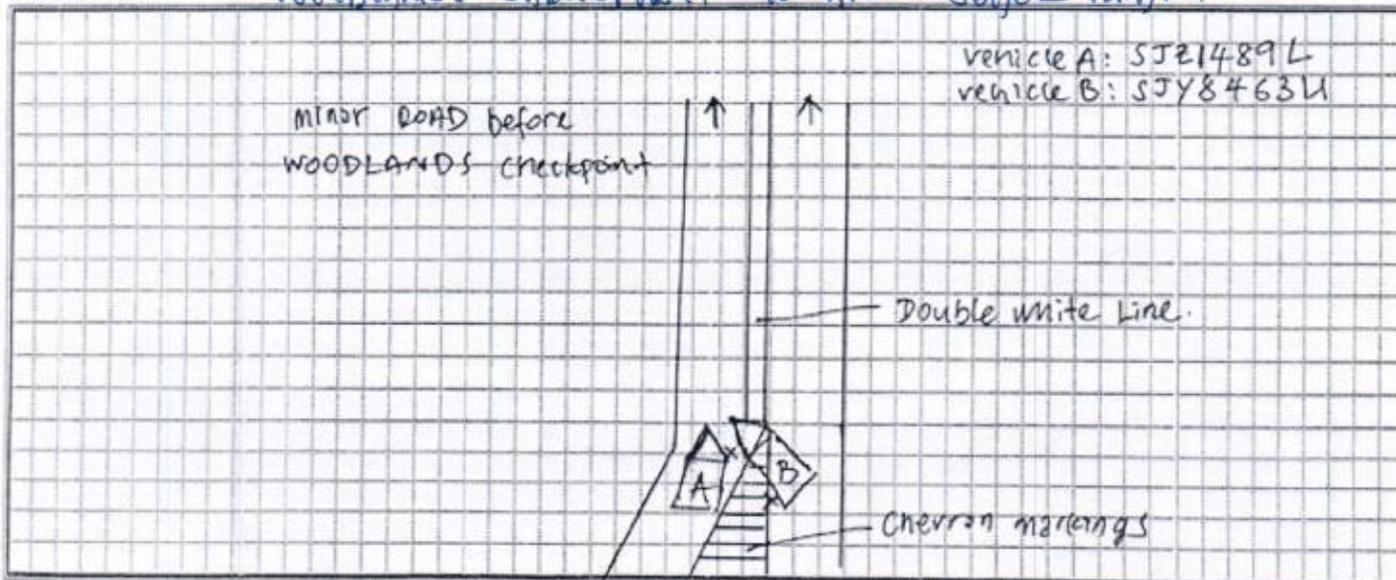
Policyholder's Signature / Date & Time

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

20/10/22
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

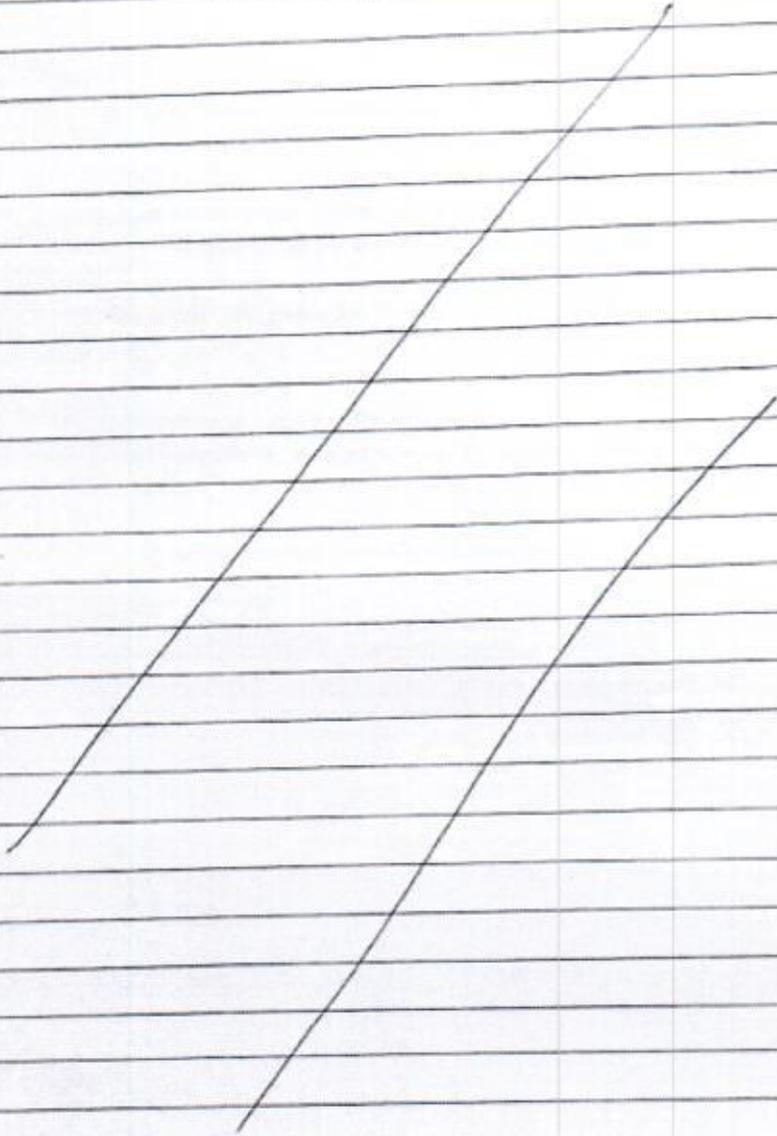
Sketch Plan

WOODLANDS CHECKPOINT TOWARDS JALOR PAU



Describe Circumstance of the Accident

Please refer to police report CR/20221020/7021



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

20/10/2022

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



**SINGAPORE
POLICE FORCE**



G/20221020/7021

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POLICE REPORT (NP299)

Report No. G/20221020/7021

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 20/10/2022 10:29	Vide Report No.	Station Diary No.
Name Of Informant MUHAMMAD DANISH IBRAHIM BIN SULAIMAN	Address 754 PASIR RIS STREET 71 #02-122 SINGAPORE 510754	
ID Type / ID No. NRIC NO / S9504538C	Contact No. Home/Office:	Mobile: 91133349
Nationality SINGAPORE CITIZEN	Email Address danishibrahim1995@gmail.com	
Occupation Petroleum and natural gas refining plant operator	Sex Male	Age 27
Institution/School Name	Date of Birth 11/02/1995	Race Javanese
Date/Time Of Incident 19/10/2022 15:50 - 19/10/2022 15:55	Location Of Incident 754 PASIR RIS STREET 71 #02-122 SINGAPORE 510754	

Brief details.

Incident took place before entering woodlands checkpoint towards Johor Bahru. I form up at the overhead bridge from BKE and traffic had already built up. I was travelling on the left lane going straight, a blue Honda Fit (SJY8463U) crossed over the chevron line and double white line from my right and came into my lane and bumped into my front right bumper. I immediately slammed on my brakes and injuries occurred to me, my wife and my son. I tried to leave the car to check on the other party and tried

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/10/2022 10:29
Officer In-Charge Of Case:	Classification Of Case:



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20221020/7021

to exchange details and take photos of the incident. Instead, the driver continued to inch forward and to enter my lane. We did exchange particulars but driver refused to accept that she isn't allowed to cross the chevron and double white line and claimed other drivers do it as well. That is all.

Subjects Involved			
Suspect			
Person Name	Chew Kai Ling		
ID Type	NRIC NO	ID No	S8467032D
Gender	Female	Age	38-38
Race	Chinese	Language	Malay
Occupation	Unemployed	Address	471 Sembawang drive #11-431 SINGAPORE 750471
Mobile No	81022876	Complexion	Fair
Build	Slim	Height About	165cm
Attire Last Worn	Black polo t shirt	Hair Colour	Black
Hair Style	Medium-Straight	Relation To Informant	Nil
Habits & Oddities	Abit slouching		
Victim			
Person Name	MUHAMMAD DANISH IBRAHIM BIN SULAIMAN		
ID Type	NRIC NO	ID No	S9504538C
Gender	Male	Age	27
Race	Javanese	Language	English
Occupation	Petroleum and natural gas refining plant operator	Address	754 PASIR RIS STREET 71 #02-122 SINGAPORE 510754

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:
The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
20/10/2022 10:29

Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20221020/7021

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20221020/7021

Mobile No	91133349	Is Informant A Victim?	Yes
Person Name	Nurul Saliza Bte Rohaizad		
ID Type	NRIC NO	ID No	S9502392D
Gender	Female	Age	27
Race	Malay	Language	English
Occupation	Housewife	Address	754 71 #02-122 SINGAPORE 510754
Mobile No	93833981	Relation To Informant	Wife
Person Name	Idrees Salahuddin		
ID Type	NRIC NO	ID No	T2100591B
Gender	Male	Age	1
Race	Javanese	Language	English
Occupation	Unemployed	Address	754 71 #02-122 SINGAPORE 510754
Relation To Informant	Son		
Person Name	MUHAMMAD DANISH IBRAHIM BIN SULAIMAN (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/10/2022 10:29
Officer In-Charge Of Case:	Classification Of Case:

Date of Accident : 19/10/2022 Accident Time: 1550 (24-HR-Format)
 Accident Place : WOODLANDS OFFICE PARK BOWARAS JB
 Vehicle No. (Car Plate No.) : SJZ 1489 L Make/Model: Bmw 325i coupe
 Insurance Company : AIG Policy No. _____
 Owner or Company Name / IC No. : MUHAMMAD DANISH IBRAHIM BIN SULAIMAN
 Owner or Company Contact No. : _____ Owner's Hp 91133349 Company Tel _____
 DRIVER'S Name / IC No. : AJ ABU K 99504538 C
 DRIVER'S Date Of Birth : 11/2/1995 DRIVER'S License Pass Date 03/01/2015
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : 754 PASIR RIS STREET 71 #02-122 S(510754)
 DRIVER'S Contact No / Alt No. : 1) _____ 2) _____
 DRIVER'S Occupation : INDOOR OUTDOOR (e.g. working inside or outside office)
 Email Address : danishibrahim1995@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): 03
 Was there any video Captured by car camera: YES NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): Yes - Neck & Back

Other Party Driver's Particular (if any)

Vehicle No: <u>SJY 8463 U</u>	Vehicle No: _____
Vehicle Make/Model: <u>HONDA FIT</u>	Vehicle Make/Model: _____
Name Driver: <u>Chow Kai Ling</u>	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:

Nurul Saliza (female)
Idrees Salihuddin (male).



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : MUHAMMAD DANISH IBRAHIM BIN SULAIMAN
Period of Insurance : 04 Sep 2022 To 03 Sep 2023
Engine No. : 11387442N52B25AF
Chassis No. : WBAKE32030E447060

Vehicle No. : SJZ1489L
Policy No. : 7220101011
Endorsement No. :
Issued Date : 02 Sep 2022 17:25

ABOUT THE COVER

Make/Model : BMW 325I COUPE SR XL
Engine Capacity/Tonnage : 2,497.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2010
Insuring with COE/PARF : Yes

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 S\$53,000 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
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, driving test, racing, pace-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.

Loss of Use 1500cc - 1600cc Optional

* 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 - \$600

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

MUHAMMAD DANISH IBRAHIM BIN SULAIMAN

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

Hire Purchase Company/Employer's Loan: Maybank Singapore Limited

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).

0502368000

TH INSURANCE SPECIALIST AGENCY

71 BUKIT BATOK CRESCENT #11-07 PRESTIGE CENTRE
 SINGAPORE 658071

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Ying Ling Eileen Goh