

# NATIONAL Assessment Centre Services

(Ref: 1-24-12)

210822AP0003

Date In: 26/11/2022 12/18

Ref No: NPA/210822/05017

Veh No: SCA 91911

D.O.A: 28/10/2022 10:36

OD: TP Reporting Only

TP Insurer:

Job description

SAS e-filing

E-mail (within 2hrs, A/C 2hrs)

I-Motor Claim Form

I-Motor W/O (within 24 hrs, A/C 2hrs)

I-Photo Uploaded

Assessment/Survey Report

Ass't Report by Fax / Hand to Owner/Whse

Date & Time Completed

Done by

Preferred Wkap / INC Assgn Wkap / CW: (

Tel:

Fax:

TP Particulars:

Veh No: GBH 8943H

INC ( ) / Non-INC ( )

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured Driver Liability: (

%)

(Note: Bst 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 repeller.

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

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

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:

## Invoice Preparation Checklist

1) AK: Accident Reporting (\$200)

2) DA: Damage Assessment (\$1000) INC (\$65)

3) TP: Towing Fee \$20/\$40

4) PF: Follow-Through Survey \$120

5) PI: Follow-Through Survey (Resurvey) \$20

Resurvey Fee (within 24 hrs, A/C 2 hrs)

6) TR: Re-inspection \$75

7) NI: NI/DA + EMPL Survey \$140

8) NTUC Additional Services

9) DV: DV / Collect Excess Coordination \$5

10) DV: DV / Collect Excess Coordination \$10

11) DV: DV / Collect Excess Coordination \$20

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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	25/10/2022 12:18 (SGT)
Reported by	Driver
Date of Accident	23/10/2022 10:36 (SGT)
Exact Location of Accident	Sunrise Ave, Singapore
Additional Location Information	BETWEEN HOUSE 120-118
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA9191L
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM KONG TING
NRIC No	SXXXX513H
Email Address	lwhywhy3009@gmail.com
Mobile Phone No	(Phone) +65-98221388
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	KICKS PREMIUM
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	1198

### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070115930-01

### DRIVER

Name of Driver	LIM YIN YI
NRIC No	SXXXX978B
Date Of Birth	30/09/1998
Occupation	Indoor

Date Of Driving Pass	02/02/2019
Driving experience	3 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-98281988
Alt. Phone Number	-
Email Address	lwhywhy3009@gmail.com
Address	116 SUNRISE AVENUE
Address complement	-
Postcode	806729
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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 - Major/Minor Rd
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?	Yes
Reasons for not uploading a video of the accident	WITH OWNER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBH8943K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-

Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	India International Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



## 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

Witnessed by Reporting Centre Personnel

### Sketch Plan

120-118 SUNRISE AVENUE



On 23.10.2022 about 10:36am, I was travelling along 120-118  
Sunrise Avenue, I was going straight, suddenly Vehicle B dash out and hit  
my car right portion.

We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre Personnel



3

Date of Accident : 23.10.2022 Accident Time : 10:36am (24-HR-Format)

Who reported the accident? : Owner / Driver / Both

Accident Place : along Sunrise Avenue, 120-118 (between)

Vehicle No (Car Plate No) : SKA 9191L Make/Model: NISSAN KICKS PREMIUM 1.2L

Insurance Company : AIG Policy No: 2070115930-01

Fleet Policy : YES / NO

Type of Coverage : Comprehensive / Third Party / Third Party Fire & Theft

Name of Owner / IC No : LIM KONG TING (S1516513H)

Owner Contact No : 9822 1388 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_

Driver Name / IC No : LIM YIN YI S9834978B

Driver's Date of Birth : 30.09.1998 Driver's License Pass Date: 02.02.2019

Relationship of Driver : Spouse / Parents / Children / Sibling / Employee / Other: \_\_\_\_\_

Driver's Address : 116 Sunrise Avenue Singapore 806729

Driver's Contact No : 1) 9828 1988 2) \_\_\_\_\_

Driver's Occupation : INDOOR / OUTDOOR (e.g. working inside or outside office)

Email Address : LWHYWHY3009@GMAIL.COM

Weather & Road Surface : CLEAR & DRY / RAINING & WET / AFTER RAIN & WET

Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance

Number of Passenger(include Driver) : 1 person (Driver)

Was ther any video footage ? : YES / NO

Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose

Any injury (If Yes, Pls State) : NO

**Other Party Driver's Particular (if any)**

VEH B : <u>G1BH 8943K (II)</u>	Name & Contact No: _____
VEH C : _____	Name & Contact No: _____
VEH D : _____	Name & Contact No: _____
VEH E : _____	Name & Contact No: _____

\*NEW - Passenger's Name & Gender:



## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Lim Kong Ting  
 Period of Insurance : 06 Aug 2022 To 05 Aug 2023  
 Engine No. : HR12361513C  
 Chassis No. : MNTFEAP15Z0000454

Vehicle No. : SKA9191L  
 Policy No. : 2070115930-01  
 Endorsement No. :  
 Issued Date : 07 Jun 2022 10:17

## ABOUT THE COVER

Make/Model : NISSAN Kicks E-Power  
 Engine Capacity/Tonnage : 1,198.00 CC  
 Driver Restriction : NA  
 Person or Classes of Persons Entitled to Drive\* :  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2020  
 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\$33,000 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

\* 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 - \$800 Theft - \$0 Flood Cover - \$800

## Section 2

Property Damage - \$0

Windscreen : \$100

## Named Driver and Excess (where applicable)

Lim Kong Ting - \$800 (Own Damage), \$800 (Flood Cover)

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

1. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
2. TC AutoClinic Add: No. 1, Sixth Lok Yang Road Singapore 828099 82822212
3. Autolution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909886
4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
5. Tan Chong Motor Sales Add: 19 Lorong 8 Toa Payoh Singapore 319255 63570753

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](http://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: Standard Chartered Bank (Singapore) Limited

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).

0500610376

TAN CHONG CREDIT PTE LTD-OPH

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589623 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPMLU