

# NATIONAL Assessment Centre Services

Date In 10/01/2023	Job description	Date & Time Completed	Done by
Ref No NA/16 23000 291 /d4	SAS e-filing		
Veh No SLT1770G	E-mail (within 8hrs. APT 2hrs)		
DOA 09/01/2023 09:50	i-Motor Claim Form		
OD/ TP/ Reporting Only	i-Motor W/O (Within: OD 2hrs. TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: GBB 874K	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

NA2300085	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
		1st Bill	Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
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 30		
	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	10/01/2023 08:37 (SGT)
Reported by	Driver
Date of Accident	09/01/2023 09:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BKE TOWARDS SLE BEFORE WOODLANDS AVENUE 12 EXIT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT1770G
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HOCK CHUAN HENG CAR RENTAL & T RADING PTE LTD
Company Reg No	1XXXXX328Z
Email Address	hong81861076@gmail.com
Mobile Phone No	(Phone) +65-90697882
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1598

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	0999993565-01/1220003950

#### DRIVER

Name of Driver	WO CHIEN CHAI
NRIC No	GXXXX038N



Date Of Driving Pass .....	09/10/2013
Driving experience .....	9 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90697882
Alt. Phone Number .....	-
Email Address .....	hong81861076@gmail.com
Address .....	BLOK 602A PUNGGOL CENTRAL
Address complement .....	# 08-671
Postcode .....	821602
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 THE ATTACHED STATEMENT

#### 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 .....	GBB874K
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	

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

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 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

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

### Sketch Plan

Vehicle A: SLT A70G  
Vehicle B: GBB J4K

BIKE Two SLT before Woodland Ave 12 East.



Describe Circumstance of the Accident

On the stated date & time, I, vehicle 'A' was traveling along the  
stated route. Due to heavy <sup>traffic</sup> and the vehicle was slow moving. I was  
stationary at the point of time due to front vehicle stopped. Moments later,  
I felt the impact from behind. I then realised that the vehicle 'B'  
hit into my vehicle rear portion.

Declaration

I/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  
(Name as in NRIC/ID card)





福泉興汽車出租及貿易私人有限公司

HOCK CHUAN HENG CAR RENTAL & TRADING PTE LTD.

No. 4 Petain Road, Petain Court Singapore 208086 Tel: 6298 1936, 6294 0246, 6294 9170 Fax: 6298 3864

**HIRER'S PARTICULARS**  
If Different From  
Section ①

I/We

of

S

Tel:

hereinafter called "the Hirer" hereby confirm having agreed to hire this day from HOCK CHUAN HENG CAR RENTAL & TRADING PTE LTD hereinafter called "the Owner" the undermentioned Vehicle at the rental fees as shown below and I further agree that I shall be held responsible for:-

**a) THIRD PARTY ONLY MOTOR VEHICLE COVERAGE**

the Excess which is the maximum amount of \$1500 to cover for any third party damage or injury claims and also bear the full cost of any damage caused to the hired Vehicle resulting from any single accident including loss from inability to let the same Vehicle out on hire or loss resulting from theft and destruction of the Vehicle.

**b) COMPREHENSIVE MOTOR VEHICLE COVERAGE**

the Excess which is the maximum amount of \$2000 for any damage caused to the hired Vehicle from any single accident or any loss resulting from third party damage claim, injury claim, theft or destruction of the Vehicle.

c) Only persons above 24 years of age with more than 2 years driving experience, authorised licensed and signing this agreement may drive the vehicle.

whether or not such damage or loss is by person/persons known or unknown to me or by negligence or any breach by me of the Terms and Conditions of Hire, hereinafter mentioned and printed at the back hereof:

Vehicle Regn No. 車輛註冊號碼		SLT1770G		Rental Agreement 合同號碼		No. H	
Section ① Hirer's And/Or Driver's Particulars 租車者/駕駛員個人記錄				租出日期及時間			
姓名 Name: Wu Chien Chai				Date & Time OUT 07/01/2023 12:40pm			
地址 Address: BLK 602A Runggol Central #08-672 S (821602)				交車日期及時間			
				Date & Time IN 14/01/2023 1:00pm			
S				Chargeable		Rates Amount	
				14		天 Days @ \$ 120	
居民證/護照號碼 I/C No./Passport No: G2085038N				駕駛執照號碼 Driving Licence No: G2085038N		星期 Weeks @ \$	
居民證/護照種類 Type of I/C/Passport: Local				Pass 日期 Pass Date: 11/03/2019		月 Months @ \$	
出生日期 Date of Birth: 26/09/1989				發出地 Place of Issue: Singapore			
三號保險底金 \$1500/-				一號保險底金 \$2000/-		保險 Insurance	
a) Third Party Only Policy Excess \$1500/-				b) Comprehensive Policy Excess \$2000/-			
車輛必須歸還車主於 Vehicle Must Be Returned To Owner's Office By:				總計 Total Charge		1,680	
備註與付款記錄 Remarks & Payment Records				按金 Security Deposit			
				總金額 Total Payable			
				來銀 Amount Paid			
				送車/費 Delivery Fees			
				收車費用 Collection Fees/Misc.			
<b>IMPORTANT!</b> For Singapore Use only.				超過/小時 Extra Hours @ \$			
出車油箱 Fuel Tank OUT		E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F		出車油箱 Fuel Tank IN		E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F	
車牌號碼 Vehicle No: 1)				起 From:		至 To:	
車牌號碼 Vehicle No: 2)				起 From:		至 To:	
工具 Tools		輪胎 Spare Tyre		裝飾品 Accessories		加額費用 Total Additional Charges	
車輛發出人 Vehicle Issued By:		車輛接收人 Vehicle Collected By:					
<b>NOTE: 註</b>				總計 Grand Total			
租車者或司機必須付所有停車, 違反交通及噴過量黑煙法例負起一切的責任。 HIRER AND/OR DRIVER IS LIABLE FOR ALL PARKING, TRAFFIC AND SMOKY EXHAUST VIOLATION.							

租車者不准載沙或石灰  
HIRER MUST NOT CARRY SAND AND CEMENT ON THE VEHICLE  
PLS CHECK ENGINE OIL AND RADIATOR WATER EVERY MORNING

我/我們同意以上及後頁租車公司所列的條規與條件。

I/We have read and agree to the terms and conditions on both sides of this rental agreement.



租車者簽名

日期



## SINGAPORE ACCIDENT STATEMENT

Accident Date: 9/1/2023	Time: 9:50	(hh:mm) 24 hr format
Location: BLK 745 SLE before Woodland ave 12 BRT.		
Vehicle Number: SLT 1770 G.		
Insured Name: Hock Chuan Heng Car Rental & Trading Pte Ltd.		
NRIC / FIN: 198004328Z	Contact Number: 91733300	
Make: Toyota	Model: ATE.	
Are you claiming under your own insurance policy for repair to your vehicle?		
( ) Yes If No, Pls select: ( / ) Third Party ( ) Reporting		
Insurance Company: AIG		
Type of Policy: ( / ) Comprehensive ( ) Third Party Fire & Theft ( ) TP Only		
Policy Number: 0999993565-01 / 1220003950		
Name of Driver: Wo Chuan Chai ( ) Same as Insured		
NRIC / FIN: G2085038N		
Contact Number: 90697882		
Date of Birth: 26 Sep 1989		
Driving Pass Date: 11 MAR 2019		
Occupation: ( / ) Indoor ( ) Outdoor		
Gender: ( / ) Male ( ) Female		
Email Address: hong81861076@gmail.com. ( ) NO EMAIL		
Address of Driver: BLK 602A Angkor Central #28-67L S821602		
Was driver an employee of the Insured's Company? ( ) Yes ( / ) No		
If No, Relationship of the Driver with the Insured		
( ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling ( / ) Hired		
Does the Driver Own Any Other Vehicle? ( ) Yes ( / ) No		
If Yes, Vehicle Registration Number of Driver's Own Vehicle		
Insurance Company of Driver's Own Vehicle		
Weather Conditions: ( / ) Clear ( ) Raining ( ) Others		
Road Surface: ( / ) Dry ( ) Wet ( ) Others		
Was any foreign vehicle involved in this accident? ( ) Yes ( / ) No		
Was anybody injured in the accident? ( ) Yes ( / ) No		
If yes, injured detail		
Was there any video captured by Car Camera? ( ) Yes ( / ) No		
Was the Accident reported to the Police? ( ) Yes ( / ) No If yes attach police report		
DETAILS OF 3 <sup>rd</sup> party		
Name / Nric		
Contact		
Veh B: GBB 874 K		
Veh C:		
Veh D:		
Veh E:		
Veh F:		

Driver Only





# CERTIFICATE OF INSURANCE

## COMMERCIAL AUTO COMPREHENSIVE

Name of Individual Policyholder : HOCK CHUAN HENG CAR RENTAL & TRADING PTE LTD

Master Policy No./Policy No. : 0999993565-01 / 1220003950

Period of Insurance : 20 Jun 2022 To 19 Jun 2023

Engine No. : 1ZR0A13558

Chassis No. : MR053REH604574295

Vehicle No. : SLT1770G

Endorsement No. :

Issued Date : 23 Jun 2022 10:20

### ABOUT THE COVER

Make/Model : TOYOTA ALTIS 1.6

Engine Capacity/Tonnage : 1598 CC

Driver Restriction : NA

Person or Classes of Persons Entitled to Drive\* :

Any person who is driving on the Policyholder's order or with their permission.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2017

Insuring with COE/PAF : Yes

Age Condition : Driver Restriction applies-Refer to T&C

Mileage Condition :

Limitation as to use\* :

Use for social, domestic, pleasure purposes and business purposes of the Policyholders

Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired.

Use for the carriage of passengers or goods (other than for 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

3) use for the towing of any one disabled mechanically propelled vehicle.

4) use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired; and

5) 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 - \$1200 Theft - \$0 Flood Cover - \$1200

#### Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For 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

Endt 140 applies:

Authorised Driver age has to be at least 21 to 69 years old & above with 2 yrs driving experience. Excess \$5000 on All Claims applies for Authorised Driver between 21 to 22 years old and/or with less than

2 years driving experience.

Excess \$3000 on All Claims for Authorised Driver who is above 69 years old.

Hire Purchase Company/Employer's Loan: LAKEVIEW CREDIT 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).

0502806000

LIEW OOI LIN MAY

AIG BUILDING, 78 SHENTON WAY #01-K1 GEM ROOM

SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSCANA