

NTUC Assessment Centre Services

Date: 15/02/2023  
 Ref No: NA/AG 23001720/d4  
 Job No: SDZ51T  
 DOA: 15/02/2023 15:15

(D) TP/Reporting Only

Insurer:

Job description	Date & Time Completed	Done by
SAS e-filing		
E-mail (within 4hrs. AM 2hrs)		
i-Motor Claim Form		
i-Motor W/O (Within: OB 2hrs, TP 4hrs)		
i-Photo Uploaded		
Assessment/Survey Report		
Ass't Report by Fax / Hand to Owner/Wksp		

Referred Wksp / INC Assign Wksp / QW: ( )

Particulars: Vch No: **Branches** INC ( ) / Non-INC ( )  
 Tel: ( ) Fax: ( )  
 Owner/Driver: ( )  
 Policy No: ( ) Period: ( ) Cover Type: ( )  
 Confirmed by: ( ) Date: ( ) Time: ( )  
 Insured/Driver Liability: ( )  
 Year of Registration: ( ) % [Note-Bsl. Status (WO): N: 0-20%; P: 21-79%; P: 80-100%]  
 Warranty: YES ( ) / NO ( )  
 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. ( )

Apply for Transport Allowance ( ) / Courtesy Car ( )	Date/Time Completed	Done by
Check / Post Repair Inspection ( )		
Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Time	Actions

Particulars	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Owner:	1) AR: Accident Reporting (\$30);		
No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Portion:	3) TF: Towing Fee \$40/\$45		
Booked by (Engi-In-Charge):	4) FT: Follow-Through Survey \$120		
Comments:-	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) NI: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Coordination \$10		
	*N7: Post Vehicle Inspection \$10		

# 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	15/02/2023 18:13 (SGT)
Reported by	Driver
Date of Accident	15/02/2023 15:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	8 MARSILING IND ESTATE ROAD 3
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SDZ51T

### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TANG PECK LEE WENDY ( ZHENG BOLI WENDY )
NRIC No	SXXXX640H
Email Address	lawsbp@gmail.com
Mobile Phone No	(Phone) +65-96778500
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?	Yes
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	7210008929-02

### DRIVER

Name of Driver	SOH BOON PHENG ( SU WENPING )
NRIC No	SXXXX309B
Date Of Birth	20/04/1981
Occupation	Indoor

Date Of Driving Pass .....	06/08/1999
Driving experience .....	23 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90096622
Alt. Phone Number .....	-
Email Address .....	lawsbp@gmail.com
Address .....	886 UPPER SERANGOON ROAD
Address complement .....	# 17-26
Postcode .....	534732
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Friend
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 .....	Hit by fallen tree / Other objects
Weather Conditions .....	AFTER RAIN
Road Surface .....	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	1
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 .....	BRANCHES
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Government
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**

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5. **Any false reporting may be referred to the Police for investigation**.
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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)**

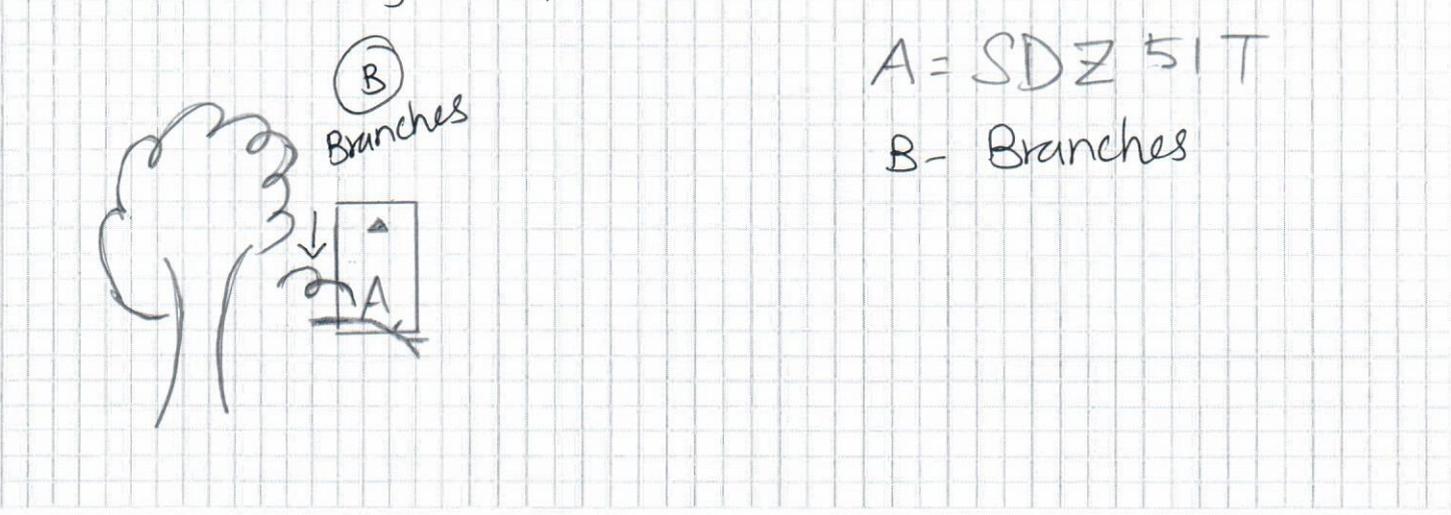
I understand, acknowledge, agree and consent that :

(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 \_\_\_\_\_  
*[Handwritten signature]* *[Handwritten signature]* *[Handwritten signature]* 15/2/23

Sketch Plan 8 Marsiling Ind-Est Road 3



**Describe Circumstances of the Accident**

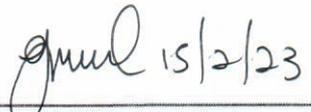
On 15.02.2023 about 15:15hrs, I was stationary along  
8 Marsiling Ind Estate Rd 3. Suddenly, have a branches falling on  
my vehicle's (SDZ 51T) rear windscreen.

**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

 15/2/23  
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

Date of Accident : 15.02.2023 Accident Time : 15:15 (24-HR-Format)

Who reported the accident? : Owner / Driver / Both

Accident Place : 8 Marsiling Ind Estate Rd 3

Vehicle No (Car Plate No) : SDZ 51T Make/Model: Honda Vezel Hybrid

Insurance Company : AIIG Policy No: 7210008929-02

Fleet Policy : YES / NO

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

Name of Owner / IC No : Tang Peck Lee Wendy (S7521640H)

Owner Contact No : 96778500 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_

Driver Name / IC No : Soh Boon Pheng (S8111309B)

Driver's Date of Birth : 20.04.1981 Driver's License Pass Date: 06.08.1999

Relationship of Driver : Spouse / Parents / Children / Sibling / Employee / Other: Friend

Driver's Address : 986 Upper Serangoon Rd #17-26 S 534732

Driver's Contact No : 1) 9009 6622 2) \_\_\_\_\_

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

Email Address : lawsbp@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

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 : Branches Name & Contact No: \_\_\_\_\_

VEH C : \_\_\_\_\_ Name & Contact No: \_\_\_\_\_

VEH D : \_\_\_\_\_ Name & Contact No: \_\_\_\_\_

VEH E : \_\_\_\_\_ Name & Contact No: \_\_\_\_\_

\*NEW - Passenger's Name & Gender:



# CERTIFICATE OF INSURANCE

## AUTOPLAN PRIVATE VEHICLE

**Name of Policyholder** : TANG PECK LEE WENDY (ZHENG BOLI WENDY)  
**Period of Insurance** : 04 Feb 2023 To 03 Feb 2024  
**Engine No.** : L15B4025824  
**Chassis No.** : RU11105821

**Vehicle No.** : SDZ51T  
**Policy No.** : 7210008929-02  
**Endorsement No.** :  
**Issued Date** : 31 Jan 2023 15:22

### ABOUT THE COVER

**Make/Model** : HONDA Vezel Hybrid  
**Engine Capacity/Tonnage** : 1,496.00 CC  
**Driver Restriction** : NA  
**Person or Classes of Persons Entitled to Drive\*** :  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2016  
 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\$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  
**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.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, 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 - \$0 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$100

**Named Driver and Excess (where applicable)**

TANG PECK LEE WENDY (ZHENG BOLI WENDY)

### 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 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 or AIG SG Mobile App. Simply search and download "AIG SG" from Apple App Store or Google Play Store.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

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 1960, Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503982000

KHC HOLDINGS PTE. LTD.

389A BALESTIER ROAD

SINGAPORE 329796

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

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