

NATIONAL Assessment Centre Services (all 1 hrs) **SN0823400002**

Date In: <b>13/04/2023 15:27</b>	Job Description	Date & Time Completed	Done by
Ref No: <b>NAB/AG230028244</b>	SAS e-illing		
Yeh No: <b>SKP 2814R</b>	E-mail (with 2nd, AOC 2nd)		
D.O.A: <b>13/04/2023 12:50</b>	1-Motor Claim Form		
QC: <b>TP</b> Reporting Only	1-Motor W/O (White: OD 2nd, 2nd 1st)		
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: ( ) Tel: ( ) Fax: ( )

TP Particulars: Yeh No: **GBE 3559K**, INC ( ) / Non-INC ( )

Owner / Driver: ( ) Tel: ( )

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

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

Insured/Driver Liability: ( ) % (Note: Hst Status (WO): N: 0-30%, P: 21-72%, F: 30-100%)

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 rep/rep.

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

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

Remarks	INC	Non-INC	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )				
2) QC Check / Post Repair Inspection ( )				
3) Upload Recovery Photo (Repair Cost > \$3000) ( )				

Injury: ( )

Date of Incident: ( )

Location: ( )

<b>NA2301074</b>	Invoice Preparation Charge		
1) AK: Accident Reporting (\$25)			
2) DA: Damage Assessment (\$100)	INC (\$56)		
3) TP: Towing Fee	\$10/\$45		
4) PE: Follow-Through Survey	\$122		
5) PF: Follow-Through Survey (Recovery)	\$30		
6) TR: Re-inspection	\$75		
7) NE: Hst DA + SMRT Survey	\$140		
8) NJUC Additional Services			
9) QW:			
*NB: Courtesy Car / Tel Allowance	\$5		
*NE: Repair Coordination	\$15		
*NF: Post Repair Inspection	\$18		
*NG: DV / Collect Excess Coordination	\$1		
*NH: TP (Non-INC) Upload INC	\$20		
*NI: Liability Move	10		
Invoice Total		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	13/04/2023 15:22 (SGT)
Reported by	Owner
Date of Accident	13/04/2023 12:50 (SGT)
Exact Location of Accident	Upper Changi Rd E, Singapore
Additional Location Information	TOWARDS BEDOK ROAD
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP2814R
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN CHOO GUAN
NRIC No	SXXXX405F
Email Address	henrylim1979@yahoo.com
Mobile Phone No	(Phone) +65-68484683
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Suzuki
Model	S-cross
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	1586

### INSURANCE COMPANY

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

### DRIVER

Name of Driver	TAN CHOO GUAN
NRIC No	SXXXX405F
Date Of Birth	24/12/1931
Occupation	Indoor

Date Of Driving Pass .....	26/02/1962
Driving experience .....	61 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98558353
Alt. Phone Number .....	-
Email Address .....	henrylim1979@yahoo.com
Address .....	505 DUNMAN ROAD #13-04
Address complement .....	-
Postcode .....	439198
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	OWNER
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
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 .....	GBE3559K
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Dyna
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	KHOR CHA HOCK

Contact Number ..... -  
 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 .....	TAN CHOO GUAN
Gender .....	Male
Phone No .....	(Phone) +65-98558353
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SKP2814R
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.
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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.

Tan Chor Guan Tan Chor Guan

*[Signature]* 13/04/2023

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

UPPER CHANGI ROAD EAST TOWARDS BEDOK ROAD



**Describe Circumstances of the Accident**

on 13 Apr 2023 at about 1250pm I was driving along upper Changni Road East toward Bedok Road. I was driving on lane two. My front car stop so i follow suit. Suddenly Veh B GBE 3559K hit on towmy Veh A SKP2814R. I came down and exchange ilk and left.

**Declaration**

We declare the foregoing particulars are true in every respect.

Tan Choo Guan  
Policyholder's Signature / Date & Time

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

[Signature] 13/04/2023  
Witnessed by Reporting Centre Personnel

Date of Accident : 13 Apr 2023 Accident Time: 12:50 (24-HR-Format)  
 Accident Place : Upper Changi Road East to ward Bedok Road  
 Vehicle No. (Car Plate No.) : SKP2814R Make/Model: Suzuki S-CROSS  
 Insurace Company : AIG Policy No: 2100384319-08  
 Owner or Company Name /IC No. : Tan Choo Guan (S0432405F)  
 Owner or Company Contact No. : 68484683 Owner's Hp 98558353 Company Tel  
 DRIVER'S Name / IC No. : Tan Choo Guan  
 DRIVER'S Date Of Birth : 24-12-1931 DRIVER'S License Pass Date 26 Feb 1962  
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
 DRIVER'S Address : 505 Dunman Road # 13-04 Spore 439198  
 DRIVER'S Contact No./ Alt No. : 1) \_\_\_\_\_ 2) \_\_\_\_\_  
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
 Email Address : henrylim1979@yahoo.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): 1  
 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

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

Vehicle No: <u>GBE 3559K</u>	Vehicle No: _____
Vehicle Make/Model: <u>Toyota Dyna</u>	Vehicle Make/Model: _____
Name Driver: <u>Khor Cha Hock</u>	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:



# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Tan Choo Guan  
 Period of Insurance : 28 Aug 2022 To 27 Aug 2023  
 Engine No. : M16A1855281  
 Chassis No. : TSMJYA22S00179347

Vehicle No. : SKP2814R  
 Policy No. : 2100384319-08  
 Endorsement No. :  
 Issued Date : 27 Jul 2022 16:03

### ABOUT THE COVER

Make/Model : SUZUKI S-CROSS  
 Engine Capacity/Tonnage : 1,586.00 CC  
 Driver Restriction : NA  
 Person or Classes of Persons Entitled to Drive\* :  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2014  
 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.

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 - \$3100 Theft - \$0 Flood Cover - \$3100

Section 2  
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Tan Choo Guan - \$3100 (Own Damage), \$3100 (Flood Cover), DR. CHUNG QI YAN - \$600 (Own Damage), \$600 (Flood Cover)

### 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

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).

0030213000  
 AIG ASIA PACIFIC INSURANCE PL

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

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Nur Anisha Amran

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	405F
Vehicle Details	
Vehicle No.:	SKP2814R
Vehicle to be Exported:	No
Intended Deregistration Date:	06 May 2023
Vehicle Make:	SUZUKI
Vehicle Model:	S-CROSS 1.6 GLX 2WD CVT
Primary Colour:	Blue
Manufacturing Year:	2014
Engine No.:	M16A1855281
Chassis No.:	TSMJYA22S00179347
Maximum Power Output:	86.0 kW (115 bhp)
Open Market Value:	\$19,430.00
Original Registration Date:	28 Aug 2014
First Registration Date:	28 Aug 2014
Transfer Count:	0
Actual ARF Paid:	\$9,430.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Aug 2024
PARF Rebate Amount:	\$5,186.00
Intended COE Rebate Details	
COE Expiry Date:	27 Aug 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$64,600.00
COE Rebate Amount:	\$8,439.00
<b>Total Rebate Amount:</b>	<b>\$13,625.00</b>

The information contained herein is correct as at 13 Apr 2023

OK