

# NATIONAL Assessment Centre Services: (part 1 of 2) 5108235P0004

Date In: 25/05/2023 16:15	Job description	Date & Time Completed	Done by
Ref No: NBR/ALG2800.5326/Y	SAS e-tiling		
Veh No: SKK 579Z	E-mail (within 2hrs, A/C 2hrs)		
D.O.A: 25/05/2023 07:50	1-Motor Claim Form		
OD: TP: Reporting Only	1-Motor W/O (Within: OD 2hrs, TP 1hrs)		
	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assgn Wksp / QW: (	Tel:	Fax:
TP Particulars: . . . . . Veh No: XD 3307R	INC ( ) / Non-INC ( )	
Owner / Driver: (	Tel:	
Policy No: ( )	Period: ( )	Cover Type: ( )
Confirmed by: (	Date:	Time:
Insured/Driver Liability: ( )	% (Note: Inc Status (WO): 1: 0-30%, 2: 31-70%, 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 repairer.

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

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

Remarks: (INC to INC: 07880015)	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 Injury: . . . . .

Location: . . . . .

Witness: . . . . .

Police: . . . . .

Insurance: . . . . .

Repairer: . . . . .

Other: . . . . .

Invoice Preparation Charge	
1) AR: Accident Reporting (\$30)	
2) DA: Damage Assessment (\$1000) INC (\$50)	
3) TP: Towing Fee (\$10/\$45)	
4) PF: Follow-Through Survey (\$150)	
5) PT: Follow-Through Survey (Recovery) (\$50)	
6) TR: Redemption (\$75)	
7) NI: New DA + SMART Survey (\$140)	
8) NUC Additional Services	
OD:	
*NI: Courtesy Car / Transport Allowance (\$5)	
*NI: Repair Coordination (\$10)	
*NI: Post Repair Inspection (\$10)	
*NI: EV / Collect Excess Coordination (\$1)	
*TP (H): TP (Non-INC) against INC (\$10)	
*TP (H): TP (H) Motor (\$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	25/05/2023 16:15 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	25/05/2023 07:50 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS TUAS
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNK579Z
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KEN MIZUSAWA
NRIC No	SXXXX574E
Email Address	kenmizusawa@gmail.com
Mobile Phone No	(Phone) +65-91391992
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vios
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	1496

### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7230022857

### DRIVER

Name of Driver	KEN MIZUSAWA
NRIC No	SXXXX574E
Date Of Birth	30/12/1974
Occupation	Indoor

Date Of Driving Pass	26/08/2003
Driving experience	19 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91391992
Alt. Phone Number	-
Email Address	kenmizusawa@gmail.com
Address	7 FLORA DRIVE @07-33
Address complement	DAHLIA PARK CONDOMINIUM
Postcode	507012
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	Side Swipe
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	XD3307R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	KEN MIZUSAWA
Gender .....	Male
Phone No .....	(Phone) +65-91391992
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SNK579Z
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No



### SKETCH PLAN

8. Consent under the Personal Data Protection Act (PDPA)

(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.

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

⑤ ④ ③ ② ①

(A) SUK 5792

(B) XO 3307R

PIE towards Tuais

Describe Circumstance of the Accident

On 25/05/2023 @ 0750 hrs, I was driving my car (SNK 5792) along PIE in the 4th lane from the right. Out of sudden, a truck (XD 3307R) which was travelling on my right side was filtering into my lane without checking the traffic status from his left side and then grazed & brushed over the right portion of my car. I felt uncomfortable after the accident, so I had visited my doctor and was given 2 days MC. Hence, I hereto lodge this report to claim against the truck (XD 3307R)'s insurance for my accident damages.


My car has installed car cam recorder, and I willing to provide the accident scene video footage for investigation purpose.


Declaration

I/We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

  
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)



* VEHICLE NO : SNK 5792		MAKE & MODEL : Tyl. Vios		AUTO / MANUAL	
Date of Accident	25 / 05 / 2023		*C.C: 1496		
Time of Accident	7:50 (AM) PM				
Location of Accident	PIE towards Tuas				
Exact Purpose Usage	Employment / (Private Use) / Private Hire				
NAME OF OWNER :	Ken Mizusawa				
Email: kenmizusawa@gmail.com	HP: 9139 1992		Office :		
Nric / Co. Reg. No.	S7482574E		Fax :		
Claim Type	(Third Party) / Own Damage / Reporting only				
Fleet Policy	Yes / (No)?				
Insurance Co.	AIG Insurance				
Type of Coverage	(Comprehensive) / Third Party / Third Party Fire & Theft				
Policy No.	7230022857				
NAME OF DRIVER :	(As above) / If No :				
Nric No	S7482574E				
Date Of Birth	30 / 12 / 1974				
Any Passenger	Yes / (No)?				
Name of Passenger	-				
Gender of Passenger	Male / Female -				
Occupation	Outdoor / (Indoor)				
Date Of Driving Pass	26 / 08 / 2003				
Gender of Driver	(Male) / Female				
Contact	9139 1992		Home :		
Email	Kenmizusawa@gmail.com				
Address	7 Flora Drive #07-33 Dahlia Park Condominium S(507012)				
Does Driver Own Other Vehicles	(No) / If Yes (Reg. no.):		Insurer:		
Relationship	Employee / If (No): Owner				
Weather Condition	(Clear) / Raining / Other :				
Road Surface	(Dry) / Wet / Other :				
Any Injuries	No / If (Yes): Who? Ken Mizusawa				
Conveyed by Ambulance	(No) / If Yes : Who?				
Police Report	(No) / If Yes : Where?				
Notice Of Intended Prosecution Given?	(No) / If Yes : Who?				
Vehicle B No :	XD 3307 R		Any Passenger: Unknown		
Name Of Driver	Unknown				
Contact	-				
Vehicle C No :			Any Passenger:		
Vehicle D No :			Any Passenger:		
Vehicle E No :			Any Passenger:		
Vehicle F No :			Any Passenger:		
Any Witness:			Witness Contact No.:		
Was There Any Video Capture?	(Yes) / No				
Was There Any Audio Recorded?	Yes / (No)				
Scene Accident Photos Taken?	(Yes) / No				
Person Reporting	Driver / Owner / (Both)				
Original Language Used	(English) / Mandarin / Others :				
Have you been approach by unknow person soliciting (s) / offering accident claims assistance ?	Yes / (No)				





# CERTIFICATE OF INSURANCE

## TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : KEN MIZUSAWA  
Period of Insurance : 17 Mar 2023 To 16 Mar 2024  
Engine No. : 2NR5593622  
Chassis No. : MR2B23F3301251538

Vehicle No. : SNK0579Z  
Policy No. : 7230022857  
Endorsement No. :  
Issued Date : 02 Mar 2023 11:43

### ABOUT THE COVER

Make/Model : TOYOTA VIOS 1.5  
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 : 2023  
Insuring with COE/PAFF : 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

Limitation as to use\* :

Mileage Condition : Unlimited Mileage

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 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 - \$600 Theft - \$0 Flood Cover - \$600

#### Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

KEN MIZUSAWA - \$600 (Own Damage), \$600 (Flood Cover)

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

1. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 2 Pandan Crescent Singapore 128462 Tel: 6631 1188
2. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

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 Apple App Store or Google Play Store.

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

0504667271

INCHCAPE AUTO TOYOTA - BSTU060

33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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

This computer generated document does not require a signature.

Latonia Mae Joy Sio-zo Latonia