NATIONAL Assessment Centre Se	ervices (wef Jan'06)	· ·	1
D	b description	, Date & Time Completed	Done b
Ref No: NA A1923006691 194	SAS e-filing		
Valable Communication	E-mail (within 8hrs. AIC 2hrs)	i	
	-Motor Claim Form		
	-Motor W/O (Within: OD 2hr	e TP 4hrs)	
OD Keporting Only	-Photo Uploaded	1	
	Assessment/Survey Report		
i P insurer:	Ass't Report by Fax / Hand	Owner/Wksn	
Preferred Wksp / INC Assign Wksp / QW: (ax:
	706x. INC(ax:
Owner / Driver: (, 1140 (Tel:	
Policy No: () Period:	(Cover Type: (
Confirmed by: (Date:	Time:	
Insured/Driver Liability: (%) [Note-	Est. Status (WO): N: 0-2		(10%)
	inty: YES ()/NO ()	3070]
Excess: (\$) Loading: \$1,000 ()/\$2,000()		
Seneral Remarks:		88/88/86/86	
	on atriative Confidential 9 Cu	dette NO enforce for a few and a second	SANG PROPERTY
() Walk-In Customer: Customer's information () Total Loss Case : to e-mail Insurer UR		rictly NO rater of repairer.	
Drive-In ()/ Towed-In (); Invoice: YE	S()/NO();T	owing Co: (
Remarks:- (INC hoffine: 6788 6616)		Date&Time Completed	Done b
Apply for Transport Allowance ()/ Courte	esy Car ()		
2) QC Check / Post Repair Inspection	()		
3) Upload Resurvey Photo [Repair Cost > \$3000]	()		
Injury:		,	
N. C.			
Date/Time Actions			
		and the second s	
		•	
		S. P. J.	
NA2301991	Invoice Pre	paration Checklist	Anıt (\$)
nimant's Particulars :-	1) AR : Acciden		lst.Bill
	2) DA : Damage	Assessment (\$100); INC (\$8	
iver/Owner:	3) TF : Towing 4) FT : Follow-		\$120
ontact No:		Through Survey (Resurvey) Against INC Only (wef 10 Jan 2005	\$30
maged Portion:	6) TR: Re-inspe	ection .	\$75
	7) N1 : Idac DA 8) NTUC Addit		\$160
Checked by (Engr-In-Charge):	8) NTUC Addit		
VB. vii Onni goji	*N5: Courtes	y Car / Tpt Allowance	\$10
uditors Comments:	*N7: Post Re	onir Inspection	\$25
<u> </u>		P (Non INC) against INC	\$5
. 2/3:	9) N12: Idae Me	bile	30
	Invoice dated	Fee Charged	- Mintelland

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

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.

4. The issue and acceptance of this Form by insurance companies is not an admission of policy manning 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 03/07/2023 16:04 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 02/07/2023 10:30 (SGT) Exact Location of Accident Singapore Additional Location Information CTE TOWARDS CITY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Auto

1998

Vehicle Registration Number SLP4316L

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner GOH SHIN YANG, VICTOR NRIC No SXXXX526B Email Address SELPHK38@GMAIL.COM Mobile Phone No (Phone) +65-90096938 Alternative Phone No

VEHICLE PARTICULARS

INSURANCE COMPANY

Manufacturer Subaru Model Forester Variant Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission

CC

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1700005503-06

DRIVER

Name of Driver GOH SHIN YANG, VICTOR NRIC No SXXXX526B Date Of Birth 03/08/1978 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	04/07/2006 17 YEARS Male (Phone) +65-90096938 - SELPHK38@GMAIL.COM APT BLK 113 ANG MO KIO AVENUE 4 # 11-331 560113 Yes - No
Type of Accident Weather Conditions	Chain Collision
Road Surface	Clear
	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 3 No - Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO THE ATTACHED STATEMENT	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes WITH OWNER
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver	SMR8706X Private car TAN CHEE CHONG

NRIC No	SXXXX309I
Contact Number	0////0091
Address	-
Address complement	_
Postcode	_
Insurance Company Name	
Nature Of Damage	_
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-
110. Of addonger (including Driver)	97 <u>2-1</u> 1

DETAILS OF OTHER VEHICLE PROPERTY 2

SJW73A
-
-
-
Private car
PATSON
SXXXX523A
-
5
-
-
_
1000
-
-

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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' law yers/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' law yers/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 law yers/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

A. SLP4316L
B. SMR 8706X
C. STWT3A

TOWARDS eity.

escribe Circumstances of the Accident	
USA FATRONT OF MR 8LOW BOWN AND 8TODDED THIN I FOLLO	w
SUDDANLY I this AN IMPACT FROM MY VEH RAPR DORTION.	
	10.000

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



HS AUTOMOTIVES PTE LTD

BIK 2 KAKI BUKIT AVE 2 @ KAKI BUKIT AUTOHUB #02-25 SINGAPORE 417921. TEL: 6538 1368 FAX: 6538 1367 Email add: hsautomotivespl@gmail.com

VEHICLE NO: 843	D4316L	MAKE/MODEL:	8UBAR U	
DATE OF ACCIDENT	DAY/MONTH/YEAR	TIME 10	ня 30 мі	N (AM/)PM
LOCATION OF ACCIDENT	GTE '	YOWARD CI	t Y	
EXACT PURPOSE USE DUF	RING ACCIDENT	810 12lb	HOME	
CAR OWNER				
NAME OF CAR OWNER	STOH SAIN	YANG VIC	OR	
CONTACT NO	90096938	8ELDAK3	8 @ HWAL . COM	1
NRIC	878285861	8		
CLAIM TYPE	2.11	OD	THIRD PARTY	REPORTING ONLY
INSURANCE COMPANY	AH			
TYPE OF COVERAGE		COMPREHENSIVE	THIRD PARTY	THIRD PARTY FIRE & THEFT
POLICY NO				
ACCIDENT DRIVER		AS ABOVE	IF NOT- KINDLY FILL	IN BELOW
NAME OF DRIVER	As Above			
NRIC	37827526	B	NO OF PASSENGER/S	
DATE OF BIRTH	03-08-197	8		
OCCUPATION			OUTDOOR	INDOOR
DATE OF DRIVING PASS	04,01,000			
GENDER	2 224.0		MALE	FEMALE
CONTACT NO	9007 9638	,		2
ADDRESS	BCK113 M	14 MO 1010 A	18 9 (8) 561	0119
DRIVER OWN ANY VEHIC	NO/ IF YES- REGIST			
RELATIONSHIP EMPLOY	EE/SPOUSE IF NOT:	OWNER	T	
WEATHER CONDITION		CLEAR		HER:
ROAD SURFACE	L]WEI OII	nek
ANY INJURIES		NO/ IPYES- NAME:		
CONTACT NO POLICE REPORT		NO/ IF YES- LOCATION:		
VIDEO FOOTAGE		NO/ YES		
3RD PARTY INFO		110/ (125)		
VEHICLE B NO	8WR2706 X	v.	NO OF PASSENGER/S	udkuon
NAME	TAN CHEE C	HONEY STOOT	- 0	
CONTACT NO			MITONI	
VEHICLE C NO	STW73A.	873265234	NO OF PASSENGER/S	unknon
VEHICLE D NO			NO OF PASSENGER/S	
VEHICLE E NO			NO OF PASSENGER/S	
VEHICLE F NO			NO OF PASSENGER/S	
ANY WITNESS			_	
WITNESS CONTACT NO			_	



CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Goh Shin Yang Victor

: JF1SJGK85HG088387

Vehicle No. Policy No.

· SI P43161

Period of Insurance

: 05 Jun 2023 To 04 Jun 2024

: 1700005503-06

Engine No.

: FA20B980881

Endorsement No.

Issued Date

: 05 May 2023 12:39

ABOUT THE COVER

Make/Model

Chassis No.

: SUBARU New Forester 2.0XT

Engine Capacity/Tonnage: 1,998.00 CC

Sum Insured : Market Value

First Year of Registration : 2017

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF

Person or Classes of Persons Entitled to Drive*:

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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition

: 40 years old and above

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 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

Fire - \$0 Own Damage - \$1400 Theft - \$0 Flood Cover - \$1400

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Goh Shin Yang Victor - \$1400 (Own Damage), \$1400 (Flood Cover)

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

1.Motor Image Enterprises Pte Ltd Add: 25 Leng Kee Road Singapore 159097 67038166

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 Apple App Store or Google Play Store.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank 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)

0500619232

TAN CHONG CREDIT SUBARU-GLL

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

SINGAPORE 589623

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SSPASM

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