NATIONAL Assessment Contre.	Services 1000 32.		D L	
Date In 22/11/2017 10:53	Job description	Date & Time Completed	Done by	
ResNo NA/INC17022244/K4	SAS e-filing			
VeliNo XE3366P	E-mail (within Shes, AIC	2hrs)		
DOA 21/11/2017 11:15	i-Motor Claim Form	" : MT/0970727	22 11 17	13:45
	i-Motor W/O (Within:	OD 2hrs. TP 4hrs)		. 8
OD   TP ! Pepotting Only	i-Photo Uploaded			
	Assessment/Survey Re	eport		-
TP Insurer:	Ass't Report by Fax /	Hand to Owner/Wksn		
Preforred Wksp / INC Assign Wksp / QW: (		Tel:	Fax:	)
TP Particulars: Veh No: X1	8325E.	INC( )/Non-INC( )		
Owner / Driver: (		_ Tel:	)	
Policy No: ( ) Perio	od: (	) Cover Type: (		-
Confirmed by : (	Date	The second secon	)	
Insured/Driver Liability: ( %) [No	ote-Est. Status (WO):	N: 0-20%; P: 21-79%. F: 80-	100%]	
	arranty: YES ( )/N	10( )		
Excess: (\$ ) Loading: \$1,00	0()/\$2,000()			
General Remarks:-	· 计文字数据数据 (1) / 1/15		E 7240	
( ) Walk-In Customer : Customer's inform	nation strictly Confident	tial & Strictly NO refer of repairer		
( ) Total Loss Case : to e-mail Insurer	URGENTLY.		*	
Drive-In ( )/Towed-In ( ); Invoice:		) ; Towing Co. (		)
	THE RESERVE OF THE PROPERTY.	Date&Time Completed	Done by	
Remarks:- (INC horline: 6788 6616)		Dates III.e Compe	· ·	
1) repety for reality	ourtesy Car ( )		-	
2) QC Check / Post Repair Inspection	( )		-	
3) Upload Resurvey Photo [Repair Cost > \$30	000] ( )			
Injury:	y Farry Francisco			
The state of the s	a maintenar (Els) en en serren vist	ANN STATE OF THE S		0.0.
Date/Time Actions	· pte Ltd. (t	tp: 97557336 Mv.1	william)+	Menter
Zilulty 1350 Goldbell Engineering	g pte Utal. (t	10. 1/200	4	
a distance and the second seco				
		Salay Checklist	Ant (5)	Amt (3)
: NA1707	(25.03	oice Preparation Checklist	lst Bill	Add Bin
laimant's Particulars :-	1) AI 2) D/		(\$30)	
The Control of the State of the	3) TP	: Towing Fee	\$40/\$45 \$120	
Oriver/Owner:	4.07	F. Follow-Through Survey (Resurvey)	\$30	
Contact No:	Fo	r claiming against INC Only (wef 10 Jan 2) R: Re-inspection	\$75	
Damaged Portion:	DN	1 : Idae DA + SMRT Survey	\$160	
077 1070,000	8) N	TUC Additional Services:-		
QC Checked by (Engr-In-Charge):	- 0	N5: Couriesy Car / Tpt Allowance	\$5	
AC CHECKER DY (Engl-In-Charge).	+1	Nó: Repair Co-ordination	\$10 \$25	
Auditors' Comments :-	**************************************	N7: Post Repair Inspection N8: DV / Collect Excess Coordination	22	
Cat. 1:	T	P (N11): TP (Non INC) against INC V12: Idne Mobile	30	
		pice dated Fee Char	110.57	1 117
Cat. 2 / 3:	Inve	oice dated Fee Chor	ged His	11.00

## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Contact Number

**EMail Address** 

- 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 truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 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.
- Any false reporting may be referred to the Police for investigation.
   This report will be forwarded by the insurers of 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.

aforesaid.	
William Berling Street Street	ACCIDENT STATEMENT
Date Of Report	22/11/2017 10:53
Date Of Accident	21/11/2017 11:15
Exact Location Of Accident	TANAH MERAH COAST RD TWDS AVIATION PARK RD TO SNM
Country/State of Loss	SINGAPORE
Description of the last of the	ETAILS OF OWN VEHICLE
Vehicle Registration Number	XE3366P
Insured/Policyholder	
Name Of Registered Owner	TAT LIAN CORPORATION PTE. LTD.
Co Reg No	201207746D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93762593
Alternative Phone No	OFFICE-93762593
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FUSO FV51SJD2DEA
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5090122594
Cover Note Number	
Driver	
Name of Driver	ADAIKKAN RAJA
Passport No/FIN	G7349840L
Date Of Birth	19/05/1981
Occupation	OUTDOOR
Date Of Driving Pass	10/03/2009
Driving Experience	8 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93762593
Fax Number	

OTHERS-93762593

NOEMAIL

BLK 762 WOODLANDS AVE 6 Address

#09-84 BALESTIER PLAZA

730762 Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

RAINING Weather Conditions WET Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

NO Was any body injured in the Accident?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

**Details of Police Action** 

Was the accident reported to the police?

YES

NO

If Yes, Please state which Police Station

WOODLANDS EAST N.P.C Police Station Name

ROAD: 3 WOODLANDS DRIVE 63, POSTCODE: 737890, COUNTRY: Police Station Address

SINGAPORE

TEL NO: - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

NO

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20171121/2194

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO NO

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

XD8325E

Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**Details of Witness** 

Name

Page 2 of 19

#### SKETCH PLAN

### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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>.
- 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.
- 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.
- By the lodgment 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:
  - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

UEN: 201207746D m

Policyholder's Signature Date & Time: A. Daja

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

STARRED SketchPlanFonts VO

	Tanah me						
			- ;				
		/B/ TI	- 5	2			
XE 3360 XD 832	;p	7				7	
DESCRIBE CIRCUM	ISTANCES OF THE	ACCIDENT					
				2	5321x		
			09	ice !	au		
		, ×	La	1-	21		
	0	e ( )	11	1/1			
	1 / En	175	1/0				
2	7 7	11					
1							
DECLARATION							

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personne 's Signature

Name:

NRIC/FIN No.:





1 of 3

Report No. T/20171121/2194

Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999

PEPORT OF A TRAFFIC ACCIDENT

REPORT O	F A TRAFFIC	ACCIDENT		Station Diary No.:			
Date/Time Report Made: 21/11/2017 21:46			Vide Report No.: M/20171121/0012	188			
		MANUAL PROPERTY.	· 医克里特氏 中国大学区 一定等级				
	Informant: AN RAJA		Address: APT BLK 762 WOODLANDS / PLAZA SINGAPORE 730762	AVENUE 6 #09-84 BALESTIER			
ID Type	/ ID No.: / G7349840	L	Contact No.: Home/Office:	Mobile: 93762593			
National			Email:				
Sex: Male	Age:	Date of Birth: 19/05/1981	Type of Informant: Driver	Le view (Cabael Name)			
Race:	Race:		Language:	Institution / School Name:			
Occupa	tion: UCTION W	ORKER	Driving Licence Information: Class: 2B,3,4	Date of Expiry:			

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 21/11/2017 11:15	Type of Location Straight Road	
	AH COAST ROAD	on park road Nea	r to Singapore Navy Mu	seumRoad Speed Limit:	
Weather:		Road Surface: Wet			
Heavy rain	Traffic Flow:			Traffic Volume: Light	
Heavy rain Traffic Flow: One Way		Traffic Control: Not Controlled			

· ESTABLISHED CO.			
XD8325E	Lorry	Slightly Damaged	0
XE3366P	Lorry	Seriously Damaged	0





2 of 3

Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAP

3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

Report No. T/20171121/2194

CONTINUATION OF REPORT

#### Brief Details.

On the above mention date, time. I was driving my company lorry car plate no: XE3366P at the said location towards Aviation park Road, there was a lorry car plate no: XD8325E in front of me, after which the lorry suddenly making a left turn into construction site and stopped subsequently I brake my lorry however my lorry skit and hit onto the side of the lorry in front. I and the other lorry driver came down and make a check the lorry. I inspect my lorry, my lorry front part was totally damaged and dent inwards and the other lorry, the left side near to rear was slightly dent inwards. Police was attended to us and no one was injured.

I wish to states that my company lorry do not have any in car camera and I also not sure any CCTV around the accident location. I also wish to states that I lodge this report for my company purpose.





Police Station Of Origin: Woodlands East N.P.C.

3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

CONTINUATION OF REPORT

3 of 3

Report No. T/20171121/2194

## Sketch Plan

NP168

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:  J / Salt D Chow De Chen  Staff Sgt MUHAMMAD FAWZEY BIN  KARIMGHANI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/11/2017 21:46
Officer In Charge Of Case: TP / GIT / Staff Sgt LEE GUANG HUI Contact No.: 65476138	Classification Of Case:

SN 130

# Enquire Transfer Fee

Transfer Fee	11.00		11.00
	Amount Before GST (S\$)	(S\$)	(\$\$)
Amount Payable	A DESCRIPTION OF THE PERSON OF	GST Amount	Amount After GST
Road tax, including Over lits ownership is being trai	Payment (if any), of a vehicle will foll nsferred.	ow the vehicle to the new	registered owner when
(s) payable.	e imposed if road tax / lay up has exp		
CO2 Emission		ora nicosonos escoros	and Tay Davible for for
Intended Transfer Date	22 NOV 2017		
Inspection Due Date	18 Apr 2018 22 Nov 2017		
Road Tax Expiry Date	18 Apr 2018 18 Apr 2018		
COE Expiry Date	18 Apr 2027		
Quota Premium	\$49,002.00		
COE Category	C - Goods Vehicle & Bus		
Lifespan Expiry Date	18 Apr 2037		
Original Registration Date	ά.		
Year Of Manufacture	2016 19 Apr 2017		
Unladen Weight	11660 kg 2016		
Maximum Laden Weight	28000 kg		
Maximum Power Output			
Engine Capacity	11967 cc		
Engine No.	OM457LA457972C0330692		
Propellant	Diesel		
Chassis No.	FV51SJA20121		
Vehicle Model	FUSO FV51SJD2DEA		
/ehicle Make	MITSUBISHI		
/ehicle Scheme	Normal		
/ehicle Attachment 1	No Attachment		
/ehicle Type	B33 - Goods (Open) Tipper/Dum	per Truck	

#### S PASS

Employment of Foreign Manpower Act (Chapter 91A) Republic of Singapore

Employer
TAT LIAN CORPORATION PTE, LTD.

Sector: CONSTRUCTION



ADAIKKAN RAJA LORRY DRIVER

D Page No. 0 32590942

09-03-2017

23-03-2017

03-06-2018

L7766679





G7349840L

ADAIKKAN RAJA

tien Date 19 May 1981 nace trute 13 Mar 2014 Valid Till 12 Mar 2019

VISIT PASS Immigration Regulations

ADAIKKAN RAJA



Date of Birth Sex

Eth.

19-05-1981 M

INDIAN Date of Issue

Date of Exprey 03-06-2018

G7349840L 23-03-2017 MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Claur 4

MOTORCYCLES NOT EXCERDING 200 CC MOTOR CARS AND MOTOR TRACTORS THE WEIGH OF WHIGH ENLAREN DODES NOT EXCELED 100 KALOGRAMS IRANY MOTOR CARS AND MOTOR TRACTORS THE WEIGH OF WHICH UNLADEN EXCEED 1500 KILOGRAMS

97 Dec 2015

S / No.9000242984

Ucence No. G7349840L

NP 429A



## Certificate of Insurance

MOTOR	VEHICLES	(THIRD	PARTY	RISKS	AND	COMPENS	SATION)	ACT (CHAPTER 189)	μ
MOTOR	VEHICLES	(THIRD	PARTY	RISKS	AND	COMPENS	SATION)	RULES, 1960	
ROADT	RANSPORT	ACT, 1	987 (M	ALAYS	IA)				

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5090122594

Cover : Preferred Workshop Plan

1. Index mark and Registration Number of Vehicle

: XE3366P

Chassis Number

: FV51SJA20121

2. Name of Policyholder

TAT LIAN CORPORATION PTE. LTD.

3. Effective Date of Insurance

: 19 Apr 2017

4. Expiry Date of Insurance

: 18 Apr 2018

5. Persons 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.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

(b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included un headings.

EXCESS (SECTION 1)

551,500

EXCESS (SECTION 2)

76, 30,

WINDSCREEN EXCESS

55100

INSURE WITH COE

YES

HIRE PURCHASE COMPANY

16/A

SUM INSURED

MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor. Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency

: PRO-LINK INSURANCE AGENCY (00000571869)

Date of Issue

: 11 Apr 2017 14:07 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

<b>eBao</b> Tech									Gener	alClaim
Hello, NAC_PAYA_UBI_800	0601		THE PARTY OF THE P	AND REAL PROPERTY.	NAME OF TAXABLE PARTY.		Change La	nguage	Change Password	Log Ou
My Desktop	Polic	y Query								
Notice of Loss	Policy N	0.				Date of Acc	dent	21/11	/2017 11:15	
	Vehicle	No.(For Motor)	XE3366P							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	е	5090122594	TAT LIAN CORPORATION PTE. LTD.	201207746D	GFT	Preferred Workshop Plan	XE3366P	XE3366P	19/04/2017	

Policy No.	5090122594	Policyholder Name	TAT LIAN CORPORATION F	PTE. L Policyholder NRIC	201207746D
Address	22 WOODLANDS LINK #0	3-21 SINGAPORE 73	8734		
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy ssue Date	11/04/2017	Effective Date	19/04/2017 00:00	Expiry Date	24/11/2017 23:59
Third Party Excess	0	Own damage Excess	1500	Windscreen Excess	100
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	PRO-LINK INSURANCE A	GENCY Agent Tel.	65672149	GST Flag	Υ
Co- insurance Flag	No				
Open Policy Info					
Certificate Info					
Policyho	older Mailing Address				
Address 1	22 WOODLANDS LINK	Address 2	#03-21	Address 3	SINGAPORE 738734
Address 4		Address Type Related	Singapore address	Post Code	738734
Unit No.	10-06	Policy Number	5086395301-01		
<b>▶</b> Insured	Object: XE3366P				
• Endorse	ements				
Sequence	Date of Endorsement	Endorsement Type	Endorsement E Number	ndorsement Status	Endorsement Content
1	21/04/2017 00:00	Basic Information Endorsement		ndorsement Take ffective	Thank you for giving us the opportunity to serve you. We confirm that from 19 Apr 2017, the Vehicle Number is amended as follows: VEHICLE REGISTRATION NUMBER: XE3366P
2	26/04/2017 00:00	Basic Information Endorsement	000001286547653	ndorsement Take ffective	Thank you for giving us the opportunity to serve you. We confirm that from 26 Apr 2017 the Hire Purchase Company is amended as follows for Vehicle Number XE3366P: HIRE PURCHASE COMPANY: HONG LEONG FINANCE LTD

Continue Cancel

Claim Handling				
ccident MT/0970727	000000000	10101000	Market Control	52272 April 100 May
alicy No.	5090122594	Vehicle No.	XE3366P	GST Registration No.
Policyholder Name	TAT LIAN CORPORATION PTE, LTD.			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Preferred Workshop Plan	Loading
Contact No.(Mobile)	93762593	Contact No.(Office)	0	Contact No.(Home)
mail Address	® No □ Yes	Special Remark TCA	G No. C Yea	eCode eCode Reason
FK			® No ← Yes	ecode Reason
ICD Protection	No	NCD Entitlement(%)	0	
Accident Details				
eport Date	22/11/2017 13:32	Accident Report Within 24 hrs	Yes	Accident Type
ate of Accident	21/11/2017	Time of Accident hh:mm	11:15	Country of Accident
eporting Centre		Orange Force		ICM No.
ccident Location	TANAH MERAH COAST RD TWDS AVIATIO	ON PARK RD TO SNM		
⇒ Benefits				
♥ Excess				
wn damage Excess	1,500.00	Additional Excess		Windscreen Excess
nnamed Driver Excess		Outside Singapore OD Excess		
nird Party Excess	0.00	Outside Singapore TP Excess		
GST Registered Inform	ation	100000000000000000000000000000000000000		
ST Registered	No		GST Registration Date	
ST Registration No.			GST Status Verified	No
odification History				
Policyholder Mailing Ad	ddress			
idress 1	22 WOODLANDS LINK	Address 2	#03-21	Address 3
ddress 4	and the second second	Address Type	Singapore address	Post Code
nit No.	10-06	Related Policy Number	5086395301-01	Post Code
OI Driver Info	10-00	Related Policy Hullides	308039301-01	
river Name	Unnamed Driver	Driver Type	Unnamed Driver	
nnamed driver Name	ADAJKKAN RAJA	Driver NRIC	G7349840L	Driver DOB
egister Date of Driver License	10/03/2009	Driver Age	36	Driving Experience
ontact No.(Mobile)	93762593	Contact No.(Office)	0	Contact No.(Home)
ddress 1	BLK 762 WOODLANDS AVE 6	Address 2		Address 3
ddress 4		Address Type	Singapore address	Post Code
77.3076	400 PA PA SCTTED DI AZA	Hudi Cas Type	Stigation address	rost code
Init No. loes he own a Singapore	#09-84 BALESTIER PLAZA			
egistered car?	Yes @ No	Driver Vehicle No.		Driver Insurer Company
eclaration				
reathalyser or Blood Test eading?	0 mg	Any injury?	Yes @ No	
odification History  Claim 001 OD-MD Ne	"h			
	*		TAT LIAN GOODBANTION STE	Insured NRIC
aim Type *	OD-MD 💌	Insured Name	TAT LIAN CORPORATION PTE. L	District HAIC
	OD-MD ▼	Insured Name Contact No.(Home)	TAT ELAN CORPORATION PTE. C	Contact No.(Office)
ontact No.(Mobile)	OD-MD ▼ tic@tatliancorp.com.sg		XE3366P	
nntact No. (Mobile)		Contact No.(Home)		Contact No.(Office)
intact No.(Mobile) nail Address aim Description eferred Workshop Contact	tic@tatilancorp.com.sg	Contact No.(Home)		Contact No.(Office) TP Vehicle Number
ntact No.(Mobile) nail Address aim Description eferred Workshop Contact	tic@tatliancorp.com.sg  XE3366P / XD8325E ON 21 Nov 2017  97557336 (MR WILLIAM)	Contact No.(Home) OI Vehicle Number Insured Liability *	XE3366P  Fully at Fault	Contact No.(Office)  TP Vehicle Number  Name of Preferred Workshop
ntact No. (Mobile) nail Address aim Description eferred Workshop Contact contact contact	tic@tatliancorp.com.sg  XE3366P / XD8325E ON 21 Nov 2017  97557336 (MR WILLIAM)  Yes	Contact No.(Home) OI Vehicle Number  Insured Liability * Preferened Repair Option	XE3366P	Contact No.(Office)  TP Vehicle Number  Name of Preferred Workshop  GIA report
intact No. (Mobile)  nail Address  aim Description  eferred Workshop Contact  cquire Finalisation  ste Registered	tic@tabliancorp.com.sg  XE3366P / XD8325E ON 21 Nov 2017  97557336 (MR WILLIAM)  Yes  22/11/2017 13:46	Contact No.(Home) OI Vehicle Number  Insured Dability * Preference Repair Option Claim Close Date	XE3366P  Fully at Fault	Contact No.(Office)  TP Vehicle Number  Name of Preferred Workshop  GIA report  Date Received
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