NATIONAL Assessment Centr	e Services	Met : namost Wk	14117162327		
Date In: 11/11/17 - 09:57	Job description		Date &Time Completed	Done	pi.
Res No: NA/MS617023417/24	SAS e-filing				
Veh No: GX 58414	E-mail (within	ihrs, AIC 2hrs)			
D.O.A: 10/12/7-07:20	i-Motor Clair	n Form			
i-Motor W/C		(Within: OD 2hrs	TP 4hrs)		
OD TP Peporting Only	aded			#1 100	
	Assessment/Su	rvey Report			5 015 02 0 V2
TP Insurer:	Fax / Hand to	Fax/Hand to Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (Tel: Fa	ex:	- COLON PLAN PLAN
TP Particulars: Veh No: MCy	16072	INC ()/Non-INC()		Season le
Owner / Driver: (Tel:)	
Policy No: () Per	riođ: ()	Cover Type: ()	
Confirmed by : (Date:	Time:)	
Insured/Driver Liability: (%) [1	Note-Est. Status (W	7O): N: 0-20	%; P: 21-79%. F: 30-1	00%]	
Year of Registration: ()	Warranty: YES ()/NO()		
Excess: (\$) Loading: \$1,0	00()/\$2,000	()			H 1990
General Remarks:-				See 1	7
() Walk-In Customer : Customer's infor	rmation strictly Con	fidential & Str	ictly NO refer of repairer.		
() Total Loss Case : to e-mail Insure		7/			Sinohen
Drive-In () / Towed-In (); Invoice		O():To	owing Co: ()
	\ / / -			EARLOW NEAR TON	-
Remarks:- (INC horline: 6788 6616)			Date&Time Completed	Done	by
Apply for Transport Allowance ()/C	Courtesy Car (
2) QC Check / Post Repair Inspection	()		Farmer and the same of the sam		
3) Upload Resurvey Photo [Repair Cost > \$3	000] ()				
Injury:			1/2		11V) - 4
Sign 1 for the sign of the sig				12306 1 7 2 4	7 - Naj 20.
Date/Time Actions				Rosescours re-	
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K1707627		T D	anation Checklist		Ami (\$
			aration Checklist	fst Bill	
		1) AR : Accident 2) DA : Damage /	Reporting (\$30); Assessment (\$100); INC (\$8	fst.Bill	
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nimant's Particulars :-		1) AR : Accident 2) DA : Damage / 3) TF : Towing Fe 4) FT : Follow-Th 5) FT : Follow-Th	Reporting (\$30); Assessment (\$100); INC (\$8);	7st Bill (0) (545) (120) (530)	
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laimant's Particulars:- river/Owner: ontact No: amaged Portion: C Checked by (Engr-In-Charge): uditors' Comments:- 1: 2/3:		1) AR: Accident 2) DA: Damage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For cleiming as 6) TR: Re-inspec 7) N1: Idae DA 8) NTUC Additio OD *N5: Courtesy *N6: Repair Co *N7: Fost Repair *N8: DV / Coll TP (N11): TP	Reporting (\$30); Assessment (\$100); INC (\$8); Inc (\$8); Inc (\$100); INC (\$8); Inc (\$100); INC (\$8); Inc (\$100); INC (\$8); Inc (\$100); Inc	fst.Bill	Amt (\$)

Express Co.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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.
- 6. 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

and address.	
经验的基本证明的证明	ACCIDENT STATEMENT
Date Of Report	11/12/2017 09:57
Date Of Accident	10/12/2017 07:20
Exact Location Of Accident	BEFORE JUNC AMK INDUSTRIAL PARK 2 & AMK AVE 3
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GX5841Y
Insured/Policyholder	
Name Of Registered Owner	KST AUTO RENTAL PTE LTD
Co Reg No	200806860W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67415520
Vehicle Particulars	
Manufacturer	NISSAN
Model	URVAN
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	7VCT1723630
Cover Note Number	
Driver	
Name of Driver	NALLAPERUMAL PERUMAL
Passport No/FIN	G7765994W
Date Of Birth	01/06/1983
Occupation	OUTDOOR
Date Of Driving Pass	11/01/2013
Driving Experience	4 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86796563
ax Number	1500 816 3000 000 000 000 000 000 000 000 000 0
Contact Number	OFFICE-86796563

NOEMAIL

BLK 415 HOUGANG AVENUE 10 Address

#04-1276

Postcode 530415

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - CROSS JUNCTION

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

YES

Foreign Vehicle Registration Number

MCY6072 (PRIVATE CAR)

Was any body injured in the Accident? NO Was any other material or property damaged?

I have been approached by unknown person(s)

YES NO

soliciting/offering accident claims assistance.

1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

HOUGANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 60 HOUGANG AVE 9, POSTCODE: 538775, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4890999 - FAX NO: 63128989

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20171210/2022

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

MCY6072

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 Phone Number Email Address

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 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.

Policyholder's Signature Date & Time: Driver's Signature

(If driver is not the policyholder)

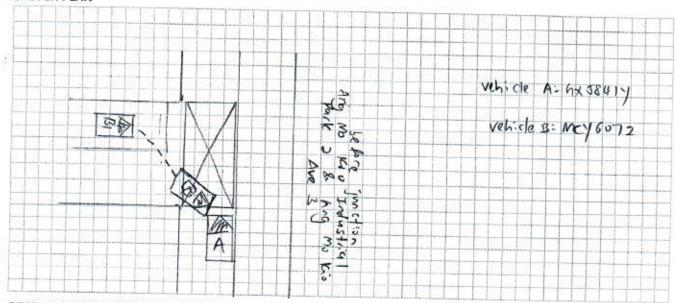
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

10 20			
Refer to	police report - T/20	17 1213 2022.	
	(4		
		- 15.00	
ARATION			

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:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

10 Sin Ming Drive Singapore 575701

Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

12 Apr 2012

Our ref 1204120501N052123357

KST AUTO RENTAL PTE LTD 3021A UBI ROAD 1 #01-42 SINGAPORE 408715

001701/46

կլենկլիրիիկիլիերի

Dear Sir/Madam

NOTIFICATION ON TRANSFER OF OWNERSHIP FOR VEHICLE NO. GX5841Y

We are pleased to inform you that your application to transfer ownership of the abovementioned vehicle has been approved. The Business Transaction Reference No. is 20120412192708146587. You are the registered owner of the vehicle with effect from 12 Apr 2012.

The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

1. Name KST AUTO RENTAL PTE LTD 2. Identification No. Type

Company 3. Identification No. 200806860W

4. Place Of Passport Issue

5. Vehicle No. GX5841Y 6.

Vehicle Type A50 - Goods (Closed) Van/Van Panel (Delivery) 7. Vehicle Scheme

: Normal 8. Vehicle Make : NISSAN 0 Vehicle Model : URVAN 10. Remarks

To renew the COE, the Prevailing Quota Premium

payable is that of Category C.

- You may use your NRIC number and SingPass or User ID and Password (for non-Singaporeans/PRs) to login to http://www.onemotoring.com.sg and see the details of the above transaction. For ACRA-registered businesses and companies with EASY accounts, your authorised staff may also access the wide range of vehicle-related services via http://www.onemotoring.com.sg using EASY. If you do not have an EASY account, you can apply for it at http://www.iras.gov.sg. For non-Singaporeans/PRs who do not have a User Password, please contact us at 1800-CALL LTA (1800-2255 582) to request for a new password. Please note that a separate Transaction PIN is required for the following transactions via the Internet or at our Electronic Service Agents. Before you perform these transactions, please request for your Transaction PIN. You may find out more information on how to obtain your Transaction PIN and the documents needed (such as Board Resolution for companies and businesses, etc) via http://www.onemotoring.com.sg > LTA Information & Guidelines > Transaction PIN & User Account.
 - Vehicle PIN Transfer of Ownership and De-registration of Vehicle a.
 - TCOE PIN Transfer of TCOE (For Category C and E COE bid under individual) Ь.
 - Rebate PIN Transfer and Splitting of PARF/COE Rebate





1 of 3 Report No. T/20171210/2022

Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/12/2017 10:58		Made:	Vide Report No.: F/20171210/0106	Station Diary No.:
Informa	ant's Partic	ulars		36
Name o	of Informant PERUMAL		Address: APT BLK 415 HOUGANG AV 530415	VENUE 10 #04-1276 SINGAPORE
ID Type / ID No.: FIN NO / G7765994W Nationality: INDIAN		4W	Contact No.: Home/Office:	Mobile: 86796563
			Email:	
Sex: Male	Age:	Date of Birth: 01/06/1983	Type of Informant:	
Race: Indian			Language:	Institution / School Name:
Occupation: DELIVERY DRIVER		R	Driving Licence Information: Class: 3	Date of Evning

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident:	Type of Location Straight Road	
Location: Along Road 1 ANG MO KIO ANG MO KIO	INDUSTRIAL PARK 2		10/12/2017 07:20		
Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: No Traffic	
Type of Collisi	UII.			Anyone conveyed by	

Vehicle No.	Туре	Make	Model	Color	10	
GX5841Y Van	Van		Woder	COIOI	Condition	No of Passenger
	vali				Seriously	
MCY6072	Car				Damaged	
mo roorz Car	Cai				Seriously	0
					Damaged	





2 of 3

Report No. T/20171210/2022

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

CONTINUATION OF REPORT

Brief Details.

On 10/12/2017 at about 0720hrs, I was driving my van with vehicle no GX 5841Y along Ang Mo Kio Industrial Park 2 towards Ang mo kio avenue 3. While driving, I saw one bus parked at the bustop. Subsequently when I drove pass the bus, I saw one car with vehicle number MCY 6072 came out from the side road and was about to turn right. Afterwhich, I brake the car.

However, the said car unable to stop on time as such it hit onto my car. Both of us went down from the vehicle and exchanged particulars with each other. Particulars of the driver as such: Tan Chin Yeong, G8241819P. The left side of my van was damaged. The left and right side of mirror was broken. Nobody was injured from the accident. Traffic Police came down to my incident location and advise me to lodge a Traffic Accident Report reference F/20171210/0106 incharge IO Zayid.





Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

3 of 3 Report No. T/20171210/2022

CONTINUATION OF REPORT

Sketch Plan

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:	Signature Of Informant:
Staff-Sgt MUHAMMAD SALAMUN BIN-AHMAD	A Solut-
Signature Of Interpreter: Not applicable	Date/Time: 10/12/2017 10:58
Officer In Charge Of Case: TP / AEIT / SSI 2 SITIMARSITA BINTE BOHARI Contact No.: 65476219	Classification Of Case:
Authentication Stamp	



S PASS

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

Employer
DNET CONTRACT SERVICES PTE, LTD.

Sector: CONSTRUCTION



NALLAPERUMAL PERUMAL

8 Pass No. 0 3335973-

23-09-2017

16-10-2017 16-10-2019

L8388422

VISIT PASS Immigration Regulations

NALLAPERUMAL PERUMAL

Date of Birth Sex 01-05-1983 M

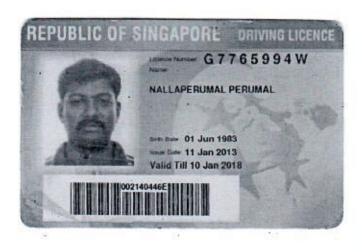
Fin Date of leave G7765994W 16-10-2017

INDIAN 16-10-2019

MULTIPLE JOURNEY VISA ISSUED

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





OU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Motor Cars=< 3000kg with =<7 passengers, exclusive 11 Jan 2013 of the driver; and other motor vehicles =< 2500kg



Licence No; G7765994W

NP 428A



MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G) 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807 Tel +65 6827 7888, Fax +65 6827 7800 www.msig.com.sg

CERTIFICATE OF INSURANCE

Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia)

Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

23-Jun-2017 Third Party

A0633 - 001

Certificate No

1. Index Mark and Registration Number of Vehicle 2. Chassis Number of Vehicle

3. Name of Policyholder

4. Effective date of the Commencement of Insurance for the purposes of the Act

5. Date of Expiry of Insurance

: 12 JUL 2017

· 11 JUL 2018

: 7VCT1723630

: JN1MG4E25Z0711346

: KST Auto Rental Pte Ltd

: GX5841Y

Person or Classes of Persons entitled to drive*

Any person provided he is in the Policyholder's or their named Lessee's employ and is driving on their order or with their permission.

Named Lessee: AS PER LIST PROVIDED TO MSIG

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.

And provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to Use*

Use in connection with the Policyholder's or the specified Lessees' business

Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's or the specified Lessees'

Use for social domestic and pleasure purposes.

The Policy does not cover

(i) Use for hire or reward, leasing other than to specified Lessees or for racing pace-making reliability trial or speed testing

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

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

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 & Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

For MSIG Insurance (Singapore) Pte. Ltd.

00:00 AM

Approved Insurer

Not valid unless countersigned by Authorised Person

IMPORTANT NOTICE

This Certificate is not transferable to a new owner of the vehicle

If for any reason the Insurance is terminated during its currency, the Certificate must be returned to the Insurer, or if the Certificate has been lost or destroyed, a

Statutory Declaration to that Effect must be made. Failure to comply with this obligation is an offence under the compulsory Insurance Legislation.

This Certificate must be returned it the insurance is suspended during its currency.

If you are involved in an accident, full details must be forwarded immediately to the Company

FORM MZ 400 (Commercial Vehicle)

(For the Issuance of Motor Certificate of Insurance only)