

NATIONAL Assessment Centre Services (Ref: JAN17)

Date In: 21/12/17	Job description	Date & Time Completed	Done by
Ref No: NA/MS617024242/13	SAS e-filing		
Veh No: FBK266T	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 20/12/17 2020	i-Motor Claim Form		
OD: (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ()

Tel: ()

Fax: ()

TP Particulars:

Veh No: **G778M**

INC () / Non-INC ()

Owner / Driver: ()

Tel: ()

Policy No: ()

Period: ()

Cover Type: ()

Confirmed by: ()

Date: ()

Time: ()

Insured/Driver Liability: () % [Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 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 hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: ()

Date/Time	Actions

NA1707876

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Date 1:

Date 2/3:

Invoice Preparation Checklist

Ant (\$)

Ant (\$)

1st Bill

Add Bill

- 1) AR: Accident Reporting (\$30);
- 2) DA: Damage Assessment (\$100); INC (\$30)
- 3) TF: Towing Fee \$40/\$45
- 4) FT: Follow-Through Survey \$120
- 5) iT: Follow-Through Survey (Resurvey) \$30
- For claiming against INC Only (wef 10 Jan 2005)
- 6) TR: Re-inspection \$75
- 7) N1: Idac DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- OD:
- *N5: Courtesy Car / Tpt Allowance \$5
- *N6: Repair Co-ordination \$10
- *N7: Post Repair Inspection \$25
- *N8: DV / Collect Excess Coordination \$5
- TP (N11): TP (Non INC) against INC \$20
- 9) N12: Idac Mobile \$30

Invoice dated

Fee Charged

Invoice dated

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 Authorised 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 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.
5. 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 aforesaid.

ACCIDENT STATEMENT

Date Of Report	21/12/2017 16:24
Date Of Accident	20/12/2017 20:20
Exact Location Of Accident	MARSILING CRESCRNT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK266T
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD NAIM BIN ABDUL AZIZ
NRIC No	S8212263Z
Email Address	MUHD_NAIM@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-90981001
Alternative Phone No	OTHERS-90981001

Vehicle Particulars

Manufacturer	YAMAHA
Model	JUPITER
Exact Purpose for which vehicle was being used at time of accident	PARKED VEH
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	
Cover Note Number	72052250

Driver

Name of Driver	MUHAMMAD NAIM BIN ABDUL AZIZ
NRIC No	S8212263Z
Date Of Birth	10/05/1982
Occupation	INDOOR
Date Of Driving Pass	02/11/2010
Driving Experience	7 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90981001
Fax Number	
Contact Number	OTHERS-90981001
Email Address	MUHD_NAIM@HOTMAIL.COM

Address	BLK 571A WOODLANDS AVE 1 #03-894
Postcode	731571
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20171221/2081 & T/20171221/2086

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GT78M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHING WAH SENG
NRIC/Passport Number	S7344584A
Contact Number	83168880
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number FBH5983P
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number FBG661G
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number FBB9012Y
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number FBE2808Z
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number
Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 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 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:
 - (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.
- (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:
 - (i) 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:

21/12/17 1330

Driver's Signature

(If driver is not the policyholder)

Date & Time:

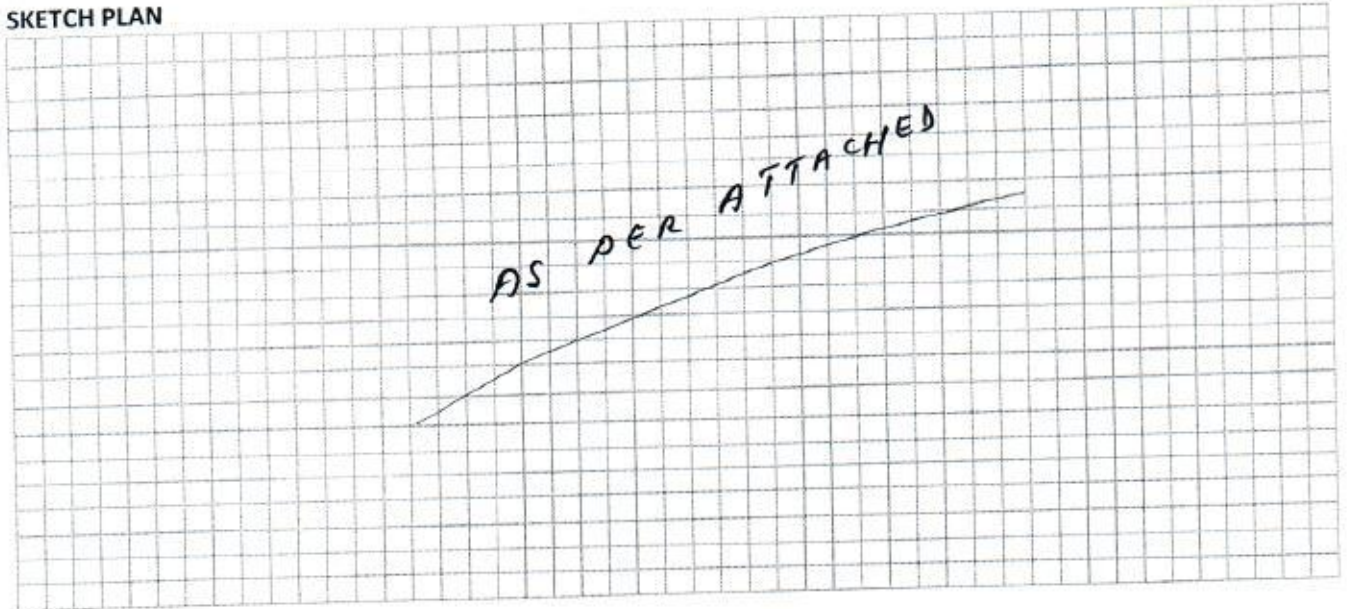
 21/12/17

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ref to the police report: T/20171221/2081
T/20171221/2086

DECLARATION

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


Policyholder's Signature

Date & Time: 21.12.17

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

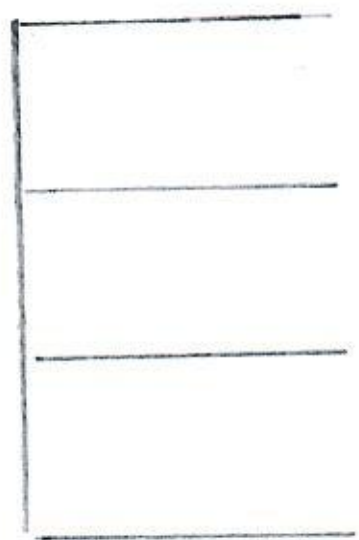
 21/12/17
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Yassin & Seefood
Restaurant
Mersiling
210

Mersiling cres 212

→
→

↑



reverse
→
→

C	A	D	E	F	
9 FBH 5983P	8 FBK 266T	7 FBG 661G	6 FBB 9012H	5 FBE 2808Z	+

Mersiling cres BLK 218

+



**SINGAPORE
POLICE FORCE**



T/20171221/2081

1 of 4

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20171221/2081

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/12/2017 15:19	Vide Report No.: J/20171220/0182	Station Diary No.:
--	-------------------------------------	--------------------

Informant's Particulars			
Name of Informant: MUHAMMAD NAIM BIN ABDUL AZIZ		Address: APT BLK 571A WOODLANDS AVE 1 #03-894 SINGAPORE 731571	
ID Type / ID No.: NRIC NO / S8212263Z		Contact No.: Home/Office: Mobile: 90981001	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 35	Date of Birth: 10/05/1982	Type of Informant: Driver
Race:		Language:	Institution / School Name:
Occupation: UNEMPLOYED		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/12/2017 20:20	Type of Location:
Location: Along Road 1 MARSILING CRESCENT				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK266T	Motorcycle	YAMAHA	JUPITER MX (HC)	White		0
GT78M	Lorry	NISSAN	CABSTAR 3.0 5M/T ABS 2DR 2WD 3.4T	Silver		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



SINGAPORE POLICE FORCE



T/20171221/2081

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 4

Report No. T/20171221/2081

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK266T	MSIG INSURANCE (SINGAPORE) PTE. LTD.	72052250	06/12/2017	05/12/2018

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	MUHAMMAD NAIM BIN ABDUL AZIZ		ID No.	S8212263Z
Related Vehicle	FBK266T (Motorcycle)		Contact No.	90981001
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL
Driver				
Name	CHING WAH SENG		ID No.	S7344584A
Related Vehicle	GT78M (Lorry)		Contact No.	83168880
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

Brief Details.

ON 20/12/2017 AT 2020HRS AT MARSILING CRESCENT,

I HAD PARKED MY MOTORBIKE AT THE OPEN SPACE CARPARK OF BLK 212 MARSILING CRESCENT. WHEN I RETURNED TO MY BIKE, I REALISED THAT A LORRY HAD COLLIDED INTO ONE BIKE THAT LED TO THE COLLISION OF 4 OTHER BIKES IN A DOMINO EFFECT. MY BIKE WAS HIT BY THE BIKE THAT WAS HIT BY THE LORRY. WHEN I REACHED THE SCENE, MR CHING WAS SEEN LIFTING UP THE FALLEN BIKES. WHEN I APPROACHED HIM, HE ADMITTED THAT HE WAS RESPONSIBLE FOR DRIVING THE LORRY AND PROVIDED HIS DETAILS. SUBSEQUENTLY, TRAFFIC POLICE ARRIVED TO THE SCENE. HOWEVER, I NOTICED SOMETHING THAT WAS WEIRD. THE DRIVER THAT ADMITTED WAS VERY CALM. HOWEVER, ONE CHINESE MALE WITH HIM SEEMED VERY NERVOUS AND LEFT QUICKLY. WHEN I TRIED CONTACTING HIM ON 21/12/2017, I WAS UNABLE TO REACH HIM. IN ADDITION, I TRIED REACHING THE COMPANY BUT THEIR CONTACT NUMBER WAS NOT LISTED. HENCE, I AM LODGING THIS REPORT.

→ of my bike
→ And 3 other bike

FBK266T



**SINGAPORE
POLICE FORCE**



T/20171221/2081

3 of 4

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20171221/2081

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20171221/2081

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

4 of 4

Report No. T/20171221/2081

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:
TP /
LEE KWANG HONG KENDRICK

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /

Contact No.:

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
21/12/2017 15:19

Classification Of Case:



SINGAPORE
POLICE FORCE

Signature:



T/20171221/2086

1 of 3

Report No. T/20171221/2086

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No T/20171221/2081

Report Number T/20171221/2086

Vide Report Number

Date/Time of Report Made 21/12/2017 15:41

Place Report Lodged Traffic Police Division HQ

Type of Informant Rider

Name of Informant MUHAMMAD NAIM BIN ABDUL AZIZ

ID Type / ID No. NRIC NO / S8212263Z

Home/Office

Mobile 90981001

Email

Type of Accident Non-Injury / Attended by Police

Drink Drive No

Anyone conveyed by
ambulance No

Date/Time of Accident 20/12/2017 20:20

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH5983P	Motorcycle					0
FBK266T	Motorcycle	YAMAHA	JUPITER MX (HC)	White	Seriously Damaged	0
GT78M	Lorry				Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



T/20171221/2086

2 of 3

Report No. T/20171221/2086

Continuation of CSF For NP168

Rider			
Name	MUHAMMAD NAIM BIN ABDUL AZIZ	ID No.	S8212263Z
Related Vehicle	NIL	Contact No.	90981001
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	CHING WAH SENG	ID No.	S7344584A
Related Vehicle	NIL	Contact No.	83168880
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Facts.

AMENDING TO 21/12/2017
REF TO J/20171220/0182

ON 20/12/2017 AT 2020 HRS AT MARSILING CRESCENT,

I HAD PARKED MY MOTORBIKE AT THE OPEN SPACE CARPARK OF BLK 212 MARSILING CRESCENT. WHEN I RETURNED TO MY BIKE, I REALISED THAT A LORRY HAD COLLIDED INTO ONE BIKE FBH5983P THAT LED TO THE COLLISION OF MY BIKE FBK266T AND 3 OTHER BIKES IN A DOMINO EFFECT. MY BIKE WAS HIT BY THE BY THAT WAS HIT BY THE LORRY. WHEN I REACHED THE SCENE, MR CHING WAS SEEN LIFTING UP THE FALLEN BIKES. WHEN I APPROACHED HIM, HE ADMITTED THAT HE WAS RESPONSIBLE FOR DRIVING THE LORRY AND PROVIDED HIS DETAILS. SUBSEQUENTLY, TRAFFIC POLICE ARRIVED TO THE SCENE. HOWEVER, I NOTICED SOMETHING THAT WAS WEIRD. THE DRIVER THAT ADMITTED WAS VERY CALM. HOWEVER, ONE CHINESE MALE WITH HIM SEEMED VERY NERVOUS AND LEFT QUICKLY. WHEN I TRIED CONTRACTING HIM ON 21/12/2017, I WAS UNABLE TO REACH HIM. IN ADDITION, I TRIED REACHING THE COMPANY BUT THEIR CONTACT NUMBER WAS NOT LISTED. HENCE, I AM LODGING THIS REPORT. MY HELEMT WAS ALSO DAMAGED DURING THE ACCIDENT.



T/20171221/2086

3 of 3

Report No. T/20171221/2086

Continuation of CSF For NP168

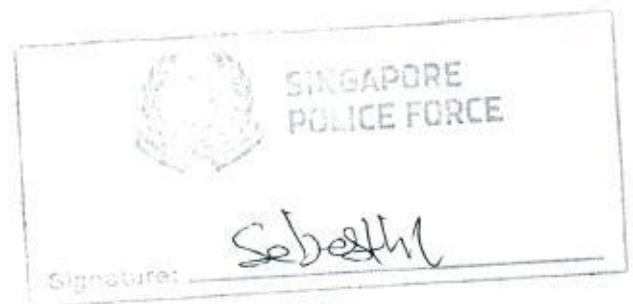
Sketch Plan

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.

Case Sensitivity	No
Officer-In-Charge of Case	TP / GIT /
Classification of Case	1) NON-INJURY / ATTENDED BY POLICE

Mr.



ACCIDENT STATEMENT

ACCIDENT DATE: (20 / 12 / 2017) (DD/MM/YYYY), TIME: (20 : 20) (HH:MM)

LOCATION: Marsiling Crescent near Yassin Kampong Seafood
near in front of Marsiling Cres BLK 218

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBK266T
 b) INSURANCE COMPANY: MSG
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: YAMAHA JUPITER MX
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PARKED VEH
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES / NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM) REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: _____ (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

3. DRIVER

- a) NAME: _____ (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: 90981001
 c) ADDRESS: _____

*d) DATE OF BIRTH: (10 / 05 / 1982) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 02/11/2010

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR) / RAINING / OTHERS _____
 b) ROAD SURFACE: (DRY) / WET / OTHERS _____

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO) →

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
 (including driver)
 (0)

* No of passenger
 (including driver)
 (—)

* No of passenger
 (including driver)
 (—)

21/12/17

email =

fax =

waiting police
 report

REPUBLIC OF SINGAPORE DRIVING LICENCE

Effective Number **S8212263Z**

Name
MUHAMMAD NAIM BIN ABDUL AZIZ


Birth Date **10 May 1982**
Issue Date **02 Nov 2010**

0019073450



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8212263Z**





Name
MUHAMMAD NAIM BIN ABDUL AZIZ

Race
MALAY

Date of birth
10-05-1982

Sex
M

Country/Place of birth
SINGAPORE




YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

Class 2B	Motorcycles <= 200 cc	02 Dec 2004
Class 2A	Motorcycles between 201 cc and 400 cc	07 Aug 2007
Class 2	Motorcycles > 400 cc	02 Nov 2010

NP 428A

Licence No: **S8212263Z**



5493502



NRIC No. **S8212263Z**



Date of issue
19-06-2015

Address
**APT BLK 571A WOODLANDS AVENUE 1
#03-894
SINGAPORE 731571**

**MSIG**

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

For any enquiries, please call the Underwriting agent : Commercial Agency Pte Ltd
23 Kelantan Lane #02-01/02 Kim Hoe Centre Singapore 208642 Tel : 63373133

MOTOR CYCLE COVER NOTE

(Strictly for Motor Cycle Insurance)

MSCN No : 72052250 Excess: \$300 (FIRE&THEFT) \$600 (ENDT 2K)
Agency : A0074-001-10223 Date : 06 Dec 2017
Name : MUHAMMAD NAIM BIN ABDUL AZIZ

having proposed for insurance in respect of the Motor Cycle described in the Schedule below the risks is hereby HELD COVERED
in the terms of the Company's usual form of Third Party Fire & Theft Policy applicable thereto for the

period from 16:09PM on 06 Dec 2017 to midnight on 05 Dec 2018 unless the
cover be terminated by the Company by notice in writing in which case insurance will thereupon cease and a proportionate part of
the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

Registration No.	FBK266T	Insured Value	Prevailing Market Value
Engine No.	50C738918	C.C.	134
Chassis No.	MH350C006EK739065		
Year Manufactured	2014	Year of Registration	2015
Make & Model	YAMAHA [JUPITER MX (HC)]		
Rider Type	Policyholder		

Use only for the following purpose : social domestic and pleasure purposes and in connection with policyholder's business or profession.

CERTIFICATE OF INSURANCE

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 the Road Transport Act, 1987 (Malaysia).

IMPORTANT

Please be informed that this cover note is issued for temporary use only and that you must exchange the cover note for the
certificate of insurance from the respective agents within 14 days hereof.



Not valid unless countersigned by Authorized Person

For MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurer

(Please read important information on the reverse page.)