

# NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: <b>02/01/18</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA/INC18000064/18</b>	SAS e-filing		
Veh No: <b>PC5766K</b>	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: <b>01/01/18</b> <b>1945</b>	i-Motor Claim Form	<b>MT/0975993</b>	
OD <b>(TP)</b> Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ( <b>N-51</b> )	Tel:	Fax:
TP Particulars:	Veh No: <b>SJP577A</b>	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

<b>NA1800025</b>	<b>Invoice Preparation Checklist</b>	<b>Amt (\$)</b> 1st Bill	<b>Amt (\$)</b> Add Bill
<b>Claimant's Particulars :-</b>	1) AR : Accident Reporting (\$30);		
<b>Driver/Owner:</b>	2) DA : Damage Assessment (\$100); INC (\$80)		
<b>Contact No:</b>	3) TF : Towing Fee \$40/\$45		
<b>Damaged Portion:</b>	4) FT : Follow-Through Survey \$120		
<b>QC Checked by (Engr-In-Charge):</b>	5) RT : Follow-Through Survey (Resurvey) \$30		
<b>Auditors' Comments :-</b>	For claiming against INC Only (wef 10 Jan 2005)		
<b>Cat. 1:</b>	6) TR : Re-inspection \$75		
<b>Cat. 2 / 3:</b>	7) NI : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*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 date/	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	02/01/2018 19:06
Date Of Accident	01/01/2018 19:45
Exact Location Of Accident	CLAYMORE HILL TURNING INTO SCOTTS RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC5766K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	EMPEROR INTERNATIONAL TRAVEL PTE LTD
Co Reg No	201502886W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97230351

### Vehicle Particulars

Manufacturer	KING LONG
Model	XMQ6129K AUTO
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	BUS

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093184587
Cover Note Number	

### Driver

Name of Driver	CHEN YUANBO
Passport No/FIN	G3306660R
Date Of Birth	22/01/1981
Occupation	OUTDOOR
Date Of Driving Pass	28/12/2016
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91488020
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 147A TYRWHITT ROAD  
 Postcode 207561  
 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

Type Of Accident SIDE SWIPE  
 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) 1

#### Details of Police Action

Was the accident reported to the police? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: WITH WORKSHOP  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJP577A  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category PRIVATE CAR  
 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:



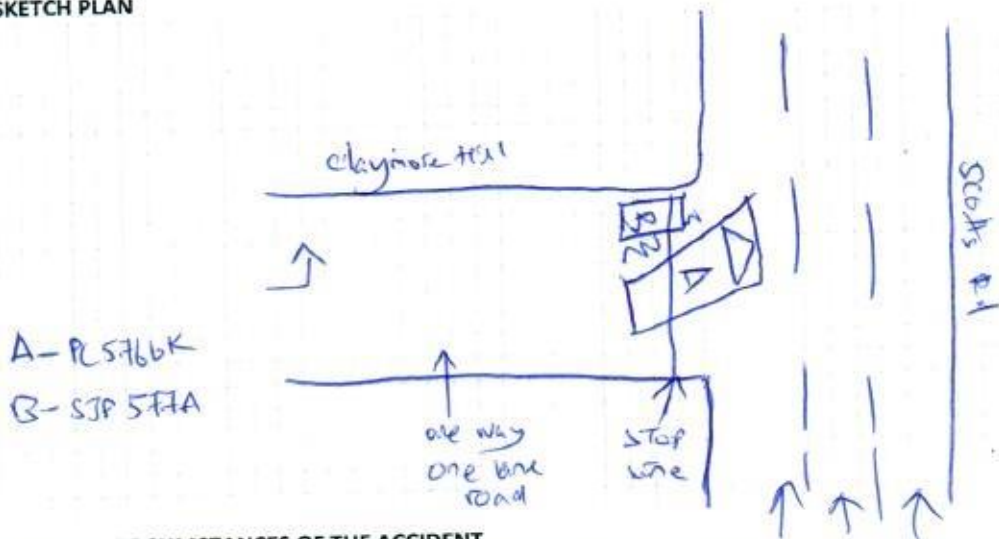
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

陈运波

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

02/01/18

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Chaymore Hill on a single line, one way road upon arriving at the junction turning into Scotts Rd, I stopped up to check for oncoming traffic. After checking it was clear, I proceeded to make a left turn into Scotts Rd. In the middle of my turning, veh (B) squeezed to my left side thus resulting the left portion of my vehicle to collided onto the front right portion of veh (B). Prior to my turning, veh (B) was not on my left side.

A - PC 5766K  
B - SJP 577A

## 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:

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



<b>Vehicle No.</b>	PC 57661K	<b>Model / Make</b>	King Long
<b>Date of Accident</b>	11/1/18		
<b>Time of Accident</b>	7.45pm	<b>HRS</b>	
<b>Location of Accident</b>	Claymore Hill turning into Scott's Rd		
<b>Exact purpose use during accident</b>	Commercial use		
<b>Name of Owner</b>	Emperor International Travel Pte Ltd		
<b>Telephone No.</b>	H/P: 97230251	<b>Home :</b>	<b>Office :</b>
<b>NRIC</b>	201502886W		
<b>Address</b>	147A, Townhill Rd, S (207561)		
<b>Claim type</b>	OD	(THIRD PARTY) REPORTING ONLY	
<b>Insurance Company</b>	NTM		
<b>Type of Coverage</b>	(Comprehensive)	Third Party	Third Party / Fire / Theft
<b>Policy No.</b>	5093184587		
<b>Name of Driver</b>	As Above If No, Chen Yuan Bo		
<b>NRIC</b>	G3306660E	<b>Any Passengers :</b> -	
<b>Date of birth</b>	22/1/81		
<b>Occupation</b>	(Outdoor)	/	Indoor
<b>Driving License Pass Date</b>	28/12/16		
<b>Gender</b>	(Male)	/	Female
<b>Contact No.</b>	H/P: 91488020	<b>Home :</b>	<b>Office :</b>
<b>Address</b>	As at C/O: Company Address		
<b>Driver have any own vehicle</b>	No,	If yes, Reg No.	
<b>Relationship</b>	(Employee)	If no, state	
<b>Weather condition</b>	(Clear)	Raining	Other
<b>Road Surface</b>	(Dry)	Wet	Other
<b>Any Injuries</b>	No,	If Yes, Who?	
<b>Name And Contact No.</b>			
<b>Name And Contact No.</b>			
<b>Police Report</b>	No,	If Yes, Where?	
<b>Vehicle B No.</b>	STP 577A	<b>Any Passengers :</b> -	
<b>Name of Driver</b>		<b>Contact No. :</b>	
<b>Vehicle C No.</b>		<b>Any Passengers :</b>	
<b>Vehicle D No.</b>		<b>Any Passengers :</b>	
<b>Vehicle E no.</b>		<b>Any Passengers :</b>	
<b>Vehicle F No.</b>		<b>Any Passengers :</b>	
<b>Vehicle G No.</b>		<b>Any Passengers :</b>	
<b>Witness Name</b>		<b>Witness Contact :</b>	
<b>Accident Portion</b>	Left Portion		
<b>Camera Recorder</b>	(Yes) / No		
<b>Email Address</b>	kyoeasyfly-travel.com		
<b>HAVE YOU BEEN APPROACH BY UNKNOWN PERSON SOLICITING / OFFERING ACCIDENT CLAIMS ASSISTANCE?</b>			
Yes / (No)			
<b>PARTICULAR WORKSHOP</b>	NSI AutoCare Pte		
<b>CONTACT NO.</b>	6842 0051 / 6744 0510		
<b>CONTACT PERSON</b>	Huan		
<b>FAX NO</b>	6741 0510		

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

Employer  
**EMPEROR INTERNATIONAL TRAVEL PTE. LTD.**

Sector: **SERVICE**

Name  
**CHEN YUANBO**  
Occupation  
**BUS DRIVER**

Work Permit No.  
**0 77208747**

Date of Application  
**06-07-2017**

Date of Issue  
**20-07-2017**

Date of Expiry  
**10-07-2019**

**L8154991**





**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **G3306660R**




Name:  
**CHEN YUANBO**

Birth Date: **22 Jan 1981**

Issue Date: **14 Nov 2016**

Valid Till **13/11/2021**

**002628868K**

**VISIT PASS**  
Immigration Regulations

Name  
**CHEN YUANBO**

Date of Birth: **22-01-1981** Sex: **M** Nationality: **CHINESE**

FIN: **G3306660R** Date of Issue: **20-07-2017** Date of Expiry: **10-07-2019**

**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 CLASS(ES)**

	EFFECTIVE DATE
Class 3 Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	28 Dec 2016
Class 4 Heavy motor cars and motor tractors > 2500 kg	28 Dec 2016

**G3306660R**

**S / No. 9000255261**

**Licence No: G3306660R**

**NP 428A**





**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)

**Certificate Number** : 5093184587

**Cover** : Comprehensive

1. Index mark and Registration Number of Vehicle  
Chassis Number

: PC5766K  
: LA6A1KBKXGB402849

2. Name of Policyholder

: EMPEROR INTERNATIONAL TRAVEL PTE LTD

3. Effective Date of Insurance

: 05 Aug 2017

4. Expiry Date of Insurance

: 04 Aug 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 the carriage of passengers in connection with the Policyholder's business.

(b) Limited to carry 49 passengers

**This Policy does not cover**

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

(b) Use whilst drawing a trailer except the towing (Other than for reward) 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 under these headings.

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: S\$3,000
EXCESS (SECTION II)	: S\$3,000
WINDSCREEN EXCESS	: S\$500
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD
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 : YES MOTORING PTE. LTD. (00000615381)

Date of Issue : 03 Aug 2017 18:48 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



10 Sin Ming Drive Singapore 575701  
Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

Our ref 2402170101N027003420

24 Feb 2017

EMPEROR INTERNATIONAL TRAVEL PTE LTD  
147A TYRWHITT ROAD  
SINGAPORE 207561



Dear Sir/Madam

### NOTIFICATION ON REGISTRATION OF VEHICLE AND ROAD TAX

We wish to inform you that you have successfully registered vehicle PC5766K on 24 Feb 2017. The Business Transaction Reference No. is 20170224151947247758.

2. 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                    | : EMPEROR INTERNATIONAL TRAVEL PTE LTD  |
| 2.  | Identification No. Type | : Company   |
| 3.  | Identification No.      | : 201502886W  |
| 4.  | Place Of Passport Issue | : -   |
| 5.  | Registered Address      | : 147A TYRWHITT ROAD<br>SINGAPORE 207561  |
| 6.  | Mailing Address         | : -   |
| 7.  | Vehicle No.             | : PC5766K   |
| 8.  | Vehicle Type            | : Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus  |
| 9.  | Vehicle Scheme          | : Public Service Vehicle (Others)   |
| 10. | Vehicle Make            | : KING LONG   |
| 11. | Vehicle Model           | : XMQ6129K AUTO   |
| 12. | Remarks                 | : This is a public service vehicle.<br>To renew the COE, the Prevailing Quota Premium payable<br>is that of Category C. |

3. You can login to LTA's e-Services@ONE.MOTORING (<http://www.onemotoring.com.sg>) to access a wide range of vehicle-related services using your NRIC number/FIN and SingPass. Firm and organisation can login to LTA's e-Services using User ID and Password or EASY. You can apply for your EASY account at <http://www.iras.gov.sg>. A separate Transaction PIN is required for the following transactions via the Internet or at our Electronic Service Agents. Please apply for your Transaction PIN before performing any of these transactions. Visit <http://www.onemotoring.com.sg> > **LTA Information & Guidelines > Transaction PIN & User Account** for more information about obtaining Transaction PIN and the documents needed (e.g. Board Resolution for company).

- Vehicle PIN - Transfer of Ownership and De-registration of Vehicle
- TCOE PIN - Transfer of TCOE (For Category C and E COE bid under individual)
- Rebate PIN - Transfer and Splitting of PARF/COE Rebate

4. All new In-vehicle Units (IUs) are covered by a 5-year warranty against manufacturer's defect.
5. Please contact our customer service officers on tel: 1800-CALL LTA (1800-2255 582) if you have any question.

Yours sincerely

NG LAY CHOO (MS)  
DEPUTY DIRECTOR, VRL SERVICE OPERATIONS  
VEHICLE SERVICES GROUP  
LAND TRANSPORT AUTHORITY

(This is a computer-generated notice that requires no signature.)

From 15 February 2017, you do not need to display road tax disc on the windscreen of your vehicle. LTA has stopped issuing physical road tax discs as part of our efforts to streamline our processes. Please ensure that your original motor insurance certificate is readily available in your vehicle at all times. If you are driving into Malaysia, you are advised to carry printed proof of the validity of your road tax in your vehicle.



Transaction ref 20170224151947247758

The owner and vehicle particulars for Vehicle No. PC5766K as at 24 Feb 2017 are as follows:

1.	Name	: EMPEROR INTERNATIONAL TRAVEL PTE LTD
2.	Identification No. Type	: Company
3.	Identification No.	: 201502886W
4.	Place Of Passport Issue	: -
5.	Registered Address	: 147A TYRWHITT ROAD SINGAPORE 207561
6.	Mailing Address	: -
7.	Vehicle No.	: PC5766K
8.	Effective Date of Ownership	: 24 Feb 2017
9.	Original Registration Date	: 24 Feb 2017
10.	First Registration Date	: 24 Feb 2017
11.	Vehicle Type	: Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
12.	Vehicle Scheme	: Public Service Vehicle (Others)
13.	Attachment 1	: Air-Conditioned
14.	Attachment 2	: -
15.	Attachment 3	: -
16.	Vehicle Make	: KING LONG
17.	Vehicle Model	: XMQ6129K AUTO
18.	Year of Manufacture	: 2016
19.	Primary Colour	: White
20.	Secondary Colour	: -
21.	Passenger Capacity	: 49
22.	Chassis/Trailer Chassis No.	: LA6A1KBKXGB402849 / -
23.	Propellant/Emission Standard	: Diesel / Euro V
24.	Engine No./Motor No.	: ISL89E5320B22129930 / -
25.	Engine Capacity(cc)/Power Rating(kW)	: 8849 / -
26.	Maximum Power Output(kW/bhp)	: - / -
27.	Unladen Weight(kg)	: 13300
28.	Maximum Laden Weight(kg)	: 18000
29.	Open Market Value	: \$140,731.00
30.	PARF Eligibility	: No
31.	PARF Eligibility Expiry Date	: -
32.	Minimum PARF Benefit	: \$0.00
33.	IU Label No.	: -
34.	COE No.	: 2016120105000362Z
35.	COE Expiry Date	: 23 Feb 2027
36.	COE Category	: C - Goods Vehicle & Bus
37.	Quota Premium/Prevailing Quota Premium	: \$49,002.00
38.	Actual Quota Premium/PQP Paid	: \$49,002.00
39.	Actual ARF Paid	: \$7,037.00
40.	CO2 Emission(g/km)	: -
41.	Actual CEVS Rebate Utilised	: -
42.	CEVS Surcharge Paid	: -
43.	Actual Green Vehicle Rebate Utilised	: -
44.	Vehicle Lifespan Expiry Date	: 23 Feb 2037
45.	Road Tax Amount	: \$850.00
46.	Road Tax Start Date	: 24 Feb 2017
47.	Road Tax End Date	: 23 Aug 2017
48.	Remarks	: This is a public service vehicle. To renew the COE, the Prevailing Quota Premium payable is that of Category C.

## Claim Handling

## Accident MT/0975993

Policy No.	5093184587	Vehicle No.	PC5766K	GST Registration No.	2011
Policyholder Name	EMPEROR INTERNATIONAL TRAVEL PTE LTD			Policyholder NRIC	2011
Product Code	FLEET INSURANCE	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	97230351	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

▼ Accident Details

Report Date	02/01/2018 20:28	Accident Report Within 24 hrs	Yes	Accident Type	Side
Date of Accident	01/01/2018	Time of Accident hh:mm	19:45	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	CLAYMORE HILL TURNING INTO SCOTTS RD				

▼ Benefits

▼ Excess

Own damage Excess	3,000.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	3,000.00	Outside Singapore TP Excess			

▼ GST Registered Information

GST Registered	Yes	GST Registration Date	28/01/2016
GST Registration No.	201502886W	GST Status Verified	Yes
Modification History			

## ▼ Policyholder Mailing Address

Address 1	147 TYRWHITT ROAD	Address 2	SINGAPORE 207561	Address 3	
Address 4		Address Type	Singapore address	Post Code	2071
Unit No.		Related Policy Number	5093184587		

## ▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	22/01
Unnamed driver Name	CHEN YUANBO	Driver NRIC	G3306660R	Driving Experience	1
Register Date of Driver License	28/12/2016	Driver Age	36	Contact No.(Home)	0
Contact No.(Mobile)	91488020	Contact No.(Office)	0	Address 3	
Address 1	147 TYRWHITT ROAD	Address 2	SINGAPORE 207561	Post Code	2071
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

## Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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## Modification History

## Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	EMPEROR INTERNATIONAL TRAV	Insured NRIC	2011	
Contact No.(Mobile)		Contact No.(Home)	NIL	Contact No.(Office)	+	
Email Address		OI Vehicle Number	PC5766K	TP Vehicle Number	SJP5	
Claim Description	PC5766K / SJP577A ON 1 Jan 2018				Name of Preferred Workshop	N-5
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Rec	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	Date Received	02/01	
Date Registered	02/01/2018 20:33	Claim Close Date		Total Loss but Repaired		
Report Taken By	ROSINDA	Workshop Repairer				

☒ Print AK letter

Save Submit

## Attachment



1/2/2018

## Claim Handling(accident reporting Claim Task 001 OD-MX)

Accident No.

MT/0975993

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

02/01/2018 00:00

Path \*

[Choose File](#) No file chosen[Choose File](#) No file chosen[Choose File](#) No file chosen[Choose File](#) No file chosen[Choose File](#) No file chosen[Choose File](#) No file chosen[Message Read](#)
















Category \*

Confidential

Urgency \*

<a href="#">Clear</a>	<a href="#">Please Select</a>	<a href="#">NO</a>	<a href="#">Normal</a>
<a href="#">Clear</a>	<a href="#">Please Select</a>	<a href="#">NO</a>	<a href="#">Normal</a>
<a href="#">Clear</a>	<a href="#">Please Select</a>	<a href="#">NO</a>	<a href="#">Normal</a>
<a href="#">Clear</a>	<a href="#">Please Select</a>	<a href="#">NO</a>	<a href="#">Normal</a>
<a href="#">Clear</a>	<a href="#">Please Select</a>	<a href="#">NO</a>	<a href="#">Normal</a>
<a href="#">Clear</a>	<a href="#">Please Select</a>	<a href="#">NO</a>	<a href="#">Normal</a>

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	NRIC/ Driving License	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	SAS	Normal	SAS 201
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 02 Jan 2018 20:32	Photos	Normal	Photos 20

## Video List

Uploaded By/Date	Folder Date	File Name	Source
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