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Owner / Driver: (Policy No: () Pario	d: (. ,	Teli Cover Type: (
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number

Contact Number

EMail Address

- Please report correctly the details of the accident to speed up the claims process.
- 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 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

The september of the second se	ACCIDENT STATEMENT
Date Of Report	19/01/2018 11:20
Date Of Accident	18/01/2018 18:15
Exact Location Of Accident	CARPARK AT BLK 125 BUKIT MERAH LANE 1
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	ET8859Y
Insured/Policyholder	
Name Of Registered Owner	TAN YOK KHOON
NRIC No	S1568345G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98393203
Alternative Phone No	OTHERS-98393203
Vehicle Particulars	
Manufacturer	NISSAN
Model	CEFIRO AUTO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5081896545-01
Cover Note Number	
Driver	
Name of Driver	TAN YOK KHOON
NRIC No	S1568345G
Date Of Birth	16/06/1962
Occupation	INDOOR
Date Of Driving Pass	04/01/1983
Driving Experience	35 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98393203
- make a River	

OTHERS-98393203

NOEMAIL

Address

BLK 287C JURONG EAST ST 21

#16-328

Postcode

603287

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

NO COLLISION

Weather Conditions

RAINING

Road Surface

WET

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

NO

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

YES

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: CHUANG NAI YING PEARLY

GENDER:

: FEMALE

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?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FBE107B

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)

Page 2 of 14

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.
- 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:

19/1/18 1/35 AM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

19/1/18 M35am.

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN	17	_ 1	notorajele	Parking
Car park at BUC 125 Bukit Lane 1	merah		1273	
Pivi	der pavement	zerb		
Cay re Vev			A-E1 B-FB	8859Y E 107B
DESCRIBE CIRCUMSTANCES OF TH		A		
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down vehicle	/motorbite so	und. The	erd is a	Ico III
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10 12/07/1/1/5	Trent 2			
DECLARATION				
I/We declare the foregoing particulars	are true in every respect.		7	1
	max		1) 19(1	12018
Policyholder's Signature	Driver's Signature		ng Centre Personnel's Sig	gnature
Date & Time:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FI	IN No.:	
States (Resemblements state)	19/1/18 1135am			

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1568345G





TAN YOK KHOON

Race CHINESE

Date of birth

16-06-1962

Country/Place of birth SINGAPORE



5370072



Sex

Date of Issue

10-10-2014

APT BLK 287C JURONG EAST STREET 21 #16-328 SINGAPORE 603287

FUU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES) Class 2B Motorcycles not exceeding 200 cc
Class 3 Motor Cass and Motor Tractors the weight of
Motor Cass and Motor Tractors the weight of
Motor Cass and Motor Tractors the weight of IN PERCHAN NP 428A



Certificate of Insurance

MOTOR VEHICLES	THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 185	9)
MOTOR VEHICLES	THIRD PARTY RISKS AND COMPENSATION) RULES, 1960	
ROAD TRANSPORT	ACT, 1987 (MALAYSIA)	

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

Certificate Number: 5081896545-01

1. Index mark and Registration Number of Vehicle

: ET8859Y

Chassis Number

: JN1CAUA33Z0145995

Cover : Third Party, Fire & Theft

2. Name of Policyholder

: TAN YOK KHOON

3. Effective Date of Insurance

: 20 Sep 2017

4. Expiry Date of Insurance

: 19 Sep 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.

This Policy does not cover

(a) Use for hire or reward.

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

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

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.

: N/A EXCESS (SECTION 1) : N/A EXCESS (SECTION 2) : N/A ADDITIONAL EXCESS : N/A UNNAMED DRIVER EXCESS REPAIR AT OWNER'S PREFERRED WORKSHOP : NO : YES INSURE WITH COE : YES (FREE) NCD PROTECTION : TAN YOK KHOON PRIMARY DRIVER : N/A NAMED DRIVER (1) : N/A NAMED DRIVER (2)

: N/A HIRE PURCHASE COMPANY

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

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

: INCOME-BRANCH SERVICES (00000097443)

Date of Issue

: 17 Aug 2017 10:15 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

eBao Tech					聯題				Gene	ralClaim
Hello, NAC_BUKIT_MERAH	_800676		10000000	THE RESERVE	CARRIED SPACE	,	Change La	nguage	· Change Passwo	rd • Log Out
My Desktop	Polic	y Query								
Notice of Loss	Policy N	0.				Date of Acci	dent	18/01	/2018 18:15	
	Vehicle	No.(For Motor)	ET8859Y							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	6	5081896545-01	TAN YOK KHOON	S1568345G	GPC	Third Party, Fire & Theft	ET8859Y	ET8859Y	20/09/2017	19/09/2018
						Continue				

		The same street with		Beligubolder	
olicy No.	5081896545-01	Policyholder Name	TAN YOK KHOON	Policyholder NRIC	S1568345G
Address	BLK 287C #16-328 JURONG EA	ST STREET 21	SINGAPORE 603287		
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Ssue Date	17/08/2017	Effective Date	20/09/2017 00:00	Expiry Date	19/09/2018 23:59
Third Party Excess	0	Own damage Excess	0	Windscreen Excess	0
Additional Excess		OS Premium	0		
Outside Singapore OD Excess	0	Outside Singapore TP Excess	0		
Agent	INCOME-BRANCH SERVICES	Agent Tel.	67886616	GST Flag	Υ
Co- Insurance Flag	No				
Open Policy Info					
Certificate Info					
Policy	holder Mailing Address				
Address 1	BLK 287C #16-328	Address 2	JURONG EAST STREET 21	Address 3	SINGAPORE 603287
Address 4		Address Type	Singapore address	Post Code	603287
Unit No.		Related Policy Number	5081896545-01		
1 Insure	ed Object: ET8859Y				
⊙ Endor	sements		2.0 (11) 22		
Sequer	nce Date of Endorsement	Endors	ement Type Endorse	ement Status	Endorsement Content

Claim Handling

		Mahiela Na	ETOGEDY	GST Registration No.	
olicy No.	5081896545-01	Vehicle No.	ET8859Y		SI
olicyholder Name	TAN YOK KHOON			Policyholder NRIC	
roduct Code	PRIVATE CAR INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No.(Mobile)	98393203	Contact No.(Office)	0	Contact No.(Home)	0
mail Address		Special Remark		eCode	N
(FK	No Yes	TCA	No Yes	eCode Reason	
ICD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No
Accident Details					
Report Date	22/01/2018 14:53	Accident Report Within 24 hrs	Yes	Accident Type	No
Date of Accident	18/01/2018	Time of Accident hh:mm	18:15	Country of Accident	S
Reporting Centre		Orange Force		ICM No.	
Accident Location	CARPARK AT BLK 125 BUKIT MERAH LANE	1			
▽ Benefits					
▽ Excess					
Own damage Excess	0.00	Additional Excess		Windscreen Excess	
The same of the sa	0.00	Outside Singapore OD Excess	0.00		
Jnnamed Driver Excess	0.00	Outside Singapore TP Excess	0.00		
Third Party Excess		Outside Singapore 11 anecas			
	No		GST Registration Date		
SST Registered SST Registration No.	No		GST Status Verified	Yes	
Modification History					
Policyholder Mailing Ad	dress				
Address 1	BLK 287C #16-328	Address 2	JURONG EAST STREET 21	Address 3	4
Address 4	ATTENTO ACCUMENTATION OF THE PARTY.	Address Type	Singapore address	Post Code	-
22.22.22.20		Related Policy Number	5081896545-01		
Unit No.		neidele Fairey Harrison			
⇒ OI Driver Info	TAN YOK KHOON	Driver Type	Main Driver		
Driver Name Unnamed driver Name	TAN TOK KHOON	Driver NRIC	S1568345G	Driver DOB	3
Register Date of Driver License	04/01/1983	Driver Age	55	Driving Experience	-
Contact No.(Mobile)	98393203	Contact No.(Office)	0	Contact No.(Home)	(
Address 1	BLK 287C	Address 2	JURONG EAST STREET 21	Address 3	
Address 4	DEX 2070	Address Type	Singapore address	Post Code	9
	445 770	8,0000,0000,0000	5 0 4 0 5 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Unit No. Does he own a Singapore	#16-328	R COLUMN TO THE		Driver Insurer Company	
Registered car?	Yes No	Driver Vehicle No.		Diver made Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No		
Modification History					
	h				
Claim 001 OD-MX New	M.				
Claim Type •	OD-MX *	Insured Name	TAN YOK KHOON	Insured NRIC	-
Contact No.(Mobile)	98393203	Contact No.(Home)	65699941	Contact No.(Office)	-
Email Address	tanyk@phillip.com.sg	OI Vehicle Number	ET8859Y	TP Vehicle Number	
Claim Description	ET8859Y / FBE107B ON 18 Jan 2018	STANDARY STANCE TO STANDARY		Name of Preferred Workshop	1
Preferred Workshop Contact	200000000000000000000000000000000000000	Insured Liability *	Partially at Fault	And the second s	
No.			To do your	GIA report	
Require Finalisation	Yes	Preferered Repair Option	Preferred Workshop, Name unknown	Course of Street, Course of the Course of th	
	22/01/2018 15:01	Claim Close Date		Date Received	
Date Registered		Workshop Repairer		Total Loss but Repaired	
Date Registered Report Taken By	KRISHNASAMY	A Cost of Proposition on New 2005			
	KRISHNASAMY	A TOST COLOR TO A OF MALLONS			

Accident No.

MT/0978833

Last Doc. Received

Yes No

Upload Date

22/01/2018 14:55

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Attachment		Uploaded By/Date	Category	9	Urgency	Descrip
err 680	NAC_PAYA_UBI_800601(NA	TIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 15:01	NRIC/ Driving License		Normal	NRIC/ Driving Lice
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