

NATIONAL Assessment Centre Services

(ver 1.2/2000)

NAIA4180/12588

Date In: 25/01/2018 16:40	Job description	Date & Time Completed	Done by
Ref No: NAIA4180/15794	SAS e-filing		
Veh No: PC 3213 C	E-mail (within 3hrs, A/C 3hrs)		
D.O.A: 24/01/2018 20:20	T-Motor Claim Form	mile979569	26/01/2018 11:08
OD / TR? Reporting Only	I-Motor W/O (within 60 hrs, TP 3hrs)		
	I-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass'l Report by Fax/Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QWt:	Tel:	Fax:
TP Particulars:	Yeh No: PHOENIXION	INC () / Non-INC ()
Owner / Driver:	Tel:	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: ()	Date: ()	Time: ()
Insured/Driver Liability: ()	% (Note: B/L 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 repeller.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks:	INC Ref No: 6788 6016	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

NAIA4180/15794	Invoice Preparation Checklist	Amended Bill
Customer Particulars:	1) AR: Accident Reporting (\$20):	
Driver/Owner:	2) DA: Damage Assessment (\$100): INC (\$50)	
Contact No:	3) TP: Towing Fee \$20/\$40	
Amended Portion:	4) PT: Follow-Through Survey \$120	
	5) XT: Follow-Through Survey (Resurvey) \$20	
	Exclusion: apply INC Only (w/ 10 Jan 2000)	
	6) TR: Re-inspection \$75	
	7) NI: \$20 DA + SMRT Survey \$140	
	8) NTUC Additional Services:	
	9) Q1:	
	*NI: Courtesy Car / Tol Allowance \$3	
	*NI: Repel Coordination \$10	
	*NI: Post Repair Inspection \$25	
	*NI: DY / Collision / Coordination \$3	
	TZ (NI): TP (Non-INC) against INC \$10	
	P) NI: 10 hrs Mobile \$10	
	Invoice dated	File Charged
	Invoice dated	File 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 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	25/01/2018 16:42
Date Of Accident	24/01/2018 20:20
Exact Location Of Accident	EXIT FROM BLOCK 507 WEST COAST DRIVE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC3213C
Insured/Policyholder	
Name Of Registered Owner	GRAND SINCERE TRANSPORTATION
Co Reg No	-
Email Address	RICHWANGLIMO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92393657
Alternative Phone No	OFFICE-92393657

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095317691
Cover Note Number	

Driver

Name of Driver	WANG KENG MUI
NRIC No	S1296338F
Date Of Birth	17/04/1958
Occupation	OUTDOOR
Date Of Driving Pass	01/08/1978
Driving Experience	39 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92393657
Fax Number	
Contact Number	OTHERS-92393657
Email Address	RICHWANGLIMO@GMAIL.COM

Address	BLK 676 HOUGANG AVENUE 8 #04-565
Postcode	530676
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	COLLIDED INTO PEDESTRIAN
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 ambulance?	NO
Was any other material or property damaged?	NO
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?	YES
If Yes, Please state which Police Station	
Police Station Name	KAMPONG JAVA NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 KAMPONG JAVA ROAD , POSTCODE: 228892 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2959999 - FAX NO: 63918499
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T20180125/2054

Attachment(s)

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

SKETCH PLAN

IMPORTANT NOTICE

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

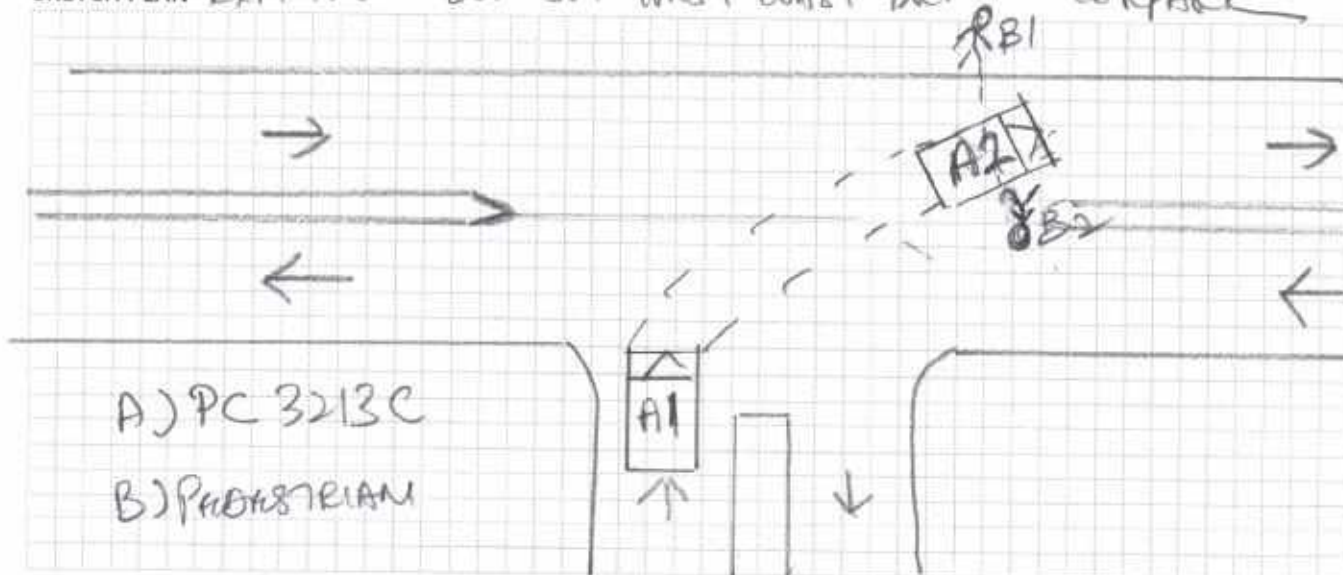
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

SKETCH PLAN EXIT FROM BLK 501 WEST COAST DRIVE CARPARK



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
T/20180125/2054

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:

25/1/2018

1505 hrs

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

25/01/2018

Kohli Wintab



SINGAPORE POLICE FORCE



T/20180125/2054

1 of 3

Police Station Of Origin:
Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-2959999

Report No: T/20180125/2054

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/01/2018 11:59	Vide Report No.:	Station Diary No.: 296
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Informant's Particulars

Name of Informant: WANG KENG MUI			Address: APT BLK 676 HOUGANG AVENUE 8 #04-565 SINGAPORE 530676	
ID Type / ID No.: NRIC NO / S1296338F			Contact No.: Home/Office:	Mobile: 92393657
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 59	Date of Birth: 17/04/1958	Type of Informant: Driver	
Race: Chinese			Language: Chinese	Institution / School Name:
Occupation: Van driver			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 24/01/2018 20:20	Type of Location: T-Junction
Location: Along Road 1 WEST COAST DRIVE				
Exit of Blk 507 West Coast Drive				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Pedestrian			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC3213C	Van					0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20180125/2054

2 of 3

Police Station Of Origin:
Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-2959999

Report No. T/20180125/2054

CONTINUATION OF REPORT

Driver			
Name	WANG KENG MUI	ID No.	S1296338F
Related Vehicle	PC3213C (Van)	Contact No.	92393657
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I am the above mentioned person residing at the above location.

On 24/01/2018 at about 2020hrs, I was driving my van bearing registration PC3213C at the car park of Blk 507 West Coast Drive, exiting to the main road of West Coast Drive. As it was raining heavily, I slowly inched out to check for both oncoming traffic. When I was making a right turn after ensuring there were no traffic, I realized brushed against a elderly female Chinese on my right side of vehicle. However I still provided her with my vehicle number and contact number.

Immediately, I rendered my assistance to her by calling ambulance for her and she refused. I also tried to obtain her particulars and offered to send her to clinic and she refused. She only provided me her address as Level 11 of Blk 507 West Coast Drive. When I enquired on her purpose of crossing the road, she assumed that I was giving her way. Thus, she decided to cross over.

I am lodging the report for any investigations that is required. My vehicle has in built camera and I have remove the SD card for further investigations.



**SINGAPORE
POLICE FORCE**



T/20180125/2054

3 of 3

Report No. T/20180125/2054

Police Station Of Origin:
Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-2959999

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:

E /

Sgt 2 TAN JUN WEN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
25/01/2018 11:59

Officer In Charge Of Case:
TP / AEIT /
SSI 2 SITIMARSITA BINTE BOHARI
Contact No.: 65476219

Classification Of Case:

Authentication Stamp
NP168



SINGAPORE
POLICE FORCE

SN 167

SIGNATURE



Grand Sincere Transportation

Blk 408 Ang Mo Kio Ave 10 #01-785 Singapore 560408

Hp: 92731323 Fax: 64582703

Reg. No: 53071577E

To Whom It May Concern :

Dear Sir/Mdm,

This is to certify that Mr Wang Keng Mui, NRIC number S1296338F is an employee at Grand Sincere Transportation and working as a driver, vehicle license plate number – PC3213C since 1 November 2017.

If you have any enquires regarding Mr Wang Keng Mui's employment, please contact me at 92731323.

Sincerely,

Mike Yong
Manager

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

04 Nov 2017

Our ref 0411170203N057010001

GRAND SINCERE TRANSPORTATION 001924
APT BLK 408 ANG MO KIO AVENUE 10
#01-785
SINGAPORE 560408



Dear Sir/Madam

**NOTIFICATION ON SUCCESSFUL REPLACEMENT OF VEHICLE REGISTRATION NO.
PC6397K WITH VEHICLE REGISTRATION NO. PC3213C**

You may be pleased to know that your application of 04 Nov 2017 for replacement of registration number is approved.

2. The details of the vehicle after the transaction are as follows:

Vehicle Registration No.	: PC3213C (Previously PC6397K)
Vehicle Make	: TOYOTA
Vehicle Model	: HIACE COMMUTER 3.0 GL AUTO
Chassis No.	: KDH2230027428
Engine No./ Motor No.	: 1KD2598886 / -

Claim Handling

Accident MT/0979569

Policy No.	5095317691	Vehicle No.	PC3213C	GST Registration No.	
Policyholder Name	GRAND SINCERE TRANSPORTATION			Policyholder NRIC	
Product Code	BUS-INSURANCE	Cover Type	Comprehensive	Loading	
Contact No.(Mobile)	92393657	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Not available

Accident Details

Report Date	26/01/2018 10:36	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Per
Date of Accident	24/01/2018	Time of Accident hh:mm	20:20	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	EXIT FROM BLOCK 507 WEST COAST DRIVE CARPARK				

Benefit

Excess

Own damage Excess	3,000.00	Additional Excess		Windscreens Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	1,500.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

Policyholder Mailing Address

Address 1	BLK 408 #01-785	Address 2	ANG MO KIO AVENUE 10	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5095317691		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	
Unnamed driver Name	WANG KENG MUI	Driver NRIC	S1246338P	Driving Experience	
Register Date of Driver License	01/08/1978	Driver Age	39	Contact No.(Home)	
Contact No.(Mobile)	92393657	Contact No.(Office)		Address 3	
Address 1	BLK 676 #04-565	Address 2	HOUGANG AVENUE 8	Post Code	
Address 4		Address Type	Foreign address		
Unit No.	04-565				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.	PC3213C	Driver Insurer Company	

Declaration

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

Claim 001

New

Claim Type *	OD-MX	Insured Name	GRAND SINCERE TRANSPORTATION	Insured NRIC	
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	PC3213C	TP Vehicle Number	
Claim Description	PC3213C / PEDESTRIAN ON 24 Jan 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	
Date Registered	26/01/2018 11:07	Claim Close Date		Date Received	
Report Taken By	ROSLI WAHAB				












☐ Print AK letter

Save Submit

Attachment

Accident No.	MT/0979569	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	26/01/2018 11:08
Path *		Category *	Confidential
		Urgency	Normal

<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	<input type="text" value=""/>	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	<input type="text" value=""/>	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	<input type="text" value=""/>	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	<input type="text" value=""/>	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	<input type="text" value=""/>	Normal

Attachment	Uploaded By/Date	Category	Urgency	De
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:08	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:08	SAS	Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:08	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:08	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:08	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:07	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:07	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:07	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:07	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:07	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:07	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 26 Jan 2018 11:07	Photos	Normal	Photo

Uploaded By/Date	Folder Date	File Name	Source
		<input type="button" value="Display in New Window"/>	<input type="button" value="Scan and uploading"/>

ACCIDENT STATEMENT

ACCIDENT DATE: 24 / 01 / 2018 (DD/MM/YYYY), TIME: 20 : 20 (HH:MM)

LOCATION: EXIT FROM BLK 507 WALK CORNER DRIVE

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: PC 3213C
 b) INSURANCE COMPANY: NITUC
 c) POLICY NUMBER: 5095317691
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: TOYOTA HIACE
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING
 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: GRAND SWEET TPT. (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No. of passengers
(including driver)
(1)

- DRIVER
 a) NAME: WONG KANG MUN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: 92393657
 c) ADDRESS: _____

* d) DATE OF BIRTH: (____/____/____) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

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

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: KOMPANG JAYA

8. THIRD PARTY VEHICLE

No. of passenger
(including driver)
()

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

9. THIRD PARTY VEHICLE

No. of passenger
(including driver)
()

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

email = richwardimo@gmail.com

fax =

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1296338F



Name

WANG KENG MUI

王 经 星

Race

CHINESE

Date of birth

17-04-1958

Country of birth

SINGAPORE

Sex

M

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1296338F

Name

WANG KENG MUI

Birth Date 17 Apr 1958

Issue Date 16 Jan 2008



Land Transport Authority

VOCATIONAL LICENCE



Licence No : S1296338F

Name : WANG KENG MUI

Issue Date : 29/1/2018

Please visit www.lta.gov.sg to check the status of this vocational licence



4821438

NRIC No. S1296338F



Date of issue

20-12-2012

Address

APT BLK 676 HOUGANG AVENUE B
#04-555
SINGAPORE 530676

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

61 Aug 1978



NP 428A

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	18/07/1998
03	BUS VL	03/01/2012
04	BUS ATTENDANT	03/01/2012



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 : 5095317691

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle : **PC3213C**
Chassis Number : KDH2230027428
2. Name of Policyholder : GRAND SINCERE TRANSPORTATION
3. Effective Date of Insurance : 30 Oct 2017
4. Expiry Date of Insurance : 29 Oct 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 13 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\$2,000
EXCESS (SECTION II)	: S\$1,500
WINDSCREEN EXCESS	: S\$500
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: UNITED OVERSEAS BANK LIMITED
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 : DICKSON AUTO AGENCY (00000614645)
Date of Issue : 30 Oct 2017 17-30 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

MT/AE/VEHREG/134

26 Jan 2018

GRAND SINCERE TRANSPORTATION
BLK 408 #01-785
ANG MO KIO AVENUE 10
SINGAPORE 560408

Dear Policyholder

AMENDMENT FOR POLICY NUMBER: 5095317691
VEHICLE NUMBER: PC3213C

Thank you for giving us the opportunity to serve you.

We confirm that from 04 Nov 2017, the Vehicle Number is amended as follows:

VEHICLE REGISTRATION NUMBER: PC3213C

The terms and conditions of this policy remain unchanged.

Please attach this letter to your motor policy document as it serves as an Endorsement to your policy.

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at csquery@income.com.sg. Alternatively, you may contact your agent DICKSON AUTO AGENCY at 63447667 or email insurance@dickson-auto.com. We would be most happy to assist you.

Yours sincerely



Eddie Loke
Senior Underwriting Manager
Motor Insurance