Date In: 2/2/18-15:08	Jeb description	,	Date &Time Completed	Done	py.
Re[No: NA / INC 1800 2147/24	SAS e-filing				
Veh No: POESGINH	E-mail (within	Shrs, AIC 2hrs)			*
D.O.A: 29/1/18-19:30	i-Motor Clai	im Form	M7/0980740	2/2/18 11	8:75
	i-Motor W/C	(Within: OD 2hrs	-		
OD / TP- Reporting Only	i-Photo Uplo	paded	- 2		Service of
TDI	Assessment/St	urvey Report			
TP Insurer:	Ass't Report b	y Fax / Hand t	o Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW	: (Tel:	Fax:	
TP Particulars: Veh No:	sc1353U	. INC()/Non-INC()	V	
Owner / Driver: (Tel:)	
Policy No: ()	Period: ()	Cover Type: ().	
Confirmed by : (Date:	Time:)	
Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-2	0%; P: 21-79%. F: 80-	100%]	
Year of Registration: () Warranty: YES ()/NO()		
Excess: (\$) Loading:	\$1,000 ()/\$2,000)()			
General Remarks:			To a second second	2004	٠.
() Walk-In Customer: Customer's	the state of the s				
) Total Loss Case : to e-mail In					
<u> </u>	voice: YES () / N	NO () : T	owing Co: ()
			- 4	POPINSER W	Ç#:"
		,,,,	Date&Time Completed	Done	by
temarks: (INC hotline: 6788 661)	- 4	Done	by
Remarks: (INC hotline: 6788 66) 1) Apply for Transport Allowance (2) QC Check / Post Repair Inspection) / Courtesy Car ()	- 4	Done	by
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver,
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

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	02/02/2018 15:08	
Date Of Accident	29/01/2018 19:30	
Exact Location Of Accident	TAMPINES AVE 5 TWDS PIE	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FBE8915H	

Insured/Policyholder

Name Of Registered Owner MUHD SIDDIQ BIN NAHARUDIN

NRIC No S8742419G Email Address NOEMAIL

 Mobile Phone No
 (LOCAL) +65-91734295

 Alternative Phone No
 OFFICE-91734295

Vehicle Particulars

Manufacturer PIAGGIO

Model GILERA RUNNER ST 200

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?

...

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

MOTORCYCLE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage THIRD PARTY

Fleet Policy NO

Policy Number 5093797995

Cover Note Number

Driver

Name of Driver ZURAIMI BIN NAHARUDIN

 NRIC No
 S7928649D

 Date Of Birth
 29/09/1979

 Occupation
 OUTDOOR

 Date Of Driving Pass
 27/01/2000

Driving Experience 18 YEARS AND 0 MONTHS

Gender MAI

Mobile Number (LOCAL) +65-81127976

Fax Number

Contact Number OFFICE-81127976

EMail Address NOEMAIL

Address

BLK 102 BEDOK NORTH AVENUE 4

#03-2032

Postcode

460102

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SIBLING

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CHANGE/CROSS LANE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

YES

ambulance?

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)

2

Passenger 1

NAME:

: SAYKHA YUSUPOVA

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police? If Yes, Please state which Police Station

YES

Police Station Name

BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-2449999 - FAX NO: 62447258

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident REFER TO POLICE REPORT - T/20180130/2090.

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

SLL3531J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Page 2 of 24

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

ZURAIMI BIN NAHARUDIN

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

FBE8915H

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address Postcode

DETAILS OF INJURED PERSON 2

Name

SAYKHA YUSUPOVA

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

FBE8915H

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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.
- Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
 interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

+ +	A-FBE 8915 H.
t 0 00 - Clare	B-561-3531.3
+	
	da Bara ya mwa ka mina 4 Minari A

As per police rep	port no. T/Z	0180130/2090 -	
			 the state of the s
			

DECLARATION

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

Policyholder's Signature Date & Time:

Driver's Signature (If driver a policyholder)
Date Time: Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

Vehicle No.	FBE 8915H Model / Make
Date of Accident	29/1/18
Time of Accident	19.30 HRS
ocation of Accident	Tampines Ave 5 Toward PIE
Exact purpose use during accid	
Name of Owner	Muhammad Siddig Bin Naharadia
Telephone No.	H/P: 9173 4795 Home: Office:
NRIC	587424199
Address	BIK 8421) Tumpites St 82 #05-54 S(524842)
Claim type	OD THIRD PARTY REPORTING ONLY
Insurance Company	NTUC
Type of Coverage	Comprehensive Third Party Third Party / Fire /Theft
Policy No.	5093797995
10.	As Above (6No. 7, -1, '8' N. I. and's
Name of Driver	As Above (f No) Zuraini Bin Naharydin
NRIC	5792886491) Any Passengers: 1 (F)
Date of birth	29/9/1919
Occupation	Outdoor / Indoor
Driving License Pass Date	27 Jan 2000
Gender	Male / Female
Contact No.	H/P: 8112 7976 Home: Office:
Address	BIK 102 Bedok North Ave 4 \$03-2032 S(460102).
Driver have any own vehicle	No, If yes, Reg No.
Relationship	Employee, If no, state Brother
Weather condition	Clear Raining Other
Road Surface	Dry Wet Other
Any Injuries	No, (f Yes, Who?
Name And Contact No.	Zuraini Bin Naharadin
Name And Contact No.	Saykha Tusupova 4851 9390
Police Report	No, If Yes, Where? Bedok North NPC
Vehicle B No.	SLL 3531 J Any Passengers : Ni
Name of Driver	Contact No. :
Vehicle C No.	Any Passengers :
Vehicle D No.	Any Passengers :
Vehicle E no.	Any Passengers :
Vehicle F No.	Any Passengers :
Vehicle G No.	Any Passengers :
Witness Name	Witness Contact :
Accident Portion	Hit On Rear Right, Full On Right.
Camera Recorder	Yes / No
Email Address	
HAVE YOU BEEN APPROACH	BY UNKNOWN PERSON SOLICITING /
OFFERING ACCIDENT CLAIMS	ASSISTANCE? Yes / No
PARTICULAR WORKSHOP	Moder SI Ple Ltol
CONTACT NO.	6842 0051 / 6744 0510
CONTACT PERSON	Jucky
FAX NO	6741 0510
WORKSHOP EMAIL ADDRESS	sales @ n51. com. sg





/20180130/2090

1 of 4 Report No. T/20180130/2090

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

REPORT OF A TRAFFIC ACCIDENT

		The production of the Company of the
Date/Time Report Made:	Vide Report No.:	Station Diary No.:
30/01/2018 15:23	G/20180129/0189	55

30/01/20	10 13.23		0/20100120/0100		
Informa	nt's Partici	ulars			
	Informant: I BIN NAH		Address: APT BLK 102 BEDOK NO SINGAPORE 460102	RTH AVENUE 4 #03-2032	
ID Type / ID No.: NRIC NO / S7928649D		49D	Contact No.: Home/Office: Mobile: 81127976		
National SINGAP	ity: ORE CITIZ	'EN	Email:		
Sex: Male	Age:	Date of Birth: 29/09/1979	Type of Informant: Rider		
Race: Malay			Language:	Institution / School Name:	
	Occupation: VENUE MANAGER		Driving Licence Information Class: 2B,2A,3	on: Date of Expiry:	

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/01/2018 19:30	Type of Location Straight Road
Location: Along Road 1 TAMPINES A TAMPINES A Weather: Clear		E Road Surface: Dry		Road Speed Limit:
Traffic Flow: Traffic		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collis	sion: cle Against - Others			Anyone conveyed by ambulance: Yes

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
FBE8915H	Motorcycle				Seriously Damaged	1
SLL3531J	Car				-	0

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE8915H	NTUC Income Insurance Co-Operative Limited	5093797995	28/08/2017	27/08/2018





2 of 4

Report No. T/20180130/2090

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

CONTINUATION OF REPORT

Details of Person				60000		
Any Pedestrian In			1		0	NIA
No. of Pedestrians Injured: NIL			Use of Ped	destrian	Cross	ing: NA
Rider						07000040D
Name	ZURAIMI BIN NAHA	RUDIN		ID No.		S7928649D
Related Vehicle	FBE8915H (Motorcy	cle)		Conta	ct No.	81127976
Hospital/Clinic	CHANGI GENERAL		Class Driving Licend Expiry	g ce &	Class: 2B,2A,3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
	ted Medical Leave	05	Degree of	f Injury	Slight	
Pillion						
Name	SAYKHA YUSUPOVA			ID No	10	S7787237Z
Related Vehicle	FBE8915H (Motorcycle)			Conta	ct No.	98519390
Hospital/Clinic	CHANGI GENERAL HOSPITAL			Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
	ted Medical Leave	02	Degree o	f Injury	Sligh	t

Brief Details.

On the 29/01/2018 at about 1930hrs, I was riding my motorcycle bearing registration number plate FBE 8915H along Tampines Avenue 5 towards PIE. There were 4 lanes and I was at the middle lane. As I was travelling that said lane, I was checking my blind spot on my right when I noticed there was a white colour car behind me. Suddenly, I felt that the car behind me made a sudden acceleration and had hit my motorcycle on the right. Due to the impact, I lost balance and my motorcycle fell to the right and it was dragged on the road surface. Both my pillion(wife) and myself also fell to the road surface.

I can only recall that I noticed the said white car had stop his car a bit further on the front first lane. I also recalled that police arrived at the accident location and attended to me and my wife. We were then conveyed to Changi General Hospital via ambulance.

I also wish to state that the driver of the white car bearing registration number plate SLL3531J came to me and asked what happened. At that point of time, I did not know it was him who was the said driver. I told him that I do not know, suddenly a white car hit me and I fell. He then told me that he was the white car driver and he did not hit me and that I was the one who fell on my own.

I also wish to state that as of now, I do not know how bad the damage to my motorcycle as it is now still with Traffic Police.





3 of 4

Report No. T/20180130/2090

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999 CONTINUATION OF REPORT





Report No. T/20180130/2090

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

Sketch Plan

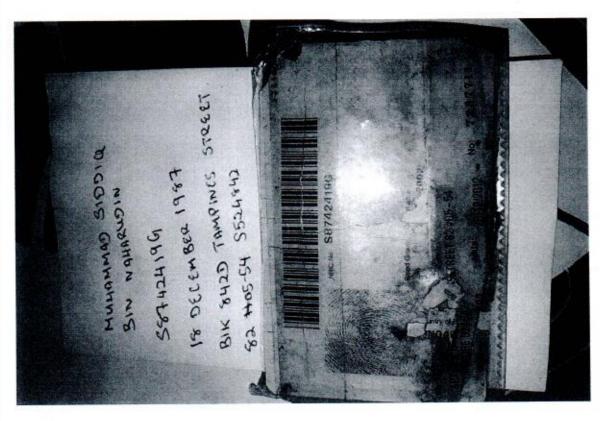
Informant is not able to provide sketch plan

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.

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: G / Staff Sgt HALIMATUS SA'DIAH BINTE ARIFFIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 30/01/2018 15:23
Officer In Charge Of Case: TP / GIT / Insp NORHIDAWATI BINTE AHM Contact No.: 65476310 SINGAPORE POLICE FORCE	Classification Of Case:
Authentication Stamp NP168	SIGNATURE





Driver



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7928649D



ZURAIMI BIN NAHARUDIN

زورايمي بن نهارودين

Race MALAY

29-09-1979 M

SINGAPORE

579286490

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

EFFECTIVE DATE

Moisreycks == 300 CC Moisreycles between 201 CC and 400 CC Moisr cars == 3000 kg with == 7 passengers, exclusive of the driver, and moise tractions/vehicles == 2500 kg

S / No.9000302392

57928649D

NP 428A

4490599 APT BLK 102 BEDDK NORTH AVENUE 4 #03-2032

APT BLK 102 BEDDK NORTH AVENUE 4 #03-2032

14/07/2014

S7028649D Date: AVENUE 2

NRIC No: ORE 460007



Certificate of Insurance						
MOTOR VEHICLES (THIRD PARTY RISKS						
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1960				
ROAD TRANSPORT ACT, 1987 (MALAY		W. L.				
MOTOR VEHICLES (THIRD PARTY RISKS	S) RULES, 1959 (MALAY					
Certificate Number : 5093797995		Cover : Third Party				
 Index mark and Registration Number 	er of Vehicle	FBE8915H				
Chassis Number		: ZAPM4640100004714 : MUHD SIDDIQ BIN NAHARUDIN				
Name of Policyholder Second Insurance		: 28 Aug 2017				
Effective Date of Insurance Expiry Date of Insurance		: 27 Aug 2018				
 Persons or Classes of Persons entit 	tled to drive#					
(a) Named Driver(s) Only.						
Provided that the person drivi	n so permitted and is n	ordance with the licensing or other laws or regulations to drive of disqualified by order of a Court of Law or by reason or any the Motor Vehicle.				
6. Limitations as to Use#						
(a) Use for social domestic and p	leasure purposes and i	n 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	i-testing				
		n connection with any trade or business.				
(d) Use for any purpose in conne	ction with the Motor i	rade.				
headings.	- 10	Act, 1987 (Malaysia), are not to be included under these				
EXCESS (SECTION 1)	: N/A : N/A					
EXCESS (SECTION 2) INSURE WITH COE	: N/A					
NAMED DRIVER (1)	500 8099900	D SIDDIQ BIN NAHARUDIN				
NAMED DRIVER (2)		NAHARUDIN				
HIRE PURCHASE COMPANY	: N/A					
SUM INSURED	: N/A					
Vehicles (Third Party Risks and Comp Agency : SEE SIEW	o which this Certificate ensation) Act (Chapter V SHUEN (SHI XIUXUAN 017 10:22 hrs	relates is issued in accordance with the provisions of the Motor 189) and Part IV of the Road Transport Act, 1987 (Malaysia) I) (00000602260)				
Countersigned By:	authorised Officer	For NTUC INCOME INSURANCE CO-OPERATIVE LIMIT				

eBao Tech									Gene	ralClaim
Hello, NAC_PAYA_UBI_800	0601					,	Change Lan	guage :	Change Passwo	rd • Log Ou
My Desktop	Polic	y Query								
Notice of Loss	Policy N	0.				Date of Ac	cident	29/01/	2018 19:30	
	Vehicle	No.(For Motor)	FBE8915H		A.					
					1	Search				
	Select	Policy No.	Policyholder Name	, Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5093797995	MUHD SIDDIQ BIN NAHARUDIN	S8742419G	GMC	Third Party	FBE8915H	FBE8915H	28/08/2017	27/08/2018
					- 1	Continue				

Policy No.	5093797995	Policyholder Name	MUHD SIDDIQ BIN NAHARUDIN	Policyholder NRIC	S8742419G	
Address	BLK 842D #05-54 TAMPINES ST	REET 82 SING	SAPORE 524842			
Product Name	MOTORCYCLE INSURANCE	Plan	*	Group Policy Flag	N	
Policy ssue Date	28/08/2017	Effective Date	28/08/2017 00:00	Expiry Date	27/08/2018 23:59	
Third Party Excess	0	Own damage Excess	0	Windscreen Excess		
Additional Excess		OS Premium	0			
Outside Singapore OD Excess		Outside Singapore TP Excess				
Agent	SEE SIEW SHUEN (SHI XIUXUAI	Agent Tel.	96533188	GST Flag	Υ	
Co- insurance Flag Open	No					
Policy Info Certificate Info			•			
	older Mailing Address					
Address 1	BLK 842D #05-54	Address 2	TAMPINES STREET 82	Address 3	SINGAPORE 524842	
Address 4		Address Type	Singapore address	Post Code	524842	
Unit No.		Related Policy Number	5093797995			
) Insure	d Object: FBE8915H		4			
♥ Endors	sements					
Sequen	ce Date of Endorsement	Endorse	ement Type Endorseme	Endorsement Content		

Secondos er	Walking the C	EDESOISH		GST Registration No.			
	Venice No.	4000033H				587424196	
	QCSQCC	Water State				0	
MOTORCYCLE INSURANCE	Cover Type						
91734295	Contact No. (Office)	0			- 3	No V	
NO. 1079 (2010) 10	The state of the s	100000000000000000000000000000000000000				105/22/31	
						No	
No	WCD Euroseuser(so)	*					
ex 100 100 to 10.57	Accident Depart Within 24 hrs	Yes		Accident Type		Colision - Char	ige / Cross lane
						Singapore	
29/0L/2018		10.30					
TAMPINES AUF 5 TWOS DIE							
TAMPINES AVE STWOSPIE							
0.00	Additional Excess			Windscreen Excess			
9.00							
900							
	Outside Singapore TP Excess						
		CCT	Barreton Pate				
No				Yes			
		-	arana various				
		Transfer in the		Address 1		SINGAPORE	24042
BLK 842D #05-54	Address 2		10000000				
	Address Type			Post Cade		524842	
	Related Policy Number	509379799	5				
	material and the second	Maria Maria					
ZURAIMI BIN NAHARUDIN				December 2009		20/09/1979	
27/01/2000				2317			
81127976			10000000				2
BLK 102	Address 2						
SINGAPORE 460102	Address Type	Singapore a	ddress	Post Code		460102	
03-2032							
○ Yes No	Driver Vehicle No.			Driver Insurer Comp	any		
○ Yes ® No	Driver Vehicle No.			Driver Insurer Comp	any		
○ Yes No 0 mg	Driver Vehicle No. Any Injury?	® Yes ○ N	10	Driver Insurer Comp	any		
15. No. 20	Any injury?	® Yes ○ N	10	Driver Insurer Comp	any		
15. No. 20	Any injury?	® Yas ○ N	10	Oriver Insurer Comp	any		
15. No. 20	Any injury?				any		
15. No. 20	Any injury?		DO BIN NAHARUQIN	Insured NRIC	any	58742419G	
0 mg	Any injury?				arry		
0 mg	Any injury? \$" Insured Name	MUHD STOL		Insured NRIC	any	\$8742419G SLL35313	
0 mg	Any injury? \$" Insured Name Contact No.(Home)	MUHD 5300 65840240		Insured NRIC Contact No.(Office)			
0 mg	Any injury? \$" Insured Name Contact No.(Home)	MUHD 5300 65840240	MIGURAHARI NIB QIC	Insured NRIC Contact No.(Office) TP Vehicle Number			
0 mg OD-MX \$2400459 FBEE915H / SLL15331 ON 29 Jan 2018	Any injury? (Insured Name Contact No.(Home) OI Vehicle Number	MUHD SIDE 65840240 FBE8935H	DIQ BIN NAHARUQIM	Insured NRIC Contact No.(Office) TP Vehicle Number			V
0 mg OD-MX \$2400459 FBE8915H / SLL15331 ON 29 Jan 2018 Ves	Insured Name Contact No.(Home) OI Vehicle Number Insured Liability * Preferred Repair Option	MUHD SIDE 65840240 FBE8935H	DIQ BIN NAHARUQIM	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W		SU.3531J	
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0 mg OD-MX \$2400459 FBE8915H / SLL15331 ON 29 Jan 2018 Ves \$22/02/2018 18:55	Insured Name Contact No.(Home) OI Vehicle Number Insured Liability * Preferred Repair Option	MUHD SIDE 65840240 FBE8935H	BIN NAHARLOIN R Workshop, Name unknown	Insured NRIC Contact No.(Office) TP Vehicle Number Name of Preferred W		SUL35313	
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0 mg CO-MX	Insured Name Contact No. (Home) OI Vehicle Number Insured Dabetry * Preference Repair Option Claim Close Date	MUHD SIDI 65840240 FBB8915H Not at Faul Prefeired V	DOQ BON NAHARUDIN	Insured NRIC Contact No.(Office) TP Vehicle Number Name of Preferred W		SUL35313	
0 mg CO-MX ▼ E2400459 FBEB915H / SLL135311 ON 29 3an 2018 Ves ▼ 02/02/2016 18:55 Dackson MT/0980740 ▼ Yes Ne	Insured Name Contact No.(Home) OI Vehicle Number Insured Lability * Preference Repair Option Claim Close Date	MUHD SIDI 65840240 FBB8915H Not at Faul Prefeired V	DIQ BIN NAHARUDIN R V Norkshop, Name unknown W mit	Insured NRIC Contact No.(Office) TP Vehicle Number Name of Preferred W		SUL35313 Received 02/02/2018 0	
0 mg CO-MX	Insured Name Contact No. (Home) OI Vehicle Number Insured Date Preferend Repair Option Claim Close Date Claim No. Upload Date	MUHD 5301 65640240 FBE8915H Not at Faul Preferred V	DIQ BIN NAHARUDIN R Workshop, Name unknown O01 O2/02/2018 18:56 Category *	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred V GIA report Date Received	Vorkshop	SLL35313 Received 02/02/2018 0	00:00
0 mg CO-MX ▼ E2400459 FBEB915H / SLL135311 ON 29 3an 2018 Ves ▼ 02/02/2016 18:55 Dackson MT/0980740 ▼ Yes Ne	Insured Name Contact No. (Home) OI Vehicle Number Insured Date Preference Repair Option Claim Close Date Claim No. Upload Date	MUHD S301 65640240 FBE8915H Not at Faul Preferred V Sare Sub	DIQ BIN NAHARIJOIN R Workshop, Name unknown O01 O2/02/2018 18:56 Category * Please Select	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred V GIA report Date Received Confidential	Urgenc Normal	Received 02/02/2018 0	00:00
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	® No ○ Yes No 02/02/2018 16:53 29/01/2018 TAMPINES AVE 5 TWDS PIE 0.00 0.00 stion No dreas BLK 842D #05-54 ZURAIMI BIN NAHARUDIN 27/01/2000 81127976 BLK 102 SINGAPORE 460102	MUHD SIDDIQ BIN NAHARUDIN NDTORCYCLE INSURANCE 91734295 Coreact No. (Office) Special Remark TCA NO 02/02/2018 L8153 Accident Report Wehin 24 hrs Time of Accident Nommo Orange Porce 1 Additional Excess Quiside Singapore OD Excess Quiside Singapore TP Excess Stion No drank BLK 842D #05-54 Address 2 Address Type Related Pokoy Number 22/01/2000 B1127976 BLK 102 SINGAPORE 460102 Address 2 Address 2 Address 2 SINGAPORE 460102 Address 2 Address 2 SINGAPORE 460102 Address 7 Address 7	MUHO SIDOIQ BIN NAHARLOIN MOTORCYCLE INSURANCE 91734295 Contact No. (Office) Special Remark TCA No No No No No No No No No N	MUHO SIDDIQ BIN NAMARLOIN	MUHO SIDDICE BIN NAHARIJOIN NOTORCYCLE TRSURANCE Cover Type Third Party Loesing Contact No. (Office) Secial Remark Secial Remark Secial Remark Secial Remark No No No No No No No No No N	MULOS DIDIGIS BIN NAMARILIDIN	### ### ### ### ### ### ### ### ### ##

Attachment	u	ploaded By/Date	Category	9	Urgency	Description	Mag Sent? Action (CO)
HORSE !	NAC_PAYA_UBI_800601(NATION	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe is 2018 18:56	NR3C/ Driving License		Normal	NR3C/ Driving License 2018-2-2	Edit
***	NAC_PAYA_UBI_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:56	SAS		Normal	SAS 2018-2-2	Edit
34	NAC_PAYA_UB1_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:56	Photos		Normal	Photos 2018-2-2	Edit
24	NAC_PAYA_UBI_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2016 18:56	Photos		Normal	Photos 2018-2-2	Edit
经	NAC_PAYA_UBI_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe ts 2018 18:56	Photos		Normal	Photos 2018-2-2	Edit
	NAC_PAYA_UBI_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
Res.	NAC_PAYA_UBI_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
	NAC_PAYA_USI_800501(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
	NAC_PAYA_UBI_800501(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
	NAC_PAYA_UBI_800601(NATIO	NAL AGGESSMEAT CENTRE SERVICES) on 02 Fe is 2018 18:55	Photos		Normal	Photos 3019-2-2	Edit
	NAC_PAYA_UBI_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on D2 Pe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
3	NAC_PAYA_UBI_BD0601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Physics 2018-2-2	Edit
	NAC_PAYA_UB1_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
1	NAC_PAYA_UBI_800501(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
	NAC_PAYA_UBI_800601(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
	NAC_PAVA_UBI_BOOSO1{ NATIO	NAL ASSESSMENT CENTRE SERVICES) on 0.2 Pe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
当使	NAC_PAYA_UBI_800801(NATIO	NAL ASSESSMENT CENTRE SERVICES) on 02 Fe b 2018 18:55	Photos		Normal	Photos 2018-2-2	Edit
♥ Video List	Uploaded By/Date	Folder Date	Die Name		8	Source	Action