

NATIONAL Assessment Centre Services (v1.1.1000)

NA1801024

Date In: 19/02/2018 19:24	Job description	Date & Time Completed	Done by
Ref No: NBA/INC 10003157/4	SAS e-mailing		
Veh No: SD 5324P	E-mail (white sheet, AIO sheet)		
D.O.A: 16/02/2018 14:25	E-Motor Claim Form	19/02/2018 19:45	
OD / TP Reporting Only	E-Motor Y/O (White sheet, TP sheet)		
	E-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass'l Report by Fax/Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW:	Tel:	Fax:
TP Particulars	Yell No: SHC 4532U	INC () / Non-INC ()
Owner / Driver:	Tel:	
Policy No:	Period:	Cover Type:
Confirmed by:	Date:	Time:
Insured/Driver Liability: () % (Note: Est. Status (WO): NI 0-20%; P: 21-79%; P: 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: ()

Removals	INC Hotline: 6788 6666	Date & Time Completed	Done by
1) Apply for Transition Allowance () / Courtesy Car ()			
2) QC Check/ Post Repair Inspection ()			
3) Upload Recovery Photo (Repair Cost > \$3000) ()			

Injury:

Date/Time	Action
	TO EMAIL NTUC

NA1801024

Summary Particulars	Invoice Preparation Checklist	Amount	Balance
Driver/Owner:	1) AR: Accident Reporting (\$30)		
Contact No:	2) DA: Damage Assessment (\$100)	INC (\$30)	
Assessed Portion:	3) TP: Towing Fee	\$40/\$40	
	4) FT: Follow-Through Survey	\$10	
	5) PT: Follow-Through Survey (Recovery)	\$10	
	For claimant against INC Only (w/ \$10 Jan 2018)		
	6) TR: Repairs	\$10	
	7) NI: (4x) DA + SMRT Survey	\$160	
	8) NTUC Additional Services		
	9) NI: Courtesy Car / Tpl Allowance	\$1	
	10) NI: Repairs Coordination	\$10	
	11) NI: Post Repair Inspection	\$10	
	12) NI: DV / Collision Unsett Coordination	\$1	
	13) NI: (1) TP (Non-INC) against INC	\$10	
	14) NI: (1) Inc liability	\$10	
	Invoice total		
	Fee charged		
	Net 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	19/02/2018 19:24
Date Of Accident	16/02/2018 14:25
Exact Location Of Accident	JALAN BUKIT MERAH TOWARDS LOWER DELTA ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJD5334P
Insured/Policyholder	
Name Of Registered Owner	KARZ-TA LEASING
Co Reg No	53318368E
Email Address	TIMORTHY_RAINBOW@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-90925046
Alternative Phone No	OFFICE-90925046

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER-1.5 MIVEC GLS 4A/T (A)
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5083195710-01
Cover Note Number	

Driver

Name of Driver	TEO TIMORTY
NRIC No	S9930468E
Date Of Birth	14/09/1999
Occupation	OUTDOOR
Date Of Driving Pass	17/01/2018
Driving Experience	0 YEAR AND 0 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90925046
Fax Number	
Contact Number	OTHERS-90925046
EMail Address	TIMORTHY_RAINBOW@HOTMAIL.COM

Address	BLK 59 STRATHMORE AVENUE #27-97
Postcode	142059
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH WEST NPC
Police Station Address	ROAD: 500 BUKIT MERAH VIEW #01-01, POSTCODE: 159682, COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180216/2061

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	SHC4532U
Vehicle Make/Model/Colour	CHRYSLER
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	CHEW KAI YAN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

SKETCH PLAN

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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:

19/02/2018

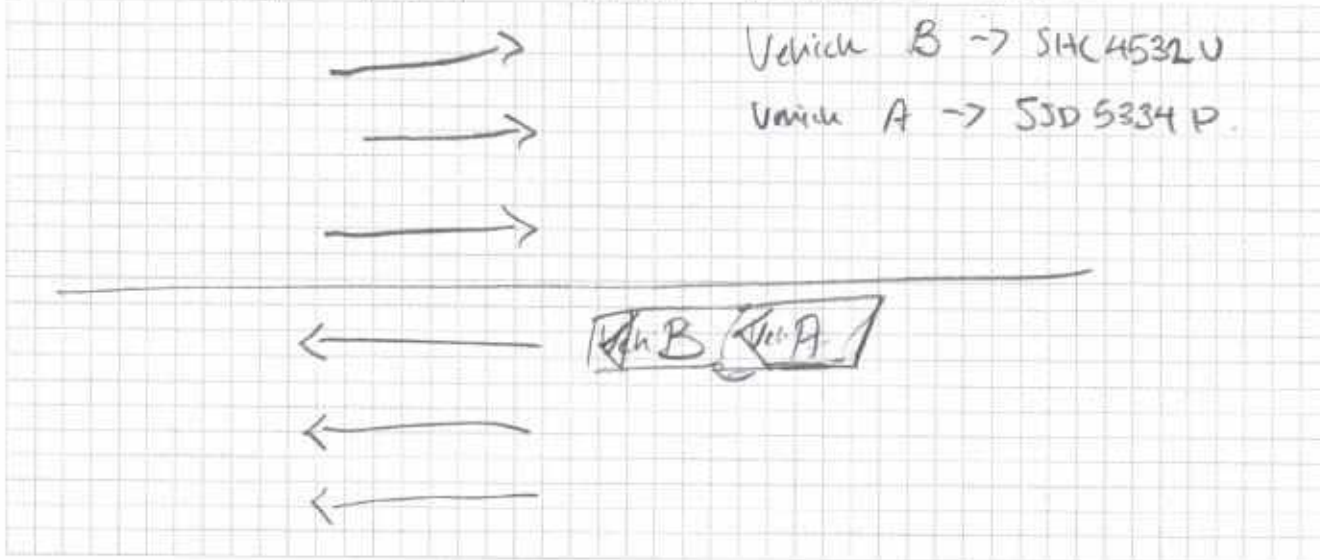
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

JEN BUKIT MERAH TOWARDS LOWAR DUKA

Vehicle B -> SHC4532U

Vehicle A -> SJD5334P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten note: PLS REFER TO POLICE REPORT 1/20180216/2061

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: ROSLI WAHAB
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180216/2061

1 of 3

Report No. T/20180216/2061

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
16/02/2018 17:13

Vide Report No.:
A/20180216/0104

Station Diary No.:
23

Informant's Particulars

Name of Informant:
TEO TIMOTHY

Address:
APT BLK 59 STRATHMORE AVENUE #27-97 SINGAPORE
142059

ID Type / ID No.:
NRIC NO / S9930468E

Contact No.:
Home/Office: Mobile: 90925046

Nationality:
SINGAPORE CITIZEN

Email:

Sex: Male Age: 18 Date of Birth: 14/09/1999

Type of Informant:
Driver

Race:
Chinese

Language:

Institution / School Name:

Occupation:
PART TIME AD HOC

Driving Licence Information:
Class: 3

Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/02/2018 15:25	Type of Location: Straight Road
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Location:
Along Road 1 Traveling Toward Road 2
JALAN BUKIT MERAH
LOWER DELTA ROAD
Along Jalan Bukit Merah towards Lower Delta Road near to traffic junction.

Weather:
Clear

Road Surface:
Dry

Road Speed Limit:

Traffic Flow:
Two Way

Traffic Control:
Traffic Light - Working

Traffic Volume:
Moderate

Type of Collision:
Between Moving Vehicles - Head To Rear

Anyone conveyed by ambulance:
Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC4532U	Car				Slightly Damaged	0
SJD5334P	Car				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180216/2061

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

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Report No. T/20180216/2061

CONTINUATION OF REPORT

Driver				
Name	TEO TIMOTHY		ID No.	S9930468E
Related Vehicle	NIL		Contact No.	90925046
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.

On 16/02/18 at about 1525hrs while I was driving along Jalan Bukit Merah towards Lower Delta Road near to the traffic light junction, there was a slight jam. I then saw that a black in colour Chrysler taxi jammed brake in front of me and I did not have sufficient time to brake that caused the front of my vehicle to collide with the rear bumper of the Chrysler. Subsequently, I got out of my vehicle and the driver of the Chrysler said that her head had moved forward upon the collision and she had a headache. She also mentioned that she had a backache as well. I also noticed that there was a light blue Volkswagen that was in front of the Chrysler but I did not engage in conversation with the driver with regards to the accident. Shortly after, traffic police and ambulance came to which the driver of Chrysler was conveyed by ambulance and my particulars was exchanged with the Chrysler taxi driver and the Volkswagen driver. I also got both of their particulars. My vehicle front bumper is dented in. I do not know how much it will cost to repair the damage. The Chrysler taxi had a slight damage to it's back bumper and I am also not sure of the cost of the damage.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999



T/20180216/2061

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Report No. T/20180216/2061

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:
D /
Sgt 2 ATIQA BINTE AFANDI

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt RAZIZ BIN TAHAR
Contact No.: 65476200

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
16/02/2018 17:13

Classification Of Case:

Claim Handling

The premium on this policy has not been collected.

Accident MT/0982721

Policy No.	5083195710-01	Vehicle No.	SJD5334P	GST Registration No.	
Policyholder Name	KARZ-TA LEASING			Policyholder NRIC	
Product Code	FLEET INSURANCE	Cover Type	Third Party	Loading	
Contact No.(Mobile)	90925046	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KPI	<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	Yes
Accident Details					
Report Date	19/02/2018 19:40	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head
Date of Accident	16/02/2018	Time of Accident hh:mm	15:25	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JALAN BUKIT MERAH TOWARDS LOWER DELTA ROAD				
Benefits					
Excess					
Own damage Excess	0.00	Additional Excess	0.00	Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,000.00	Outside Singapore TP Excess	1,000.00		
GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					
Policyholder Mailing Address					
Address 1	117 OUTRAM ROAD	Address 2	#B1-03 CONCORDE SHOPPING	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	B1-03	Related Policy Number	5083195710-01		
Q1 Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	
Unnamed driver Name	TEO TIMORTY	Driver NRIC	S9930468E	Driving Experience	
Register Date of Driver License	17/01/2018	Driver Age	18	Contact No.(Home)	
Contact No.(Mobile)	90925046	Contact No.(Office)		Address 3	
Address 1	BLK 59 #27-97	Address 2	STRATHMORE AVENUE	Post Code	
Address 4		Address Type	Foreign address		
Unit No.	27-97				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	SJD5334P	Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	KARZ-TA LEASING	Insured NRIC		
Contact No.(Mobile)	83223232	Contact No.(Home)		Contact No.(Office)		
Email Address		OT Vehicle Number	SJD5334P	TP Vehicle Number		
Claim Description	SJD5334P / SHC4532U ON 16 Feb 2018				Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GIA report		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received		
Date Registered	19/02/2018 19:44	Claim Close Date				
Report Taken By	ROSLE WAHAB					
<input type="checkbox"/> Print AK letter						

Save Submit

Attachment

Accident No.	MT/D982721	Claim No.	001		
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	19/02/2018 19:45	Category *	Confidential Urgency
Path *					

<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	▼	Normal

Attachment List

Attachment	Uploaded By/Date	Category	?	Urgency	De
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 19 Feb 2018 19:45	SAS		Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 19 Feb 2018 19:45	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 19 Feb 2018 19:45	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 19 Feb 2018 19:45	Photos		Normal	Photo
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 19 Feb 2018 19:44	Photos		Normal	Photo

Video List

Uploaded By/Date	Folder Date	File Name	?	Size
		<input type="button" value="Display in new window"/>	<input type="button" value="Scan and uploading"/>	

ACCIDENT STATEMENT

ACCIDENT DATE: (16 / 02 / 2018) (DD/MM/YYYY), TIME: (15 : 25) (HH:MM)

LOCATION: JAL BUKIT MARAH TOWARDS LAURENDAH

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SSD 5334P
 b) INSURANCE COMPANY: NMC
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: _____
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 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: KAR 2 TA CHAPIN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

- DRIVER
 a) NAME: TEO TIMOTHY (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: SM3046RE CONTACT: 90925046
 c) ADDRESS: B11C 59, SUNDARAS AIN, #27-17, S142059

* d) DATE OF BIRTH: (14 / 09 / 1999) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

i) DATE OF DRIVING PASS: _____

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

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: Butter Man Hill N.P.C

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SHC 4532-U MODEL: _____
 b) DRIVER'S NAME: CHEW KAF YAN
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

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

email = timothy-namwong@telcel.com

fax =

video

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licensee's Name: **S9930468E**

NAME: **TEO TIMOTHY**

Expiry Date: 14 Sep 1999

Issue Date: 17 Jan 2018

0027647718




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

Class	Description	EFFECTIVE DATE
Class 3	Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	17 Jan 2018

NP 428A



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9930468E



Name

TEO TIMOTHY

张 喆 秦

Race

CHINESE

Date of birth

14-09-1999

Sex

M

Country/Place of birth
SINGAPORE

S9930468E



5256543



NRIC No. S9930468E



Date of issue

10-01-2014

Address

APT BLK 59 STRATHMORE AVENUE
#27-97
SINGAPORE 140059

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: 5083195710-01

Cover : Third Party

1. Index mark and Registration Number of Vehicle : **SJD5334P**
 Chassis Number : **JMYSRCY2A8U005839**
2. Name of Policyholder : **KARZ-TA LEASING**
3. Effective Date of Insurance : **29 Aug 2017**
4. Expiry Date of Insurance : **28 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 social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) 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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: S\$1,000
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : COWELL INSURANCE (AGENCY) PTE LTD (00000610380)

Date of Issue : 08 Aug 2017 16:10 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Annex A

Transaction ref 20170829083000897655

The owner and vehicle particulars for Vehicle No. SJD5334P as at 29 Aug 2017 are as follows:

1. Name	: KARZ-TA LEASING
2. Identification No. Type	: Business
3. Identification No.	: 53318368E
4. Place Of Passport Issue	: -
5. Vehicle No.	: SJD5334P
6. Previous Vehicle No.	: -
7. Effective Date of Ownership	: 28 Aug 2017
8. Original Registration Date	: 26 Mar 2008
9. First Registration Date	: 26 Mar 2008
10. Vehicle Type	: Z10 - Private Hire (Chauffeur) Motor Car
11. Vehicle Scheme	: Normal
12. Attachment 1	: No Attachment
13. Attachment 2	: -
14. Attachment 3	: -
15. Vehicle Make Description	: MITSUBISHI
16. Vehicle Model	: LANCER 1.5 MIVEC GLS 4A/T
17. Year of Manufacture	: 2008
18. Primary Colour	: Black
19. Secondary Colour	: -
20. Passenger Capacity	: 4
21. Chassis/Trailer Chassis No.	: JMYSRCY2A8U005839 / -
22. Propellant	: Petrol
23. Engine No./Motor No.	: 4A910078445 / -
24. Engine Capacity(cc)/Power Rating(kW)	: 1499 / -
25. Maximum Power Output(kW/bhp)	: 80.0 / 107
26. Unladen Weight(kg)	: 1313