

NATIONAL Assessment Centre Services (wef 1/1/2000)

MAIR 418025968

Date In: 22/07/2018 18:22
 Ref No: NIA/1801196/3481/V
 Veh No: PZ 2052D
 D.O.A: 22/07/2018 18:50
 OD: TP Reopening Only

Job description	Date & Time Completed	Done by
SAS e-Milling		
E-mail (within 2hrs, A/C 2hrs)		
1-Motor Claim Form	NIA/1801196-002	22/07/2018 18:45
1-Motor NYO (within 24hrs, TP 4hrs)		
1-Photo Uploaded		
Assessment/Survey Report		
Ass'l Report by Fax/Hand to Owner/Whsp		

Preferred Wksp / INC Assign Wksp / OW: ()

TP Particulars: Yell No: SKP 4139L
 Owner/Driver: () INC () / Non-INC ()
 Policy No: () Period: () Cover Type: ()
 Confirmed by: () Date: ()
 Insured/Driver Liability: () % (Note: BSL Status (WO): NI 0-20%; PI 21-79%; P: 80-100%)
 Year of Registration: () Warranty: YES () / NO ()
 Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Rem: () Walk-in Customer | Customers 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: ()
 1) Apply for Transition Allowance () / Courtesy Car ()
 2) QC Check/Post Repair Inspection ()
 3) Upload Resurvey Photo (Repair Cost > \$3000) ()

Injury: ()

Date/Time	Action

NIA1801196

Customer's Details:
 Driver/Owner:
 Contact No:
 Damaged Portion:
 Checked by (Bngp-In-Charge):
 Additional Comment:
 L1:
 L2/3:

Invoice Preparation Checklist	Bill	Ad' Bill
1) AR: Accident Reporting (30)		
2) DA: Damage Assessment (3100)	INC (550)	
3) TP: Towing Fee	\$40/145	
4) PT: Follow-Through Survey	\$130	
5) PT: Follow-Through Survey (Resurvey)	\$30	
Exclude misc against INC Only (wef 10 Jan 2003)		
6) TR: Re-inspection	\$33	
7) NI: NI & DA + SMRT Survey	\$160	
8) NTUC Additional Services		
Other		
NI: Courtesy Car/TP Allowance	\$5	
NI: Repair Coordination	\$10	
NI: Post Repair Inspection	\$33	
NI: DY/Collect Excess Coordination	\$5	
TP (NI) TP (Non-INC) against INC	\$30	
NI: Nil/No Mobile	10	
Invoice total		

Stamp: 22/07/2018

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	22/02/2018 18:22
Date Of Accident	20/02/2018 18:50
Exact Location Of Accident	JUNCTION OF BOON TAT STREET/CECIL STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FZ2052D
Insured/Policyholder	
Name Of Registered Owner	AHMAD HIDAYAT BIN AHMAD SANAWA
NRIC No	S9001338F
Email Address	NORSYAKINAHMADHIDAYAT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96269764
Alternative Phone No	OTHERS-96269764

Vehicle Particulars

Manufacturer	KAWASAKI
Model	KRR ZX150 M-149CC (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5084700984-01
Cover Note Number	

Driver

Name of Driver	AHMAD HIDAYAT BIN AHMAD SANAWA
NRIC No	S9001338F
Date Of Birth	16/01/1990
Occupation	OUTDOOR
Date Of Driving Pass	14/10/2008
Driving Experience	9 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96269764
Fax Number	
Contact Number	OTHERS-96269764
E-Mail Address	NORSYAKINAHMADHIDAYAT@GMAIL.COM

Address	BLK 956 HOUGANG STREET 91 #02-296
Postcode	530956
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	COLLISION - OPENING DOOR OF VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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 EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX BLOCK A, POSTCODE: 088762, COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2369999 - FAX NO: 62268438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180221/2086

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	SKP4739L
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ZHENG ZHIGUANG
NRIC/Passport Number	S8403673J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver) 2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKC186B
Vehicle Make/Model/Colour HONDA
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 2

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature

Date & Time:

22/2/18 14:23

Driver's Signature

(If driver is not the policyholder)

Date & Time:

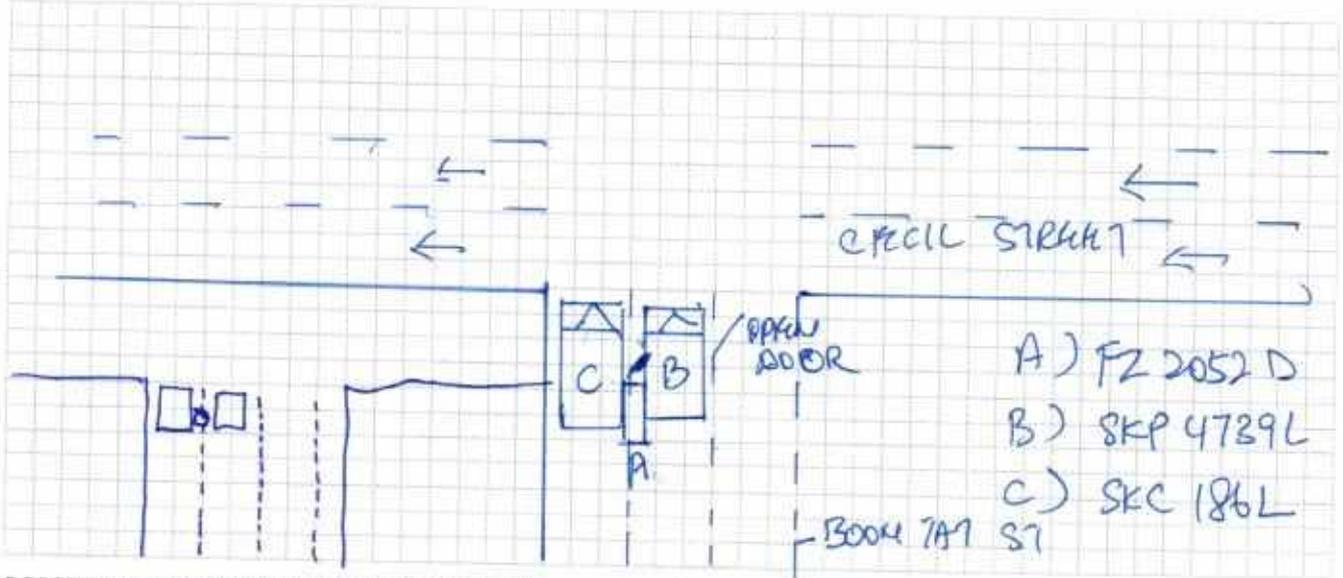
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

22/02/2018
Rashid WABDAB

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
1/20180221/2088

DECLARATION

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

Policyholder's Signature
 Date & Time: 22/1/18 14:23

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

Reporting Centre Personnel's Signature
 Name: Kelli
 NRIC/FIN No.: 22/01/2018



Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

Report No. T/20180221/2086

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FZ2052D	NTUC Income Insurance Co-Operative Limited	5084700984-01	03/10/2017	02/10/2018

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	AHMAD HIDAYAT BIN AHMAD SANAWA	ID No.	S9001338F	
Related Vehicle	FZ2052D (Motorcycle)	Contact No.	96269764	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL	
Date Treatment	20/02/2018	Date Discharge	20/02/2018	
No. of Days granted Medical Leave	07	Degree of Injury	Slight	
Driver				
Name	ZHENG ZHIGUANG	ID No.	S8403673J	
Related Vehicle	SKP4739L (Car)	Contact No.	NIL	
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 20th February 2018, I was riding my own bike bearing registration number FZ2052D while at work at around 6.50pm to 7pm, picking up food from Far East Square to send to AXA Tower when I met with an accident. I travelled along Telok Ayer Street as I turn in to Boon Tat Street towards Cecil Street, I was riding in between the 2nd and third lane. As I was approaching the junction of Boon Tat and Cecil. There were one(1) car each on the 2nd and 3rd lane as I was approaching the junction. Suddenly the door of the Honda car which was on the 2nd lane bearing registration plate number SKP4739L, opens. I last saw a Chinese lady behind the said door. I was unable to react as I was already very close and I hit straight onto the vehicle door and subsequently I flung to the left then to the ground. I do not remember if I hit the car on the 3rd lane. I remembered both drivers of the two vehicles came out to make a check on me. The other vehicle was a Honda bearing registration plate number SKC186B.

Ambulance later came and I was conveyed to the hospital after I exchanged particulars with the driver of SKP4739L. I vomited twice in the ambulance after the accident. I only know that my motorbike left lever was broken. I have not checked if there are more damages to my motorbike. In hospital, I went through a



**SINGAPORE
POLICE FORCE**



T/20180221/2086

3 of 4

Report No. T/20180221/2086

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

CONTINUATION OF REPORT

series of scans, x-rays and MRI. I vomited while in A&E and I suffered some cuts on my knees and I was discharged with a neck brace on my neck. I was also given seven(7) days of Hospitalization Leave.

I did not have any camera attached to my motorbike and helmet. I am lodging this report for traffic to look into this matter.



**SINGAPORE
POLICE FORCE**



T/20180221/2086

4 of 4

Report No. T/20180221/2086

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

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:

A /
Staff Sgt NURSALIHA BINTE SAHAWAT

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

21/02/2018 14:02

Officer In Charge Of Case:

TP / GIT /
Sr Staff Sgt RAZIZ BIN TAHAR
Contact No.: 65476200

Classification Of Case:

Authentication Stamp

NP168

Signature

Singapore Police Force

Claim Handling

[Task Transfer](#) [Exit](#)

[ICM](#) [GAL](#) [GSR](#)

Accident MT/0983141

Policy No.	5084700984-01	Vehicle No.	FZ2052D	GST Registration No.	
Policyholder Name	AHMAD HIDAYAT BIN AHMAD SANAWÉ			Policyholder NRIC	S9001338F
Product Code	MOTOCYCLE INSURANCE	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	<input type="text" value=""/>
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(%)	10	Private Hire	Not available

Accident Details

Report Date	22/02/2018 09:56	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	20/02/2018	Time of Accident hh:mm	18:50	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	BODN TAT ST X CECIL ST				

Benefits

Excess

Own damage Excess	0.00	Additional Excess	Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess	
Third Party Excess	0.00	Outside Singapore TP Excess	

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 956 #02-296	Address 2	HOU GANG STREET 91	Address 3	SINGAPORE 530956
Address 4		Address Type	Singapore address	Post Code	530956
Unit No.	02-296	Related Policy Number	5084700984-01		

OI Driver Info

Driver Name	AHMAD HIDAYAT BIN AHMAD SANAWÉ	Driver Type	Main Driver	Driver DOB	16/01/1990
Unnamed driver Name		Driver NRIC	S9001338F	Driving Experience	9
Register Date of Driver License	14/10/2008	Driver Age	26	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	SINGAPORE 530956
Address 1	BLK 956 #02-296	Address 2	HOU GANG STREET 91	Post Code	530956
Address 4		Address Type	Singapore address		
Unit No.	02-296				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Modification History

Investigation

Claim 002 OD-MX

Claim Case Officer

Claim Type	OD-MX	Insured Name	AHMAD HIDAYAT BIN AHMAD S.	Insured NRIC	S90013
Contact No.(Mobile)	96269764	Contact No.(Home)		Contact No.(Office)	
Email Address		OJ Vehicle Number	FZ2052D	TP Vehicle Number	SKP472
Claim Description	FZ2052D / SKP4739L ON 20 Feb 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability	Not at Fault	GIA report	Receive
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	22/02/
Date Registered	22/02/2018 16:44	Claim Close Date		Total Loss but Repaired	
Report Taken By	ROSLI WAHAB	Workshop Repairer			

Print AK letter

Modification History

Special Claim Creation Approval

Approval		Reason	
Remarks			

Attachment **Notes**

Accident No.	MT/0983141	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	22/02/2018 18:45
Path *		Category *	Confidential
<input type="text"/>		<input type="text"/>	<input type="text"/>
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:45	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:45	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:45	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:45	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:45	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:43	Photos	Normal	Photos 2018-2-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:42	SAS	Normal	SAS 2018-2-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 22 Feb 2018 18:42	NRIC/ Driving License	Normal	NRIC/ Driving License

Video List

Uploaded By/Date	Folder Date	File Name	Source
------------------	-------------	-----------	--------

Display in New Window Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: (20 / 02 / 2018) (DD/MM/YYYY), TIME: (18.50) (HH:MM)
LOCATION: JUNCTION OF BONG RAT STREET / CAKIL ST.

- 1. DETAILS OF VEHICLE
 - a) VEHICLE NUMBER: FZ 2052D
 - b) INSURANCE COMPANY: NTAIC
 - c) POLICY NUMBER: 5084700984-01
 - 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: 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: AHMAM Hidayat BIN AHMAD (MALE / FEMALE)
 - b) NRIC/FIN/PASSPORT: CONTACT:
 - c) ADDRESS:

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

- DRIVER
 - a) NAME: AS ABOVE (MALE / FEMALE)
 - b) NRIC/FIN/PASSPORT: CONTACT:
 - c) ADDRESS:

No of passenger
(Including driver)
(1)

- * 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) *owner*
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:

- 8. THIRD PARTY VEHICLE
 - a) VEHICLE NUMBER: SEP 4739L MODEL: Honda
 - b) DRIVER'S NAME:
 - c) NRIC/FIN/PASSPORT: CONTACT:

No of passenger
(Including driver)
()

- 9. THIRD PARTY VEHICLE
 - a) VEHICLE NUMBER: SKC 181 B MODEL: Honda
 - b) DRIVER'S NAME:
 - c) NRIC/FIN/PASSPORT: CONTACT:

No of passenger
(Including driver)
()

email = narsyak.nahmadhidayat@gmail.com

fax =

video

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9001338F



Name

AHMAD HIDAYAT BIN AHMAD
SANAWÉ

Race

BOYANESE

Date of birth

16-01-1990

Sex

M

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number: S9001338F

Name
AHMAD HIDAYAT BIN AHMAD
SANAWÉ

Birth Date: 16 Jan 1990

Issue Date: 14 Oct 2008



3671411



NRIC No. S9001338F



Date of issue
03-02-2005

Address

APT BLK 956 HOUGANG STREET 91
#02-296
SINGAPORE 530956

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

PASS DATE

Class 2B Motorcycles <= 200 cc

14 Oct 2008



NR 42BA

eBaoTech

General Claim

Hello, NAC_BUKIT_MERAH_800676

Change Language Change Password Log Out

My Desktop
Notice of Loss

Policy Query

Policy No. Date of Accident:

Vehicle No. (For Motor):

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	SOB4700984-01	AHMAD HIDAYAT BIN AHMAD SANAWÉ	S9001330F	GMC	Third Party	FZ2052D	FZ2052D	03/10/2017	02/10/2018

Continue